



Blue Shield TotalDual Plan (HMO D-SNP)

2024 Directorio de Proveedores de

Condado: San Diego

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

Blue Shield TotalDual Plan | Directorio de Proveedores de 2024

Introducción

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

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

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



www.blueshieldca.com/medicare.

A. Avisos legales

- ❖ En este Directorio se incluyen los profesionales de atención de la salud (como médicos, profesionales de enfermería calificados para ejercer ciertas funciones del médico [*nurse practitioners*] y psicólogos) y centros (como hospitales o clínicas). También se incluyen proveedores de apoyo y servicios a largo plazo (LTSS, por sus siglas en inglés) (como proveedores de cuidado de día para adultos y de atención de la salud en el hogar) con los que puede atenderse como miembro de Blue Shield TotalDual Plan. También incluimos las farmacias que puede usar para obtener sus medicamentos recetados.
- ❖ En este Directorio, el término “proveedores de la red” hace referencia a ellos. Estos proveedores firmaron un contrato con nosotros para brindarle servicios. Esta es una lista de los proveedores de la red de Blue Shield TotalDual Plan para el condado de San Diego.
- ❖ Puede conseguir este documento gratis en otros formatos, como letra grande, braille o audio. Llame al 1 800 452 4413 (TTY: 711), de 8:00 a. m. a 8:00 p. m., los 7 días de la semana. La llamada es gratis.
- ❖ Tenemos servicios de intérpretes gratis para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o de medicamentos. Si necesita un intérprete, llámenos al 1-800-452-4413. Una persona que hable inglés, español, árabe, farsi, armenio, jemer, coreano, ruso, tagalo o vietnamita puede brindarle ayuda. El servicio es gratuito. Puede hacer un pedido permanente para conseguir este documento en un idioma que no sea inglés o en un formato alternativo ahora y en el futuro. Para hacer un pedido, comuníquese con Blue Shield TotalDual Plan. Atención al Cliente se asegurará de que sus preferencias de idioma y formato quede registradas para futuras comunicaciones. Para actualizar sus preferencias, comuníquese con Blue Shield TotalDual Plan.
- ❖ La lista está actualizada al 09/04/2024, pero debe tener en cuenta que:
 - Es posible que algunos proveedores de la red de Blue Shield TotalDual Plan se hayan agregado o quitado de nuestra red después de la publicación de este Directorio.
 - Es posible que algunos de los proveedores de Blue Shield TotalDual Plan que forman parte de nuestra red ya no acepten miembros nuevos. Si tiene problemas para encontrar un proveedor que acepte miembros nuevos, llame a Atención al Cliente al 1 800 452 4413 (TTY: 711) y le brindaremos ayuda.
 - Para obtener la información más actualizada sobre los proveedores de la red de Blue Shield TotalDual Plan en su área, visite www.blueshieldca.com/medicare o llame a Atención al Cliente al 1 800 452 4413 (TTY: 711), de 8:00 a. m. a 8:00 p. m., los 7 días de la semana. La llamada es gratis.

Los médicos y otros profesionales de atención de la salud de la red de Blue Shield TotalDual Plan aparecen en la página 13-2912.

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

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

B1. Términos claves

Esta sección explica los términos claves de nuestro Directorio.

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

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

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

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

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

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

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

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

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

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

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

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

Para elegir un PCP, vea la lista de médicos en la página 13-2912 y elija un médico:

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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www.blueshieldca.com/medicare.



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

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

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

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

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

Cantidad total de PCP: 2960

Cantidad total de especialistas: 2710

Cantidad total de hospitales: 20

Cantidad total de proveedores de acupuntura y quiroprácticos: No Data

Cantidad total de proveedores dentales: No Data

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

Cantidad total de proveedores de servicios de salud mental: 368

Cantidad total de proveedores de atención de la vista: 472

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

Cantidad total de centros de salud mental: No Data

Cantidad total de centros de enfermería especializada: 88

Cantidad total de proveedores de otros servicios: 1

C1. Lista de proveedores de la red

Hospitales afiliados

ALVARADO HOSPITAL LLC

Effective as of 01-AUG-12

6655 ALVARADO RD
SAN DIEGO, CA 92120

ENCOMPASS HEALTH REHABILITATION HOSPITAL OF MURRIETA

Effective as of 01-AUG-20

35470 WHITEWOOD RD
MURRIETA, CA 92563

HEMET GLOBAL MEDICAL CENTER

Effective as of 01-JAN-20

1117 E DEVONSHIRE AVE
HEMET, CA 92543

Birthing Friendly: Y

HOAG HOSPITAL IRVINE

Effective as of 01-FEB-14

16200 SAND CANYON AVE
IRVINE, CA 92618

HOAG ORTHOPEDIC INSTITUTE

Effective as of 01-JAN-12

16250 SAND CANYON AVE
IRVINE, CA 92618

KINDRED HOSPITAL SAN DIEGO

Effective as of 01-JAN-12

1940 EL CAJON BLVD
SAN DIEGO, CA 92104

MENIFEE GLOBAL MEDICAL CENTER

Effective as of 01-JAN-20

28400 MCCALL BLVD
SUN CITY, CA 92585

MISSION HOSPITAL LAGUNA BEACH

Effective as of 01-JAN-10

31872 COAST HWY
LAGUNA BEACH, CA 92651

PALOMAR HEALTH

Effective as of 01-JAN-12

15615 POMERADO RD
POWAY, CA 92064

Birthing Friendly: Y

PALOMAR MEDICAL CENTER

Effective as of 01-JAN-12

2185 CITRACADO PKWY
ESCONDIDO, CA 92029

PARADISE VALLEY HOSPITAL

Effective as of 01-AUG-12

2400 E 4TH ST
NATIONAL CITY, CA 91950

PROVIDENCE MISSION HOSPITAL

Effective as of 01-JAN-10

27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691

Birthing Friendly: Y

SADDLEBACK MEMORIAL MED CTR

Effective as of 01-JAN-12

24451 HEALTH CENTER DR
LAGUNA HILLS, CA 92653

Birthing Friendly: Y

SCRIPPS GREEN HOSPITAL

Effective as of 01-JAN-12

10666 N TORREY PINES RD

MS 220

LA JOLLA, CA 92037

SCRIPPS MEMORIAL HOSPITAL

Effective as of 01-JAN-12

9888 GENESEE AVE
LA JOLLA, CA 92037

Birthing Friendly: Y

SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Effective as of 01-JAN-12

354 SANTA FE DR
ENCINITAS, CA 92024

Birthing Friendly: Y

SCRIPPS MERCY HOSPITAL

Effective as of 01-JAN-12

4077 5TH AVE
SAN DIEGO, CA 92103

Birthing Friendly: Y

SCRIPPS MERCY HOSPITAL CHULA VISTA

Effective as of 01-JAN-12

435 H ST
CHULA VISTA, CA 91910

SELECT SPECIALTY HOSPITAL SAN DIEGO

Effective as of 01-JAN-12

555 WASHINGTON ST
SAN DIEGO, CA 92103

TRI CITY MEDICAL CTR

Effective as of 01-JAN-12

4002 VISTA WAY
OCEANSIDE, CA 92056

Birthing Friendly: Y

C1. Lista de proveedores de la red

Hospitales afiliados

UCSD LA JOLLA JOHN SALLY THORNTON

Effective as of 01-OCT-14

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

UCSD MEDICAL CTR

Effective as of 01-OCT-14

 200 W ARBOR DR
SAN DIEGO, CA 92103




Birthing Friendly: Y

CI. Lista de proveedores de la red




Centros de atención de urgencia

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




ACCELERATED URGENT CARE

 28110 CLINTON KEITH RD
MURRIETA, CA 92563
 (951) 436-0777
 SU-SA 8:00AM-9:00PM




ACCELERATED URGENT CARE

 41540 WINCHESTER RD
TEMECULA, CA 92590
 (951) 365-5585
 SU-SA 8:00AM-9:00PM




ACCELERATED URGENT CARE

 36290 HIDDEN SPRINGS RD
WILDOMAR, CA 92595
 (951) 483-2020
 SU-SA 8:00AM-9:00PM

BAHIA FAMILY MEDICAL GROUP INC



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

CONCENTRA URGENT CARE




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

CONCENTRA URGENT CARE




 542 BROADWAY STE G

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




CONCENTRA URGENT CARE

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




CONCENTRA URGENT CARE

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




CONCENTRA URGENT CARE

 7862 EL CAJON BLVD
LA MESA, CA 91942
 (866) 944-6046
 M-F 8:00AM-5:00PM




CONCENTRA URGENT CARE

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

CONCENTRA URGENT CARE



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

CONCENTRA URGENT CARE




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

CONCENTRA URGENT CARE




 3910 VISTA WAY STE 106

OCEANSIDE, CA 92056
 (866) 944-6046
 M-F 8:00AM-5:00PM

CONCENTRA URGENT CARE

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



CONCENTRA URGENT CARE

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




CONCENTRA URGENT CARE

 5575 RUFFIN RD STE 100
SAN DIEGO, CA 92123
 (866) 944-6046






CONCENTRA URGENT CARE

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

CONCENTRA URGENT CARE

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

CONCENTRA URGENT CARE



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

CONCENTRA URGENT CARE




 9745 PROSPECT AVE STE

CI. Lista de proveedores de la red




Centros de atención de urgencia

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




DOCTORS EXPRESS OF OCEANSIDE INC

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




EAST COUNTY URGENT CARE

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




HOAG CLINIC

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

HOAG CLINIC


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

HOAG CLINIC




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

M-F 8:00AM-8:00PM
SA 8:00AM-5:00PM




HOAG CLINIC

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




HOAG CLINIC

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




INLAND URGENT CARE A MED CORP

 27168 NEWPORT RD STE 1
MENIFEE, CA 92584
 (951) 246-3033
 SU-SA 9:00AM-9:00PM




INLAND URGENT CARE A MED CORP

 29738 RANCHO CALIFORNIA RD STE B
TEMECULA, CA 92591
 (951) 303-6440
 SU-SA 9:00AM-6:00PM




INLAND URGENT CARE OF SUN CITY

 27168 NEWPORT RD STE 1
MENIFEE, CA 92584
 (951) 246-3033
 SU-SA 9:00AM-9:00PM




MARQUE URGENT CARE

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



MARQUE URGENT CARE

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




MARQUE URGENT CARE

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

MISSION HERITAGE MED GRP

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

MISSION HERITAGE MED GRP


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

O C URGENT CARE MEDICAL GRP INC

 26781 PORTOLA PKWY STE 4E
FOOTHILL RANCH, CA 92610


C1. Lista de proveedores de la red

Centros de atención de urgencia

 (949) 297-3888


OPTUM


 145 THUNDER DR
VISTA, CA 92083


 (760) 941-9002

SAND CANYON URGENT CARE

MED CTR


 15775 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618


 (949) 417-0272

 SU 11:00AM-5:00PM
M-F 8:00AM-8:00PM
SA 9:00AM-5:00PM

SOUTHBAY URGENT CARE INC

 1628 PALM AVE
SAN DIEGO, CA 92154

 (619) 591-9999

 SU 10:00AM-6:00PM
M-F 9:00AM-8:00PM
SA 10:00AM-6:00PM

C1. Lista de proveedores de la red

Proveedores de atención primaria

GENERAL PRACTICE

THOMAS, SEAN, MD^{M†}

Provider ID: 100112751013

15 MAREBLU STE 310
ALISO VIEJO, CA 92656

(949) 831-1001

French, Spanish

Effective as of 01-APR-19

INTERNAL MEDICINE

HERMAN, SAM, MD^M

Provider ID: 100414181004

26671 ALISO CREEK RD STE
206

ALISO VIEJO, CA 92656

(949) 791-3104

Effective as of 01-SEP-23

KAYE, SHAWN, MD^M

Provider ID: 100347353012

26671 ALISO CREEK RD STE
206

ALISO VIEJO, CA 92656

(949) 791-3104

Effective as of 01-JAN-21

FQHC

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,

Provider ID: PG0094125003

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

(619) 662-4100

Teleservice

Effective as of 01-JAN-21

FAMILY PRACTICE

AJIR, MAHYAR, DO^{M†}

Provider ID: 100067406005

2801 JEFFERSON ST
CARLSBAD, CA 92008

(760) 729-4952

Farsi, Persian, Spanish

Effective as of 01-APR-16

KORFF, GARY, MD^{M†}

Provider ID: 100021811011

2910 JEFFERSON ST STE
100

CARLSBAD, CA 92008

(760) 729-7186

Spanish

Effective as of 01-JAN-23

PEREZ, RONALD, MD^{M†}

Provider ID: 100323488011

1207 CARLSBAD VILLAGE
DR STE A

CARLSBAD, CA 92008

(760) 896-3030

Spanish, Tagalog

Effective as of 01-JAN-20

VOURLITIS, MELISSA, DO^{F*}

Provider ID: 100090572021

2855 CARLSBAD BLVD
CARLSBAD, CA 92008

(858) 832-2500

Teleservice

Effective as of 01-NOV-23

FQHC

TRUECARE,

Provider ID: PG0092587007

1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

(760) 736-6767

Teleservice

Effective as of 01-JUL-22

GENERAL PRACTICE

KREMER, ARNOLD, DO^M

Provider ID: 100023664010

5814 VAN ALLEN WAY STE
215

CARLSBAD, CA 92008

(760) 444-5544

French, Spanish

Teleservice

Effective as of 01-APR-23

INTERNAL MEDICINE

CHONG, YOO JIN, MD^{M†}

Provider ID: 100055662004

5930 PRIESTLY DR
CARLSBAD, CA 92008

(760) 434-6060

Korean

Effective as of 01-NOV-21

CHONG, MARIBETH, MD^F

Provider ID: 100092861004

5930 PRIESTLY DR
CARLSBAD, CA 92008

(760) 434-6060

Spanish, Tagalog

Effective as of 01-NOV-21

CHONG, YOO JIN, MD^{M†}

Provider ID: 100055662003

5930 PRIESTLY DR
CARLSBAD, CA 92008

(760) 434-6060

Korean

Effective as of 01-NOV-21

CHONG, MARIBETH, MD^F

Provider ID: 100092861003

5930 PRIESTLY DR
CARLSBAD, CA 92008

(760) 434-6060

Spanish, Tagalog


Effective as of 01-NOV-21

HALL, ANDREW, MD^{M†}




Provider ID: 100089811012




2910 JEFFERSON ST STE




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




100
 CARLSBAD, CA 92008
 (760) 729-7186
 Effective as of 01-DEC-22




FAMILY PRACTICE




ALANIZ, MATEO, MD^{M†}
 Provider ID: 100220769002
 678 3RD AVE
 CHULA VISTA, CA 91910
 (619) 662-4100
 Spanish
 Effective as of 01-NOV-14




ALANIZ, MATEO, MD^{M†}
 Provider ID: 100220769006
 678 3RD AVE
 CHULA VISTA, CA 91910
 (619) 662-4100
 Spanish
 Effective as of 01-JAN-21




ALB, SIMONA, MD^{F†}
 Provider ID: 100033656005
 480 4TH AVE STE 202
 CHULA VISTA, CA 91910
 (619) 427-3361
 Romanian
 Effective as of 01-OCT-12




ALB, SIMONA, MD^{F†}
 Provider ID: 100033656019
 480 4TH AVE STE 202
 CHULA VISTA, CA 91910
 (619) 427-3361
 Romanian
 Effective as of 01-SEP-22




ALB, SIMONA, MD^{F†}
 Provider ID: 100033656006
 480 4TH AVE STE 202
 CHULA VISTA, CA 91910
 (619) 427-3361
 Romanian

Effective as of 01-JAN-14
ALB, SIMONA, MD^{F†}
 Provider ID: 100033656016
 480 4TH AVE STE 202
 CHULA VISTA, CA 91910
 (619) 427-3361
 Romanian
 Effective as of 01-SEP-22




ALJAWADI, GEORGIA, DO^{F†}
 Provider ID: 100133625018
 480 4TH AVE STE 202
 CHULA VISTA, CA 91910
 (619) 427-3361
 Filipino, Spanish, Tagalog
 Effective as of 01-JAN-21




ALJAWADI, GEORGIA, DO^{F†}
 Provider ID: 100133625022
 480 4TH AVE STE 202
 CHULA VISTA, CA 91910
 (619) 427-3361
 Filipino, Spanish, Tagalog
 Effective as of 01-SEP-22




ALJAWADI, GEORGIA, DO^{F†}
 Provider ID: 100133625005
 480 4TH AVE STE 202
 CHULA VISTA, CA 91910
 (619) 427-3361
 Filipino, Spanish, Tagalog
 Effective as of 01-NOV-12




ALJAWADI, GEORGIA, DO^{F†}
 Provider ID: 100133625021
 480 4TH AVE STE 202
 CHULA VISTA, CA 91910
 (619) 427-3361
 Filipino, Spanish, Tagalog
 Effective as of 01-JUN-24




ALVAREZ-ESTRADA, MIGUEL, MD^{M†}
 Provider ID: 100360099015




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

ARCE GOMEZ, LAURA, MD^{F*}
 Provider ID: 100300002012
 678 3RD AVE
 CHULA VISTA, CA 91910
 (619) 662-4100
 Spanish, Tagalog
 Effective as of 01-JUN-24

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

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

ELSAYED, MOHAMMED, MD^{M†}
 Provider ID: 100020910015
 330 OXFORD ST STE 106
 CHULA VISTA, CA 91911
 (619) 409-1802
 Arabic, German, Spanish
 Effective as of 01-MAY-18

ELSAYED, MOHAMMED, MD^{M†}
 Provider ID: 100020910032
 330 OXFORD ST STE 106
 CHULA VISTA, CA 91911
 (619) 409-1802
 Arabic, German, Spanish
 Effective as of 01-NOV-20

C1. Lista de proveedores de la red

Proveedores de atención primaria

ELSAYED, MOHAMMED, MD^{M†}

Provider ID: 100020910031

330 OXFORD ST STE 106
CHULA VISTA, CA 91911

(619) 409-1802

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

ELSAYED, MOHAMMED, MD^{M†}

Provider ID: 100020910029

330 OXFORD ST STE 106
CHULA VISTA, CA 91911

(619) 409-1802

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

ELSAYED, MOHAMMED, MD^{M†}

Provider ID: 100020910030

330 OXFORD ST STE 106
CHULA VISTA, CA 91911

(619) 409-1802

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

ELSAYED, MOHAMMED, MD^{M†}

Provider ID: 100020910028

330 OXFORD ST STE 106
CHULA VISTA, CA 91911

(619) 409-1802

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

FARRIS, REUBEN, MD^{M†}

Provider ID: 100105788004

340 4TH AVE STE 2
CHULA VISTA, CA 91910

(619) 422-8338

Spanish

Effective as of 01-OCT-12

GARCIA, KARLA, MD^{F†}

Provider ID: 100269760005

678 3RD AVE
CHULA VISTA, CA 91910

(619) 662-4100

Spanish

Teleservice

Effective as of 01-APR-23

GARCIA, KARLA, MD^{F†}

Provider ID: 100269760002

678 3RD AVE
CHULA VISTA, CA 91910

(619) 662-4100

Spanish

Teleservice

Effective as of 01-MAR-16

JIMENEZ, KRYSTAL, MD^{F†}

Provider ID: 100359300004

678 3RD AVE
CHULA VISTA, CA 91910

(619) 662-4100

Effective as of 01-JAN-21

MARTINEZ, ELADIO, MD^{M†}

Provider ID: 100415320012

299 J ST
CHULA VISTA, CA 91910

(858) 554-1212

Spanish

Teleservice

Effective as of 01-MAY-24

MARTINEZ, ELADIO, MD^M

Provider ID: 100415320002

299 J ST
CHULA VISTA, CA 91910

(858) 554-1212

Spanish

Teleservice

Effective as of 01-OCT-23

MARTINEZ, ELADIO, MD^M

Provider ID: 100415320011

299 J ST
CHULA VISTA, CA 91910

(858) 554-1212

Spanish

Teleservice

Effective as of 01-APR-24

MARTINEZ, ELADIO, MD^M

Provider ID: 100415320005

299 J ST
CHULA VISTA, CA 91910

(858) 554-1212

Spanish

Teleservice

Effective as of 01-DEC-23

MATTHEWS, MERRITT, MD^{M†}

Provider ID: 100021162015

752 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911

(619) 656-0206

Spanish, Tagalog

Effective as of 01-NOV-20

MATTHEWS, MERRITT, MD^{M†}

Provider ID: 100021162019

752 MEDICAL CENTER CT
CHULA VISTA, CA 91911

(619) 656-0206

Spanish, Tagalog

Effective as of 01-FEB-21

MERRILL, SARAH, MD^{F†}

Provider ID: 100214679020

678 3RD AVE
CHULA VISTA, CA 91910

(619) 662-4100

Spanish

Effective as of 01-JAN-21

MONDRAGON, GUSTAVO, MD^M

Provider ID: 100177550031

855 THIRD AVE
STE 2230
CHULA VISTA, CA 91911

(619) 656-5252

Spanish

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

Effective as of 01-OCT-23

MONDRAGON, GUSTAVO, MD
M

Provider ID: 100177550016

📍 855 THIRD AVE
STE 2230
CHULA VISTA, CA 91911
☎ (619) 656-5252

📄 Spanish

Effective as of 01-FEB-24

MONDRAGON, GUSTAVO, MD
M†

Provider ID: 100177550027

📍 480 4TH AVE STE 500
CHULA VISTA, CA 91910
☎ (619) 656-5252

📄 Spanish

Effective as of 01-FEB-23

MONDRAGON, GUSTAVO, MD
M†

Provider ID: 100177550028

📍 480 4TH AVE STE 500
CHULA VISTA, CA 91910
☎ (619) 656-5252

📄 Spanish

Effective as of 01-FEB-23

MOYA, MARY, MD^{F*}

Provider ID: 100099596009

📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100

📄 Spanish

Effective as of 01-APR-23

MOYA, MARY, MD^F

Provider ID: 100099596012

📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100

📄 Spanish

Effective as of 01-JUN-24

NGUYEN, CARIE, MD^{F†}

Provider ID: 100099766005

📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100

Effective as of 01-NOV-20

NGUYEN, CARIE, MD^{F†}

Provider ID: 100099766010

📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100

Effective as of 01-APR-23

NOVENCIDO, JOSEPH, DO^{M†}

Provider ID: 100244053020

📍 752 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
☎ (619) 527-7700

📄 Spanish

Effective as of 01-AUG-24

NOVENCIDO, JOSEPH, DO^{M†}

Provider ID: 100244053017

📍 752 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
☎ (619) 527-7700

📄 Spanish

Effective as of 01-SEP-20

ORTIZ ILIZALITURRI, ANA, MD
^{F††}

Provider ID: 100394347004

📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100

📄 Spanish

Teleservice

Effective as of 01-OCT-22

PALOMINO, MARY, MD^{F†}

Provider ID: 100249271002

📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100

📄 Spanish

Effective as of 01-JUL-15

PATEL, PAAVAN, DO^M

Provider ID: 100413256007

📍 752 MEDICAL CENTER CT
CHULA VISTA, CA 91911
☎ (619) 527-7700

Effective as of 01-NOV-23

PATEL, PAAVAN, DO^M

Provider ID: 100413256011

📍 752 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
☎ (619) 656-0206

Effective as of 01-DEC-23

PIEROS, JANELLE, DO^{F†}

Provider ID: 100220799004

📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100

📄 Faroese, Spanish

Effective as of 01-OCT-15

RIZKALLAH, JEAN, MD^{M††}

Provider ID: 100106136010

📍 450 4TH AVE STE 408
CHULA VISTA, CA 91910
☎ (619) 691-1990

📄 French, Spanish

Effective as of 01-MAR-16

RIZKALLAH, JEAN, MD^{M†}

Provider ID: 100106136009

📍 450 4TH AVE STE 408
CHULA VISTA, CA 91910
☎ (619) 691-1990

📄 French, Spanish

Effective as of 01-MAR-15

C1. Lista de proveedores de la red

Proveedores de atención primaria

ROSADO, IVAN, MD^{M†}

Provider ID: 100365788004
📍 1637 3RD AVE STE H
CHULA VISTA, CA 91911
☎ (619) 662-4100
Effective as of 01-FEB-21

ROSADO, IVAN, MD^{M†}

Provider ID: 100365788003
📍 1635 3RD AVE
CHULA VISTA, CA 91911
☎ (619) 662-4100
Effective as of 01-JAN-21

STILLWELL, CARLA, MD^{F†}

Provider ID: 100147691017
📍 480 4TH AVE STE 202
CHULA VISTA, CA 91910
☎ (619) 427-3361
📱 Polish, Portuguese, Spanish
Effective as of 01-JAN-21

STILLWELL, CARLA, MD^{F†}

Provider ID: 100147691005
📍 480 4TH AVE STE 202
CHULA VISTA, CA 91910
☎ (619) 427-3361
📱 Polish, Portuguese, Spanish
Effective as of 01-OCT-12

STILLWELL, CARLA, MD^{F†}

Provider ID: 100147691020
📍 480 4TH AVE STE 202
CHULA VISTA, CA 91910
☎ (619) 427-3361
📱 Polish, Portuguese, Spanish
Effective as of 01-SEP-22

SWARTZ, JOHN, MD^{M†}

Provider ID: 100097829004
📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100
📱 Spanish
Effective as of 01-JAN-14

TALAVERA, GREGORY, MD^M

Provider ID: 100334847006
📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100
📱 Spanish
Teleservice
Effective as of 01-APR-23

TREJO, RAUL, MD^M

Provider ID: 100088864004
📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100
📱 Spanish
Effective as of 01-JAN-14

VAZQUEZ-BOJORQUEZ, ALEJANDRA, MD^F

Provider ID: 100391945011
📍 752 MEDICAL CENTER CT
STE 200
CHULA VISTA, CA 91911
☎ (858) 554-1212
📱 Spanish
Effective as of 01-DEC-22

VOURLITIS, MELISSA, DO^{F*}

Provider ID: 100090572020
📍 3302 BONITA RD
CHULA VISTA, CA 91910
☎ (858) 832-2500
Teleservice
Effective as of 01-NOV-23

WHITLEY, NICHOLAS, MD^{M†}

Provider ID: 100197848006
📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100
📱 Spanish
Effective as of 01-JAN-21

FQHC

CHULA VISTA FAMILY HLTH CTR,

Provider ID: PG0025044035
📍 251 LANDIS AVE
CHULA VISTA, CA 91910
☎ (619) 515-2500
Effective as of 01-JAN-21

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC,

Provider ID: PG0082946004
📍 352 L ST
CHULA VISTA, CA 91911
☎ (619) 515-2325
Effective as of 01-JAN-21

SAN YSIDRO HEALTH CHULA VISTA, *†

Provider ID: PG0047560016
📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100
Teleservice
Effective as of 01-JAN-21

SAN YSIDRO HEALTH SOUTH BAY LATINO RESEARCH CENTER,

Provider ID: PG0120846002
📍 780 BAY BLVD STE 200
CHULA VISTA, CA 91910
☎ (619) 662-4100
Effective as of 01-APR-23

SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS,

Provider ID: PG0127835002
📍 280 E ST
CHULA VISTA, CA 91910
☎ (619) 662-4100
Teleservice
Effective as of 01-JUN-24

CI. Lista de proveedores de la red

Proveedores de atención primaria

GENERAL PRACTICE

CEPIN, MONICA, MD^{F†}

Provider ID: 100090156004

333 H ST STE 2000
CHULA VISTA, CA 91910
(619) 427-0665
Catalan, French, Italian
Teleservice

Effective as of 01-JUL-15

CEPIN, MONICA, MD^{F†}

Provider ID: 100090156007

333 H ST STE 2000
CHULA VISTA, CA 91910
(619) 427-0665
Catalan, French, Italian
Teleservice

Effective as of 01-JUL-15

FARRIS, REUBEN, MD^{M†}

Provider ID: 100105788005

340 4TH AVE STE 2
CHULA VISTA, CA 91910
(619) 422-8338
Spanish

Effective as of 01-JAN-14

GUEFEN, URI, MD^{M†}

Provider ID: 100072802029

299 J ST
CHULA VISTA, CA 91910
(858) 779-2366
Spanish
Teleservice

Effective as of 01-DEC-23

GUEFEN, URI, MD^{M†}

Provider ID: 100072802018

299 J ST
CHULA VISTA, CA 91910
(858) 779-2366
Spanish
Teleservice

Effective as of 01-MAR-22

GUEFEN, URI, MD^{M†}

Provider ID: 100072802015

299 J ST
CHULA VISTA, CA 91910
(858) 779-2366
Spanish
Teleservice

Effective as of 01-NOV-23

TOLEDO-NADER, CAROLL, MD^{M†}

Provider ID: 100106153012

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

Effective as of 01-SEP-19

INTERNAL MEDICINE

BALDERAS-MAGALLANES, RODOLFO, MD^M

Provider ID: 100419155007

678 THIRD AVE
CHULA VISTA, CA 91910
(619) 662-4100
Spanish
Teleservice

Effective as of 01-JUN-24

BALDERAS-MAGALLANES, RODOLFO, MD^M

Provider ID: 100419155006

678 3RD AVE
CHULA VISTA, CA 91910
(619) 662-4100
Spanish
Teleservice

Effective as of 01-JUN-24

BALDERAS-MAGALLANES, RODOLFO, MD^M

Provider ID: 100419155002

678 THIRD AVE
CHULA VISTA, CA 91910
(619) 662-4100
Spanish
Teleservice

Effective as of 01-DEC-23

BRACE, ELION, MD^{M†}

Provider ID: 100159959035

450 4TH AVE STE 408
CHULA VISTA, CA 91910
(619) 691-1990
Albanian, Italian, Spanish
Effective as of 01-OCT-23

BRACE, ELION, MD^{M†}

Provider ID: 100159959020

450 4TH AVE STE 408
CHULA VISTA, CA 91910
(619) 691-1990
Albanian, Italian, Spanish
Effective as of 01-AUG-20

CHEN, TSUH-YIN, MD^F

Provider ID: 100187934013

678 3RD AVE
CHULA VISTA, CA 91910
(619) 662-4100
Portuguese, Spanish
Effective as of 01-AUG-24

CHEN, TSUH-YIN, MD^F

Provider ID: 100187934012

678 3RD AVE
CHULA VISTA, CA 91910
(619) 662-4100
Portuguese, Spanish
Effective as of 01-APR-23

DE LA ROSA, JOSE, MD^M

Provider ID: 100357668004

880 3RD AVE STE A
CHULA VISTA, CA 91911
(619) 662-4100

C1. Lista de proveedores de la red

Proveedores de atención primaria

Teleservice

Effective as of 01-FEB-23

DE LA ROSA, RENATO, MD^M

Provider ID: 100110262022

754 MEDICAL CENTER CT
STE 103

CHULA VISTA, CA 91911

(619) 397-5001

Spanish, Tagalog

Effective as of 01-SEP-22

DE LA ROSA, RENATO, MD^M

Provider ID: 100110262018

754 MEDICAL CENTER CT
STE 103

CHULA VISTA, CA 91911

(619) 397-5001

Spanish, Tagalog

Effective as of 01-JAN-21

DE LA ROSA, RENATO, MD^M

Provider ID: 100110262019

754 MEDICAL CENTER CT
STE 103

CHULA VISTA, CA 91911

(619) 397-5001

Spanish, Tagalog

Effective as of 01-JAN-21

DE LA ROSA, RENATO, MD^M

Provider ID: 100110262005

754 MEDICAL CENTER CT
STE 103

CHULA VISTA, CA 91911

(619) 397-5001

Spanish, Tagalog

Effective as of 01-FEB-18

HAMMETT, ERIN, DO^{Ft}

Provider ID: 100274639012

678 3RD AVE
CHULA VISTA, CA 91910

(619) 662-4100

Spanish

Effective as of 01-MAR-21

**HINOJOSA-VALENCIA,
ALEJANDRO, MD^M**

Provider ID: 100108386019

629 THIRD AVE
CHULA VISTA, CA 91910

(619) 422-6158

Spanish

Effective as of 01-MAY-24

KAISEY, MUSHRIK, MD^{Mt}

Provider ID: 100024815019

340 4TH AVE STE 9
CHULA VISTA, CA 91910

(619) 426-9731

Arabic, Spanish

Effective as of 01-JAN-21

KAISEY, MUSHRIK, MD^{Mt}

Provider ID: 100024815009

340 4TH AVE STE 9
CHULA VISTA, CA 91910

(619) 426-9731

Arabic, Spanish

Effective as of 01-JAN-14

KAISEY, MUSHRIK, MD^{Mt}

Provider ID: 100024815007

340 4TH AVE STE 9
CHULA VISTA, CA 91910

(619) 426-9731

Arabic, Spanish

Effective as of 01-OCT-12

KAISEY, MUSHRIK, MD^{Mt}

Provider ID: 100024815021

340 4TH AVE STE 9
CHULA VISTA, CA 91910

(619) 426-9731

Arabic, Spanish

Effective as of 01-SEP-22

MAY, LOUIS, MD^{Mt}

Provider ID: 100325305003

1061 TIERRA DEL REY STE
303 304 305

CHULA VISTA, CA 91910

(619) 662-4100

Spanish

Teleservice

Effective as of 01-JUN-21

OLIVER, DEANNA, MD^{Ft}

Provider ID: 100328564043

1323 3RD AVE
CHULA VISTA, CA 91911

(619) 409-6900

Spanish

Effective as of 01-MAR-24

OLIVER, DEANNA, MD^{Ft}

Provider ID: 100328564034

1323 3RD AVE
CHULA VISTA, CA 91911

(619) 409-6900

Spanish

Effective as of 01-SEP-22

OLIVER, DEANNA, MD^{Ft}

Provider ID: 100328564027

1323 3RD AVE
CHULA VISTA, CA 91911

(619) 409-6900

Spanish

Effective as of 01-SEP-21

OLIVER, DEANNA, MD^{Ft}

Provider ID: 100328564041

1323 3RD AVE
CHULA VISTA, CA 91911

(619) 409-6900

Spanish

Effective as of 01-NOV-23

OLIVER, DEANNA, MD^F



Provider ID: 100328564045


2436 FENTON ST STE
100-B



CHULA VISTA, CA 91914




C1. Lista de proveedores de la red




Proveedores de atención primaria




 (619) 264-1934
 Spanish
Effective as of 01-MAR-24




OLIVER, DEANNA, MD^F
Provider ID: 100328564040
 2436 FENTON ST STE
100-B
CHULA VISTA, CA 91914

 (619) 264-1934
 Spanish
Effective as of 01-NOV-23




PENA, JOSE, MD^{M†}
Provider ID: 100104432022
 333 H ST STE 1065
CHULA VISTA, CA 91910
 (619) 691-1766
 Spanish
Effective as of 01-MAY-21

PENA, JOSE, MD^{M†}
Provider ID: 100104432023
 333 H ST STE 1065
CHULA VISTA, CA 91910
 (619) 691-1766
 Spanish
Effective as of 01-MAY-21




PENA, JOSE, MD^{M†}
Provider ID: 100104432025
 333 H ST STE 1065
CHULA VISTA, CA 91910
 (619) 691-1766
 Spanish
Effective as of 01-FEB-23

PENA, JOSE, MD^{M†}
Provider ID: 100104432024
 333 H ST STE 1065
CHULA VISTA, CA 91910
 (619) 691-1766
 Spanish
Effective as of 01-JUL-21




UWEDJOJEVWE, LETICIA, MD^{F†}

Provider ID: 100110303030
 340 4TH AVE STE 10
CHULA VISTA, CA 91910
 (619) 934-2215
 Spanish
Effective as of 01-JAN-21




UWEDJOJEVWE, LETICIA, MD^{F†}

Provider ID: 100110303031
 340 4TH AVE STE 10
CHULA VISTA, CA 91910
 (619) 934-2215
 Spanish
Effective as of 01-NOV-23



UWEDJOJEVWE, LETICIA, MD^{F†}

Provider ID: 100110303015
 340 4TH AVE STE 10
CHULA VISTA, CA 91910
 (619) 934-2215
 Spanish
Effective as of 01-JAN-18



UWEDJOJEVWE, LETICIA, MD^{F†}

Provider ID: 100110303013
 340 4TH AVE STE 10
CHULA VISTA, CA 91910
 (619) 934-2215
 Spanish
Effective as of 01-DEC-17




OBSTETRICS / GYNECOLOGY

ATIGA, SCHUBERT, MD^M
Provider ID: 100075572018
 678 3RD AVE
CHULA VISTA, CA 91910
 (619) 662-4100



 Spanish, Tagalog
Effective as of 01-AUG-24

KOBAYASHI, KAREN, DO^F
Provider ID: 100039829018
 678 3RD AVE
CHULA VISTA, CA 91910
 (619) 662-4100
Effective as of 01-AUG-24




PEDIATRICS

GARCIA, CARLOS, MD^{M†}
Provider ID: 100067783008
 1392 E PALOMAR ST STE
501
CHULA VISTA, CA 91913
 (619) 271-4059
 Spanish
Effective as of 01-JAN-14

INTERNAL MEDICINE

ZAKI, MICHELLE, DO^F
Provider ID: 100360975007
 3955 BEDFORD CANYON
RD
STE 103
CORONA, CA 92883
 (951) 293-4722
Teleservice
Effective as of 01-AUG-23

FAMILY PRACTICE

GAIKWAD, SHILPA, MD^{F††}
Provider ID: 100113091011
 32585 GOLDEN LANTERN
ST STE E
DANA POINT, CA 92629
 (877) 696-3622
 Hindi, Spanish
Effective as of 01-AUG-22

INTERNAL MEDICINE

C1. Lista de proveedores de la red

Proveedores de atención primaria

PATHAK, RAJIV, MD^M

Provider ID: 100423996002

 32585 GOLDEN LANTERN
ST STE E
DANA POINT, CA 92629
 (949) 240-2555
 Gujarati, Hindi, Sindhi
Effective as of 01-MAR-24

GENERAL PRACTICE

KREMER, ARNOLD, DO^{M†}




Provider ID: 100023664009

 1349 CAMINO DEL MAR
STE B
DEL MAR, CA 92014
 (858) 925-8233
 French, Spanish
Teleservice
Effective as of 01-JAN-21

INTERNAL MEDICINE

ALAMAR, ALI, MD^M




Provider ID: 100106664017

 2658 DEL MAR HEIGHTS
RD STE 504
DEL MAR, CA 92014
 (619) 724-6644
 Arabic, Spanish
Effective as of 01-JUL-24

FAMILY PRACTICE




ALMANSOUR, MUMTAZ, MD^{M†}

Provider ID: 100107873026

 165 S 1ST ST
EL CAJON, CA 92019
 (619) 312-0347
 Arabic, Chaldean
Neo-Aramaic, Kurdish
Effective as of 01-JAN-21




ALMANSOUR, MUMTAZ, MD^{M†}

Provider ID: 100107873024

 330 S MAGNOLIA AVE STE
101
EL CAJON, CA 92020
 (619) 593-3007
 Arabic, Chaldean
Neo-Aramaic, Kurdish
Effective as of 01-JUL-22




ALMANSOUR, MUMTAZ, MD^{M†}

Provider ID: 100107873025

 330 S MAGNOLIA AVE STE
101
EL CAJON, CA 92020
 (619) 593-3007
 Arabic, Chaldean
Neo-Aramaic, Kurdish
Effective as of 01-JAN-21




BEYENE, YEMISRACH, MD^{F†}

Provider ID: 100376573004

 5442 SYCUAN RD
EL CAJON, CA 92019
 (619) 445-0707
 Amharic
Effective as of 01-SEP-22




GHAFAARI, DAUOD, MD^M

Provider ID: 100309539005

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

GREEN, HANNAH, MD^F



Provider ID: 100403549002

 855 E MADISON AVE
EL CAJON, CA 92020
 (619) 440-2751
 Spanish
Effective as of 01-APR-23

JALISI, NEJAT, MD^{F†}




Provider ID: 100114413018

 1320 E MADISON AVE

EL CAJON, CA 92021
 (619) 456-9800
 Arabic, Farsi, Persian
Effective as of 01-JAN-21

JALISI, NEJAT, MD^{F†}

Provider ID: 100114413020

 1320 E MADISON AVE
EL CAJON, CA 92021
 (619) 456-9800
 Arabic, Farsi, Persian
Effective as of 01-SEP-22

KASAWA, JOHN, MD^{M†}

Provider ID: 100039117021

 875 EL CAJON BLVD
EL CAJON, CA 92020
 (619) 662-4100
 Arabic, Chaldean
Neo-Aramaic, Spanish
Teleservice
Effective as of 01-JAN-21




KASAWA, JOHN, MD^{M†}

Provider ID: 100039117023

 875 EL CAJON BLVD
EL CAJON, CA 92020
 (619) 662-4100
 Arabic, Chaldean
Neo-Aramaic, Spanish
Teleservice
Effective as of 01-APR-23

MCHENRY, KATHRYN, DO^F

Provider ID: 100320650010


 855 E MADISON AVE
EL CAJON, CA 92020
 (619) 440-2751
 Spanish
Effective as of 01-JAN-24

MOULD, KEVIN, MD^{M†}

Provider ID: 100112431013

 855 E MADISON AVE
EL CAJON, CA 92020


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

 (619) 440-2751
 Effective as of 01-JAN-24

MOULD, KEVIN, MD^{M†}

Provider ID: 100112431012


 855 E MADISON AVE
 EL CAJON, CA 92020

 (619) 440-2751
 Effective as of 01-AUG-20

PUTRUS, RAMIZ, MD^M

Provider ID: 100348831004

 183 S 1ST ST
 EL CAJON, CA 92019

 (619) 328-1335


 Arabic

Effective as of 01-AUG-22

RONQUILLO, KAREN AN, DO^F

Provider ID: 100421622002

 855 E MADISON AVE
 EL CAJON, CA 92020

 (619) 440-2751


 Spanish

Effective as of 01-FEB-24

RONQUILLO, KAREN AN, DO^F

Provider ID: 100421622006

 855 E MADISON AVE
 EL CAJON, CA 92020

 (619) 440-2751


 Spanish

Effective as of 01-JUL-24

RONQUILLO, KAREN AN, DO^F

Provider ID: 100421622004

 855 E MADISON AVE
 EL CAJON, CA 92020

 (619) 440-2751

 Spanish


Effective as of 01-APR-24

ROUEL, LINDA, MD^{F†}

Provider ID: 100259719024

 860 JAMACHA RD STE 107

EL CAJON, CA 92019

 (619) 456-9920


 Arabic, Assyrian, Mandarin

Effective as of 01-AUG-21

ROUEL, LINDA, MD^{F†}

Provider ID: 100259719007

 860 JAMACHA RD STE 107
 EL CAJON, CA 92019

 (619) 456-9920


 Arabic, Assyrian, Mandarin


Effective as of 01-FEB-18

ROUEL, LINDA, MD^{F†}

Provider ID: 100259719020

 860 JAMACHA RD STE 107
 EL CAJON, CA 92019

 (619) 456-9920


 Arabic, Assyrian, Mandarin

Effective as of 01-JAN-21

ROUEL, LINDA, MD^{F†}

Provider ID: 100259719021

 860 JAMACHA RD STE 107
 EL CAJON, CA 92019

 (619) 456-9920


 Arabic, Assyrian, Mandarin

Effective as of 01-JAN-21

ROUEL, LINDA, MD^{F†}

Provider ID: 100259719025

 860 JAMACHA RD STE 107
 EL CAJON, CA 92019

 (619) 456-9920


 Arabic, Assyrian, Mandarin

Effective as of 01-SEP-22

SALEM, RAMSEY, MD^{M†}

Provider ID: 100360207006

 875 EL CAJON BLVD
 EL CAJON, CA 92020


 (858) 939-5864

Effective as of 01-AUG-21

SAZEGAR, PAYAM, MD^{M†}

Provider ID: 100187888014

 1032 BROADWAY
 EL CAJON, CA 92021

 (619) 795-5991


Teleservice

Effective as of 01-JUL-21

SAZEGAR, PAYAM, MD^{M†}

Provider ID: 100187888012

 165 S 1ST ST
 EL CAJON, CA 92019

 (619) 312-0347


Teleservice

Effective as of 01-JUL-21

STONES, RACHEL, MD^F

Provider ID: 100387928009

 1032 BROADWAY
 EL CAJON, CA 92021

 (619) 795-5991

 Spanish


Teleservice

Effective as of 01-MAY-22

STONES, RACHEL, MD^F

Provider ID: 100387928010

 165 S 1ST ST
 EL CAJON, CA 92019

 (619) 312-0347


 Spanish

Teleservice


Effective as of 01-MAY-22

VOURLITIS, MELISSA, DO^{F*}

Provider ID: 100090572018

 11588 VIA RANCHO SAN
 DIEGO

EL CAJON, CA 92019

 (858) 832-2500



Teleservice



Effective as of 01-NOV-23



FQHC



CENTRO MEDICO EL CAJON,



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



Provider ID: PG0010260015
 133 W MAIN ST STE 100
 EL CAJON, CA 92020
 (619) 873-8940
 Effective as of 01-JAN-21

CHASE AVENUE FAMILY HEALTH CTRS INC,
 Provider ID: PG0025044040
 1111 W CHASE AVE
 EL CAJON, CA 92020
 (619) 515-2499
 Effective as of 01-JAN-21



FAMILY HLTH CTR SAN DIEGO-EL CAJON,
 Provider ID: PG0084245003
 525 E MAIN ST
 EL CAJON, CA 92020
 (619) 515-2498
 Effective as of 01-JAN-21

LA MAESTRA CHC EL CAJON BROADWAY, †
 Provider ID: PG0085229003
 1032 BROADWAY
 EL CAJON, CA 92021
 (619) 795-5991
 Teleservice
 Effective as of 01-JAN-21




LA MAESTRA CHC-REA AVE,
 Provider ID: PG0129902002
 181 REA AVE
 EL CAJON, CA 92020
 (619) 312-0347
 Effective as of 01-JUN-24

LA MAESTRA FAMILY CLINIC INC, †
 Provider ID: PG0053396002
 165 S 1ST ST
 EL CAJON, CA 92019
 (619) 312-0347



Teleservice
 Effective as of 01-JAN-21




SAN YSIDRO HEALTH EL CAJON,
 Provider ID: PG0111464002
 875 EL CAJON BLVD
 EL CAJON, CA 92020
 (619) 662-4100
 Teleservice
 Effective as of 01-JAN-21



GENERAL PRACTICE


MOOSAVI, MOHAMMAD, MD^{M†}
 Provider ID: 100339082002
 343 E MAIN ST STE 102
 EL CAJON, CA 92020
 (619) 447-6001
 Farsi
 Effective as of 01-JUL-19




INTERNAL MEDICINE




AL-TAMEEMI, AHMED, MD^{M†}
 Provider ID: 100338426004
 133 W MAIN ST STE 100
 EL CAJON, CA 92020
 (619) 401-0404
 Effective as of 01-NOV-20




AWDISHO, ALAN, DO^{M†}
 Provider ID: 100381973002
 875 EL CAJON BLVD
 EL CAJON, CA 92020
 (619) 662-4100
 Assyrian, Syriac
 Teleservice
 Effective as of 01-JAN-22




BENSON, JIMI, MD^{M†}
 Provider ID: 100149523029
 1351 BROADWAY
 EL CAJON, CA 92021
 (619) 383-6703




 Spanish, Vietnamese
 Effective as of 01-APR-21

BENSON, JIMI, MD^{M†}
 Provider ID: 100149523023
 1351 BROADWAY
 EL CAJON, CA 92021
 (619) 383-6703
 Spanish, Vietnamese
 Effective as of 01-JAN-21

BENSON, JIMI, MD^{M†}
 Provider ID: 100149523026
 1351 BROADWAY
 EL CAJON, CA 92021
 (619) 383-6703
 Spanish, Vietnamese
 Effective as of 01-JUN-21

BENSON, JIMI, MD^{M†}
 Provider ID: 100149523028
 1351 BROADWAY
 EL CAJON, CA 92021
 (619) 383-6703
 Spanish, Vietnamese
 Effective as of 01-MAR-21

BENSON, JIMI, MD^{M†}
 Provider ID: 100149523031
 1351 BROADWAY
 EL CAJON, CA 92021
 (619) 383-6703
 Spanish, Vietnamese
 Effective as of 01-OCT-23




EL-GHONEIMY, AHMED, MD^{M†}
 Provider ID: 100103500015
 165 S 1ST ST
 EL CAJON, CA 92019
 (619) 312-0347
 Arabic, French, Italian
 Teleservice
 Effective as of 01-AUG-22

ELIAS, RAMIZ, MD^{M†}




C1. Lista de proveedores de la red

Proveedores de atención primaria




Provider ID: 100105850047

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




JAHANPANA, FERESHTEH, MD^{F†}

Provider ID: 100076454021
 343 E MAIN ST STE 101
EL CAJON, CA 92020
 (619) 447-6001
 Arabic, Faroese, Farsi
Effective as of 01-SEP-22



JAHANPANA, FERESHTEH, MD^{F†}

Provider ID: 100076454017
 343 E MAIN ST STE 101
EL CAJON, CA 92020
 (619) 447-6001
 Arabic, Faroese, Farsi
Effective as of 01-AUG-20


JAHANPANA, FERESHTEH, MD^{F†}

Provider ID: 100076454007
 343 E MAIN ST STE 101
EL CAJON, CA 92020
 (619) 447-6001
 Arabic, Faroese, Farsi
Effective as of 01-JUL-19

MANSY, TAMARA, MD^F




Provider ID: 100363067008
 875 EL CAJON BLVD
EL CAJON, CA 92020
 (619) 662-4100
Effective as of 01-JUN-24

MICHAEL, RAMI, MD^{M†}




Provider ID: 100341876009
 875 EL CAJON BLVD

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




NASSIR, BASSAM, MD^{M††}

Provider ID: 100159191015
 875 EL CAJON BLVD
EL CAJON, CA 92020
 (619) 662-4100
 Arabic
Effective as of 01-MAY-21




NASSIR, BASSAM, MD^{M††}

Provider ID: 100159191011
 436 S MAGNOLIA AVE STE
101
EL CAJON, CA 92020
 (619) 662-4100
 Arabic
Effective as of 01-MAR-16



REDDY, ARJUN, MD^{M†}


Provider ID: 100050929006
 5442 SYCUAN RD
EL CAJON, CA 92019
 (619) 445-0707
 Spanish
Effective as of 01-JAN-21

ROUEL, WADI, MD^{M†}




Provider ID: 100246050015
 860 JAMACHA RD STE 107
EL CAJON, CA 92019
 (619) 456-9920
 Arabic, Assyrian, Spanish
Effective as of 01-SEP-22

ROUEL, WADI, MD^{M†}




Provider ID: 100246050016
 860 JAMACHA RD STE 107
EL CAJON, CA 92019
 (619) 456-9920

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




ROUEL, WADI, MD^{M†}

Provider ID: 100246050008
 860 JAMACHA RD STE 107
EL CAJON, CA 92019
 (619) 456-9920
 Arabic, Assyrian, Spanish
Effective as of 01-JAN-21

ROUEL, WADI, MD^{M†}




Provider ID: 100246050009
 860 JAMACHA RD STE 107
EL CAJON, CA 92019
 (619) 456-9920
 Arabic, Assyrian, Spanish
Effective as of 01-JAN-21

ZAYED, AHMAD, MD^M



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

FAMILY PRACTICE

CLOTFELTER, CHRISTINE, DO^{F††}

Provider ID: 100065251012
 477 N EL CAMINO REAL
STE A306
ENCINITAS, CA 92024
 (760) 942-0118
 Spanish
Effective as of 01-SEP-21

DUCK, CRAIG, MD^{M*}

Provider ID: 100086514008
 477 N EL CAMINO REAL
STE A306
ENCINITAS, CA 92024
 (760) 942-0118

C1. Lista de proveedores de la red

Proveedores de atención primaria

Effective as of 01-SEP-21

FARSAD, RAMIN, MD^M

Provider ID: 100028293005
477 N EL CAMINO REAL
STE A100
ENCINITAS, CA 92024
(760) 943-9111
Farsi, Fataleka, Persian
Effective as of 01-APR-02

KAKIMOTO, AMY, MD^{F†}

Provider ID: 100113530009
477 N EL CAMINO REAL
STE A306
ENCINITAS, CA 92024
(760) 942-0118
French
Effective as of 01-SEP-21

MERCER, SCOTT, MD^{M*}

Provider ID: 100030142008
320 SANTA FE DR STE 205
ENCINITAS, CA 92024
(760) 944-8484
Spanish
Teleservice
Effective as of 01-SEP-21

PAYNE, RICHARD, MD^{M†}

Provider ID: 100069305009
477 N EL CAMINO REAL
STE A306
ENCINITAS, CA 92024
(760) 942-0118
Spanish
Effective as of 01-SEP-21

SEXTON, PERRY, MD^{M†}

Provider ID: 100099693003
351 SANTA FE DR STE 101
ENCINITAS, CA 92024
(760) 274-1385
Spanish
Effective as of 01-FEB-11

WILLIE, KADEN, DO^M

Provider ID: 100350661007
1130 2ND ST
ENCINITAS, CA 92024
(760) 736-6767
Portuguese
Effective as of 01-SEP-23

GENERAL PRACTICE

FARSAD, RAMIN, MD^M

Provider ID: 100028293009
477 N EL CAMINO REAL
STE A100
ENCINITAS, CA 92024
(760) 943-9111
Farsi, Fataleka, Persian
Effective as of 01-JAN-21

INTERNAL MEDICINE

STEPHENSON, ROBERT, MD^{M††}

Provider ID: 100031646009
320 SANTA FE DR STE 303
ENCINITAS, CA 92024
(760) 943-6730
Spanish
Effective as of 01-SEP-21

TAGDIRI, KEVEN, MD^{M*}

Provider ID: 100064987002
4401 MANCHESTER AVE
STE 103
ENCINITAS, CA 92024
(858) 756-3021
Farsi, Spanish
Effective as of 01-MAR-03

FAMILY PRACTICE

AVILA, MICHAEL, MD^{M††}

Provider ID: 100369494002
460 N ELM ST
ESCONDIDO, CA 92025

(833) 867-4642
Effective as of 01-JUN-21

COX, VICTORIA, MD^{F†}

Provider ID: 100374049005
704 E GRAND AVE
ESCONDIDO, CA 92025
(619) 662-4100
Teleservice
Effective as of 01-AUG-22

DE ROTH, GEORGINE, MD^F

Provider ID: 100409222002
362 W MISSION AVE STE
105
ESCONDIDO, CA 92025
(760) 741-1224
French, Hungarian, Spanish
Effective as of 01-JUL-23

DE ROTH, GEORGINE, MD^F

Provider ID: 100409222004
362 W MISSION AVE STE
105
ESCONDIDO, CA 92025
(760) 741-1224
French, Hungarian, Spanish
Effective as of 01-AUG-23

DE ROTH, GEORGINE, MD^F

Provider ID: 100409222006
362 W MISSION AVE STE
105
ESCONDIDO, CA 92025
(760) 741-1224
French, Hungarian, Spanish
Effective as of 01-DEC-23



ESPARZA, SOPHIA, MD^F

Provider ID: 100402893002
488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025
(760) 466-9800
Spanish




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

Effective as of 01-MAR-23




HERNANDEZ RIVERA, JOSE DANIEL, MD^M

Provider ID: 100145294006
 1121 E WASHINGTON AVE
 ESCONDIDO, CA 92025
 (760) 871-0606
 Effective as of 01-MAY-24




KAUR, JATINDER, MD^F

Provider ID: 100315025010
 460 N ELM ST
 ESCONDIDO, CA 92025
 (760) 520-8100
 Hindi, Punjabi, Urdu
 Effective as of 01-AUG-21




MCHENRY, KATHRYN, DO^{Ft}

Provider ID: 100320650009
 460 N ELM ST
 ESCONDIDO, CA 92025
 (760) 520-8100
 Spanish
 Effective as of 01-JAN-24


MCHENRY, KATHRYN, DO^{Ft}


Provider ID: 100320650005
 460 N ELM ST
 ESCONDIDO, CA 92025
 (760) 520-8100
 Spanish
 Effective as of 01-APR-21

MCHENRY, KATHRYN, DO^F



Provider ID: 100320650016
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025
 (760) 737-6900
 Spanish
 Effective as of 01-FEB-24

PATEL, JITENBHAI, MD^M




Provider ID: 100339325007
 728 E VALLEY PKWY

ESCONDIDO, CA 92025
 (760) 737-6900
 Effective as of 01-JAN-24




PATEL, JITENBHAI, MD^M

Provider ID: 100339325006
 460 N ELM ST
 ESCONDIDO, CA 92025
 (760) 520-8100
 Effective as of 01-JAN-24




RASHCOVSKY SCHIFF, KARIN, MD^F

Provider ID: 100331220007
 460 N ELM ST
 ESCONDIDO, CA 92025
 (760) 520-8100
 French
 Effective as of 01-JAN-24




RASHCOVSKY SCHIFF, KARIN, MD^F

Provider ID: 100331220005
 460 N ELM ST
 ESCONDIDO, CA 92025
 (760) 520-8100
 French
 Effective as of 01-AUG-20




SCHULTZ, JAMES, MD^{Mt}

Provider ID: 100030577016
 460 N ELM ST
 ESCONDIDO, CA 92025
 (760) 520-8100
 Farsi, Greek, Spanish
 Effective as of 01-AUG-20




SCHULTZ, JAMES, MD^{Mt}

Provider ID: 100030577028
 460 N ELM ST
 ESCONDIDO, CA 92025
 (760) 520-8100
 Farsi, Greek, Spanish
 Effective as of 01-JAN-24




SCHULTZ, JAMES, MD^M

Provider ID: 100030577030
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025
 (760) 737-6900
 Farsi, Greek, Spanish
 Effective as of 01-JAN-24




SCHULTZ, JAMES, MD^M

Provider ID: 100030577026
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025
 (760) 737-6900
 Farsi, Greek, Spanish
 Effective as of 01-MAR-23



SIVA, TENAYA, MD^M

Provider ID: 100418703004
 704 E GRAND AVE
 ESCONDIDO, CA 92025
 (619) 662-4100
 Spanish
 Teleservice
 Effective as of 01-NOV-23

SNYDER, CHRISTOPHER, DO^{Mt}

Provider ID: 100024789048
 704 E GRAND AVE
 ESCONDIDO, CA 92025
 (619) 662-4100
 Spanish
 Teleservice
 Effective as of 01-FEB-22

VOURLITIS, MELISSA, DO^{Ft}

Provider ID: 100090572019
 710 W 13TH AVE
 ESCONDIDO, CA 92025
 (858) 832-2500
 Teleservice
 Effective as of 01-NOV-23

FQHC

CENTRO MEDICO ESCONDIDO,

C1. Lista de proveedores de la red

Proveedores de atención primaria

Provider ID: PG0083717004
📍 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
☎ (760) 871-0606
Teleservice
Effective as of 01-JAN-21

ESCONDIDO FAMILY HEALTH CENTER,

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

NEIGHBORHOOD HEALTHCARE ESCONDIDO,

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

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL,

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

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL,

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

NEIGHBORHOOD

HEALTHCARE VALLEY PARKWAY,
Provider ID: PG0024990046
📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025
☎ (760) 737-6900
Teleservice
Effective as of 01-JUL-22

PALOMAR FAMILY COUNSELING SERVICES,
Provider ID: PG0125237002
📍 1002 E GRAND AVE
ESCONDIDO, CA 92025
☎ (760) 741-2660
Effective as of 01-DEC-23

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE,
Provider ID: PG0094132003
📍 704 E GRAND AVE
ESCONDIDO, CA 92025
☎ (619) 662-4100
Teleservice
Effective as of 01-JUN-22

GENERAL PRACTICE

LOPEZ, IRMA, MD^{Ft}
Provider ID: 100082249016
📍 1035 E GRAND AVE STE 101
ESCONDIDO, CA 92025
☎ (760) 480-4747
📄 Spanish
Effective as of 01-JAN-21

INTERNAL MEDICINE

CARRERA, JORGE, MD^{Mt}
Provider ID: 100075629010
📍 704 E GRAND AVE
ESCONDIDO, CA 92025
☎ (619) 662-4100

📄 Spanish
Teleservice
Effective as of 01-FEB-22

CHEN, MARGARET, MD^{Ft}
Provider ID: 100184661008
📍 460 N ELM ST
ESCONDIDO, CA 92025
☎ (760) 520-8100
📄 Greek, Spanish
Effective as of 01-AUG-20

PEDIATRICS

STRAZICICH, KARLA, MD^F
Provider ID: 100080501007
📍 426 N DATE ST
ESCONDIDO, CA 92025
☎ (760) 690-5900
📄 Spanish
Effective as of 01-JAN-24

FAMILY PRACTICE

CHRISTIE, PATRICIA, MD^F
Provider ID: 100407567004
📍 1328 S MISSION RD
FALLBROOK, CA 92028
☎ (760) 451-4720
Effective as of 01-AUG-23

DEEL, MARGARET, MD^{Ft}
Provider ID: 100027747012
📍 593 E ELDER ST STE B
FALLBROOK, CA 92028
☎ (760) 723-5900
📄 Spanish
Effective as of 01-AUG-20

DEEL, MARGARET, MD^{Ft}
Provider ID: 100027747016
📍 593 E ELDER ST STE B
FALLBROOK, CA 92028
☎ (760) 723-5900
📄 Spanish

CI. Lista de proveedores de la red

Proveedores de atención primaria

Effective as of 01-MAR-24

DEEL, MARGARET, MD^{F†}

Provider ID: 100027747004

📍 593 E ELDER ST STE B
FALLBROOK, CA 92028

☎ (760) 723-5900

🗂 Spanish

Effective as of 01-OCT-14

DEEL, MARGARET, MD^{F†}

Provider ID: 100027747014

📍 593 E ELDER ST STE B
FALLBROOK, CA 92028

☎ (760) 723-5900

🗂 Spanish

Effective as of 01-NOV-20

DEEL, MARGARET, MD^{F†}

Provider ID: 100027747015

📍 593 E ELDER ST STE B
FALLBROOK, CA 92028

☎ (760) 723-5900

🗂 Spanish

Effective as of 01-SEP-22

MILLER, BRANDON, DO^{M†}

Provider ID: 100148562018

📍 521 E ELDER ST STE 103
FALLBROOK, CA 92028

☎ (760) 728-8344

Effective as of 01-NOV-20

MILLER, BRANDON, DO^{M†}

Provider ID: 100148562015

📍 521 E ELDER ST STE 105
FALLBROOK, CA 92028

☎ (760) 728-8344

Effective as of 01-DEC-18

FQHC

FALLBROOK FAMILY HLTH CTR,

Provider ID: PG0009519020

📍 1328 S MISSION RD
FALLBROOK, CA 92028

☎ (760) 451-4720

Teleservice

Effective as of 01-JUL-22

VISTA COMMUNITY CLINIC,

Provider ID: PG0072409011

📍 321 E ALVARADO ST
FALLBROOK, CA 92028

☎ (760) 723-6200

Teleservice

Effective as of 01-MAR-23

INTERNAL MEDICINE

CVIJANOVIC, GORAN, MD^{M†}

Provider ID: 100370457002

📍 1328 S MISSION RD
FALLBROOK, CA 92028

☎ (760) 451-4720

Effective as of 01-JUN-21

STRUTZ, PETER, MD^M

Provider ID: 100092315007

📍 605 E ALVARADO ST STE
100
FALLBROOK, CA 92028

☎ (760) 728-8489

🗂 Spanish

Effective as of 01-SEP-21

FAMILY PRACTICE

ARMANIOUS, NANCY, MD^{F†}

Provider ID: 100379442002

📍 26795 PORTOLA PKWY
FOOTHILL RANCH, CA
92610

☎ (949) 829-9403

Effective as of 01-NOV-21

DECOCK, JAMES, MD^{M†}

Provider ID: 100051324014

📍 26795 PORTOLA PKWY

FOOTHILL RANCH, CA
92610

☎ (949) 829-9403

Effective as of 01-APR-15

INTERNAL MEDICINE

PATEL, BAKULKUMAR, MD^{M†}

Provider ID: 100034722006

📍 26740 TOWNE CENTRE DR
BLDG C

FOOTHILL RANCH, CA
92610

☎ (949) 588-9293

🗂 Gujarati, Hindi, Spanish

Effective as of 01-JAN-18

PEYMAN, HELYA, DO^F

Provider ID: 100414352003

📍 26672 PORTOLA PKWY STE
104

FOOTHILL RANCH, CA
92610

☎ (949) 557-0750

Effective as of 01-SEP-23

VALADEZ, JESUS, MD^{M†}

Provider ID: 100098540068

📍 26672 PORTOLA PKWY STE
104

FOOTHILL RANCH, CA
92610

☎ (949) 557-0750

🗂 Spanish

Effective as of 01-JAN-21

FAMILY PRACTICE

ANDERSON, ALBERT, MD^{M†}

Provider ID: 100079441012

📍 1000 E LATHAM AVE STE G
HEMET, CA 92543

☎ (951) 391-0580

🗂 Spanish

Teleservice

C1. Lista de proveedores de la red

Proveedores de atención primaria

Effective as of 01-AUG-22

ASHRAF, HADIA, MD^{F†}

Provider ID: 100094934002

903 E DEVONSHIRE AVE
STE F
HEMET, CA 92543

(951) 929-1611

Farsi, Hindi, Persian

Effective as of 01-OCT-98

ASHRAF, HADIA, MD^{F†}

Provider ID: 100094934008

903 E DEVONSHIRE AVE
STE F
HEMET, CA 92543

(951) 929-1611

Farsi, Hindi, Persian

Effective as of 01-OCT-20

CARSON, MIA, MD^F

Provider ID: 100384377002

949 CALHOUN PL STE G
HEMET, CA 92543

(951) 765-5594

Effective as of 01-MAR-22

COMBS, MATTHEW, MD^{M†}

Provider ID: 100337168008

3853 W STETSON AVE STE
200
HEMET, CA 92545

(951) 225-6802

Effective as of 01-NOV-20

GANTA, SANYASI, MD^{M†}

Provider ID: 100113069011

225 LAURSEN ST
HEMET, CA 92543

(951) 925-6657

Hindi, Spanish, Telugu

Effective as of 01-APR-21

GANTA, SANYASI, MD^{M†}

Provider ID: 100113069005

225 LAURSEN ST
HEMET, CA 92543

(951) 925-6657

Hindi, Spanish, Telugu

Effective as of 01-JAN-17

GOHIL, RAJIT, MD^{M†}

Provider ID: 100391418005

2390 E FLORIDA AVE STE
104
HEMET, CA 92544

(951) 414-4011

Effective as of 01-OCT-22

GOHIL, RAJIT, MD^{M†}

Provider ID: 100391418004

2390 E FLORIDA AVE STE
104
HEMET, CA 92544

(951) 414-4011

Effective as of 01-OCT-22

HARRISON, AMY, MD^F

Provider ID: 100410706005

2390 E FLORIDA AVE STE
104
HEMET, CA 92544

(951) 414-4011

Spanish

Effective as of 01-AUG-23

HARRISON, AMY, MD^F

Provider ID: 100410706006

2390 E FLORIDA AVE STE
104
HEMET, CA 92544

(951) 414-4011

Spanish

Effective as of 01-AUG-23

HUGHES, LARRY, MD^{M†}

Provider ID: 100049939002

4020 W FLORIDA AVE STE
H
HEMET, CA 92545

(951) 925-9565

Effective as of 01-SEP-09

HUGHES, HEATHER, MD^{F*}

Provider ID: 100050011003

4020 W FLORIDA AVE
HEMET, CA 92545

(951) 925-9565

Effective as of 01-NOV-13

HUNT, TYRELLE, MD^F

Provider ID: 100417653002

1701 E FLORIDA AVE
HEMET, CA 92544

(951) 658-4486

Spanish

Effective as of 01-NOV-23

MEHARDA, SANJIWANI, MD^F

Provider ID: 100327486019

255 N GILBERT ST STE C2
HEMET, CA 92543

(951) 694-8549

Hindi, Punjabi, Urdu

Effective as of 01-DEC-23

OBRIEN, KATHARINE, DO^{F†}

Provider ID: 100319273003

1600 E FLORIDA AVE STE
103
HEMET, CA 92544

(951) 929-8121

Effective as of 01-DEC-17

SANDHU, BASANT, MD^M

Provider ID: 100315195009

903 E DEVONSHIRE AVE
STE D
HEMET, CA 92543

(951) 216-6100

German, Hindi, Punjabi

Effective as of 01-AUG-20

YUN, JONATHAN, DO^{M†}

Provider ID: 100025475023

C1. Lista de proveedores de la red

Proveedores de atención primaria

📍 255 N GILBERT ST STE C2
HEMET, CA 92543
☎ (951) 599-8532
🗂 Korean, Spanish
Effective as of 01-AUG-20

YUN, JONATHAN, DO^{M†}

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

GENERAL PRACTICE

EL-HENAWI, IGLAL, MD^F

Provider ID: 100107885003
📍 4020 W FLORIDA AVE
HEMET, CA 92545
☎ (951) 765-5000
Effective as of 01-JAN-14

EL-HENAWI, IGLAL, MD^F

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

EL-HENAWI, IGLAL, MD^F

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

INTERNAL MEDICINE

BARVE, PRANAV, MD^{M†}

Provider ID: 100318437029
📍 2390 E FLORIDA AVE STE
104
HEMET, CA 92544
☎ (951) 414-4011

🗂 Hindi, Marathi
Effective as of 01-AUG-21

BARVE, PRANAV, MD^{M†}

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

BATIN, FRANCES, MD^F

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

CHING, TSUNG, MD^{M†}

Provider ID: 100380049002
📍 1278 E LATHAM AVE
HEMET, CA 92543
☎ (951) 925-6625
🗂 Mandarin
Effective as of 01-DEC-21

CHODAY, PRITHI, MD^F

Provider ID: 100419896004
📍 1030 E FLORIDA AVE
HEMET, CA 92543
☎ (833) 867-4642
🗂 Telugu
Effective as of 01-DEC-23

CHODAY, PRITHI, MD^F

Provider ID: 100419896003
📍 422 N SAN JACINTO ST STE
A
HEMET, CA 92543
☎ (833) 867-4642
🗂 Telugu
Effective as of 01-DEC-23

HUSSAIN, ABID, MD^{M†}

Provider ID: 100108449003
📍 255 N GILBERT ST BLDG B4
HEMET, CA 92543
☎ (951) 652-0060
🗂 Punjabi, Spanish, Urdu
Teleservice
Effective as of 01-SEP-15

KONDAPALLY, YAMUNA, MD^{F†}

Provider ID: 100364194002
📍 1701 E FLORIDA AVE
HEMET, CA 92544
☎ (951) 658-4486
🗂 Hindi, Telugu
Effective as of 01-DEC-20

KONDAPALLY, YAMUNA, MD^{F†}

Provider ID: 100364194003
📍 1701 E FLORIDA AVE
HEMET, CA 92544
☎ (951) 658-4486
🗂 Hindi, Telugu
Effective as of 01-DEC-20

MATHIAS, HERMAN, MD^{M†}




Provider ID: 100037216007
📍 391 N SAN JACINTO ST
HEMET, CA 92543
☎ (951) 929-6003
🗂 Hindi
Effective as of 01-AUG-95




PATEL, REENABEN, MD^F




Provider ID: 100380064003
📍 2390 E FLORIDA AVE STE
101
HEMET, CA 92544
☎ (951) 925-1449
Effective as of 01-JAN-22



POSSAGNOLI, ISABELLA, MD^F



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




Provider ID: 100435063002
 603 E LATHAM AVE
 HEMET, CA 92543
 (951) 502-3500
 Portuguese, Spanish
 Effective as of 01-AUG-24

RAJA, MANIKANDA, MD^{Mt}
 Provider ID: 100113362004
 1701 E FLORIDA AVE
 HEMET, CA 92544
 (951) 658-4486
 Tamil, Telugu
 Effective as of 01-AUG-02

SALEH, HANA, MD^{Ft}
 Provider ID: 100246071008
 391 N SAN JACINTO ST
 HEMET, CA 92543
 (951) 533-5123
 Arabic, Spanish
 Effective as of 01-APR-24




SALEH, HANA, MD^{Ft}
 Provider ID: 100246071002
 391 N SAN JACINTO ST
 HEMET, CA 92543
 (951) 533-5123
 Arabic, Spanish
 Effective as of 01-SEP-15




SALEH, HANA, MD^{Ft}
 Provider ID: 100246071007
 391 N SAN JACINTO ST
 HEMET, CA 92543
 (951) 533-5123
 Arabic, Spanish
 Effective as of 01-OCT-23

SHALABY, MOHSEN, MD^{Mt}
 Provider ID: 100306246002
 1023 E FLORIDA AVE
 HEMET, CA 92543
 (951) 599-8403
 Arabic



Effective as of 01-MAR-17

PEDIATRICS




SEYED, KAZEM, MD^{Mt}
 Provider ID: 100028573003
 750 E LATHAM AVE STE 1
 HEMET, CA 92543
 (951) 766-6696
 Persian
 Effective as of 01-OCT-10


SEYED, KAZEM, MD^{Mt}
 Provider ID: 100028573009
 750 E LATHAM AVE STE 1
 HEMET, CA 92543
 (951) 766-6696
 Persian
 Effective as of 01-AUG-20



FQHC




IMPERIAL BEACH HEALTH CENTER,
 Provider ID: PG0005455007
 949 PALM AVE
 IMPERIAL BEACH, CA 91932
 (619) 429-3733
 Teleservice
 Effective as of 01-JUL-22




FAMILY PRACTICE




CHANG, ALBERT, MD^{Mt}
 Provider ID: 100086039013
 15825 LAGUNA CANYON
 RD STE 202
 IRVINE, CA 92618
 (949) 585-9870
 Korean, Spanish
 Effective as of 01-JAN-17



CHANG, ALBERT, MD^M
 Provider ID: 100086039033
 15825 LAGUNA CANYON

RD STE 104
 IRVINE, CA 92618
 (949) 585-9870
 Korean, Spanish
 Effective as of 01-OCT-23

CHANG, ALBERT, MD^{Mt}
 Provider ID: 100086039014
 15825 LAGUNA CANYON
 RD STE 202
 IRVINE, CA 92618
 (949) 585-9870
 Korean, Spanish
 Effective as of 01-JAN-17

CHANG, ALBERT, MD^{Mt}
 Provider ID: 100086039015
 15825 LAGUNA CANYON
 RD STE 202
 IRVINE, CA 92618
 (949) 585-9870
 Korean, Spanish
 Effective as of 01-JAN-17



HUANG, JANET, DO^F
 Provider ID: 100007711005
 18 ENDEAVOR STE 203
 IRVINE, CA 92618
 (949) 733-0168
 Chinese, Mandarin, Taiwanese
 Effective as of 01-JUL-20

MACAULEY, TODD, DO^{Mt}
 Provider ID: 100337131058
 8607 IRVINE CENTER DR
 IRVINE, CA 92618
 (949) 557-0600
 Effective as of 01-JAN-21




SAAM, SHIDA, DO^{Ft}
 Provider ID: 100093095027
 16300 SAND CANYON AVE
 STE 602
 IRVINE, CA 92618

CI. Lista de proveedores de la red




Proveedores de atención primaria

 (949) 783-1911
 Farsi, Persian, Spanish
Effective as of 01-JUN-19




SAAM, SHIDA, DO^{F†}

Provider ID: 100093095032
 16300 SAND CANYON AVE
STE 602
IRVINE, CA 92618
 (949) 783-1911
 Farsi, Persian, Spanish
Effective as of 01-JUN-19




SAAM, SHIDA, DO^{F†}

Provider ID: 100093095029
 16300 SAND CANYON AVE
STE 602
IRVINE, CA 92618
 (949) 783-1911
 Farsi, Persian, Spanish
Effective as of 01-JUN-19



SAAM, SHIDA, DO^{F†}


Provider ID: 100093095026
 16300 SAND CANYON AVE
STE 602
IRVINE, CA 92618
 (949) 783-1911
 Farsi, Persian, Spanish
Effective as of 01-JUN-19

SAAM, SHIDA, DO^{F†}




Provider ID: 100093095030
 16300 SAND CANYON AVE
STE 602
IRVINE, CA 92618
 (949) 783-1911
 Farsi, Persian, Spanish
Effective as of 01-JUN-19

YACOOB, MARLENE, MD^F

Provider ID: 100010305009
 22 ODYSSEY STE 115
IRVINE, CA 92618
 (949) 988-7550




 French, Spanish
Teleservice
Effective as of 01-OCT-16

YACOOB, MARLENE, MD^F




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

GENERAL PRACTICE

ZAHEDI, MARCO, MD^M



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

ZAHEDI, MARCO, MD^M


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

INTERNAL MEDICINE



COUNCELBAUM, NANCY, MD^{F†}

^{F†}
Provider ID: 100061502007
 16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618
 (949) 791-3101
Effective as of 01-JAN-21




HUANG, CHARLIE, DO^{M*}

Provider ID: 100325520007
 16300 SAND CANYON AVE




STE 311
IRVINE, CA 92618

 (949) 791-3101
 Mandarin, Taiwanese
Effective as of 01-JAN-21




POURBABAK, SAM, MD^M

Provider ID: 100114265020
 22 ODYSSEY STE 115
IRVINE, CA 92618
 (949) 988-7550
 Farsi, French, Persian
Teleservice
Effective as of 01-APR-24



POURBABAK, SAM, MD^M

Provider ID: 100114265021
 22 ODYSSEY STE 115
IRVINE, CA 92618
 (949) 988-7550
 Farsi, French, Persian
Teleservice
Effective as of 01-APR-24


RASHID, AHSAN, MD^{M†}

Provider ID: 100036910003
 113 WATERWORKS WAY
STE 250
IRVINE, CA 92618
 (949) 753-1522
 Spanish, Urdu
Effective as of 01-JAN-18

SERAG, RANDA, MD^{F†}

Provider ID: 100136797017
 16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618
 (949) 791-3101
Effective as of 01-JAN-21

SHUNE, HONG, MD^{F†}

Provider ID: 100196968014
 16300 SAND CANYON AVE
STE 311

C1. Lista de proveedores de la red

Proveedores de atención primaria

IRVINE, CA 92618
☎ (949) 791-3101
📄 Chinese, Mandarin
Effective as of 01-JAN-21

SUN, YEMING, MD^{F*}
Provider ID: 100022013010
📄 113 WATERWORKS WAY
STE 125
IRVINE, CA 92618
☎ (949) 552-6788
📄 Mandarin
Effective as of 01-AUG-20

WANG, WEI, MD^{M*}
Provider ID: 100345175004
📄 16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618
☎ (949) 791-3101
Effective as of 01-JAN-21

FAMILY PRACTICE

**DEMBO-SMEATON, ELENA,
MD^F**
Provider ID: 100112789010
📄 8950 VILLA LA JOLLA DR
STE C129
LA JOLLA, CA 92037
☎ (858) 450-5900
📄 Russian
Teleservice
Effective as of 01-MAY-21

**DEMBO-SMEATON, ELENA,
MD^F**
Provider ID: 100112789012
📄 8950 VILLA LA JOLLA DR
STE C129
LA JOLLA, CA 92037
☎ (858) 450-5900
📄 Russian
Teleservice
Effective as of 01-JUL-21

**DEMBO-SMEATON, ELENA,
MD^F**
Provider ID: 100112789011
📄 8950 VILLA LA JOLLA DR
STE C129
LA JOLLA, CA 92037
☎ (858) 450-5900
📄 Russian
Teleservice
Effective as of 01-JUL-21

GOLD, MARGARET, MD^M
Provider ID: 100231182008
📄 8950 VILLA LA JOLLA DR
STE C129
LA JOLLA, CA 92037
☎ (858) 450-5900
Teleservice
Effective as of 01-MAY-24

GOLD, MARGARET, MD^M
Provider ID: 100231182005
📄 8950 VILLA LA JOLLA DR
STE C129
LA JOLLA, CA 92037
☎ (858) 450-5900
Teleservice
Effective as of 01-APR-24

GOLD, MARGARET, MD^M
Provider ID: 100231182007
📄 8950 VILLA LA JOLLA DR
LA JOLLA, CA 92037
☎ (858) 450-5900
Effective as of 01-APR-24

**VAZQUEZ-BOJORQUEZ,
ALEJANDRA, MD^F**
Provider ID: 100391945014
📄 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
☎ (858) 779-2366

📄 Spanish
Effective as of 01-APR-23

INTERNAL MEDICINE

AL-SALEH, YADANI, MD^{F†}
Provider ID: 100358544010
📄 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
☎ (858) 799-0855
📄 Spanish
Effective as of 01-NOV-22

FAMILY PRACTICE

PATEL, HEMANSHU, MD^M
Provider ID: 100282252013
📄 7339 EL CAJON BLVD STE I
LA MESA, CA 91942
☎ (619) 698-0606
Effective as of 01-MAR-24

FQHC




LA MESA PEDIATRICS,
Provider ID: PG0092627004
📄 8881 FLETCHER PKWY STE
200
LA MESA, CA 91942
☎ (619) 464-6434
Effective as of 01-JAN-21

INTERNAL MEDICINE



ALAMAR, ALI, MD^{M†}
Provider ID: 100106664014
📄 5565 GROSSMONT
CENTER DR BLDG 1 STE 105
LA MESA, CA 91942
☎ (619) 724-6644
📄 Arabic, Spanish
Teleservice
Effective as of 01-SEP-20

NGUYEN, DAT, MD^M




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

Provider ID: 100047564021
 5565 GROSSMONT
 CENTER DR STE 229
 LA MESA, CA 91942
 (858) 349-3760
 Spanish, Vietnamese
 Effective as of 01-MAR-24




PATEL, HEMANSHU, MD^M

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




SHAHBAZ, MAJID, MD^M

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

SHAHBAZ, MAJID, MD^M




Provider ID: 100090790008
 8851 CENTER DR STE 408
 LA MESA, CA 91942
 (619) 583-1174
 Faroese, Farsi, Persian
 Teleservice
 Effective as of 01-MAR-18

SHAHBAZ, MAJID, MD^M

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




SHAHBAZ, MAJID, MD^M

Provider ID: 100090790020

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




FAMILY PRACTICE

WAINWRIGHT, MITCHELL, MD^M

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



INTERNAL MEDICINE

ELSANADI, RAEF, MD^{M†}



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

FAMILY PRACTICE

PANITCH, JILL, MD^{F†}



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

SZYMANSKI, JARED, DO^M

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



INTERNAL MEDICINE

DEWING, JANNE, MD^F



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

FAMILY PRACTICE



CHANG, MICHAEL, DO^{M†}

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



CHANG, MICHAEL, DO^{M††}

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

FOSTER, MARK, MD^M

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

GEE, KELLY, DO^{F†}

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

HICKS, TOMMY, MD^{M††}

Provider ID: 100093348004

C1. Lista de proveedores de la red

Proveedores de atención primaria

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

HUYNH, JUDY, DO^{Ft}

Provider ID: 100065290005

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

HUYNH, JUDY, DO^{Ft}

Provider ID: 100065290003

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

IERARDI, STEPHEN, MD^M

Provider ID: 100017573010

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

IERARDI, STEPHEN, MD^M

Provider ID: 100017573009

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

KHOSHREZA, HALEH, MD^{Ft}

Provider ID: 100383918002

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

LEISH, BRIAN, MD^M

Provider ID: 100103119055

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

MANDEL, RONALD, DO^{Mt}

Provider ID: 100034539004

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

MOHINDRA, SUCHITRA, MD^{Ft}

Provider ID: 100025171005

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

MUNIB, SABEEN, MD^{Ft}

Provider ID: 100168805028

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

MUNIB, SABEEN, MD^{Ft}

Provider ID: 100168805030

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

MUNIB, SABEEN, MD^{Ft}

Provider ID: 100168805025

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

RIVERO, JORGE, MD^M

Provider ID: 100059240008

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

SY, JOAN, DO^F

Provider ID: 100090936014

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

SY, JOAN, DO^F

Provider ID: 100090936012

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

YACOOB, MARLENE, MD^F

Provider ID: 100010305019

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
(949) 916-9100
French, Spanish
Teleservice
Effective as of 01-JUL-19

YACOOB, MARLENE, MD^F

Provider ID: 100010305008

23141 MOULTON PKWY STE

C1. Lista de proveedores de la red

Proveedores de atención primaria

102
LAGUNA HILLS, CA 92653
☎ (949) 916-9100
📄 French, Spanish
Teleservice
Effective as of 01-APR-18

GENERAL PRACTICE

COOKE, LAWRENCE, MD^{M*}

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

HARMS, MONICA, MD^F

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

HARMS, MONICA, MD^F

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

NAPOLI, LYNN, MD^F

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

NAPOLI, LYNN, MD^F

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

INTERNAL MEDICINE

AFSHAR, YAMA, DO^M

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

ARTHUR, KRISTINE, MD^{F†}

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

ARTHUR, KRISTINE, MD^{F†}

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

ASHTARI, MOZHGAN, MD^{F†}

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

BASEN, ANGELA, MD^F

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

BROWN, HOSEA, MD^{M†}

Provider ID: 100017878005
📄 25431 CABOT RD STE 118
LAGUNA HILLS, CA 92653
☎ (949) 362-8877
📄 Spanish
Effective as of 01-DEC-11

BROWN, HOSEA, MD^{M†}

Provider ID: 100017878015
📄 25431 CABOT RD STE 118
LAGUNA HILLS, CA 92653
☎ (949) 362-8877
📄 Spanish
Effective as of 01-JUN-17

BROWN, HOSEA, MD^{M†}

Provider ID: 100017878018
📄 25431 CABOT RD STE 118
LAGUNA HILLS, CA 92653
☎ (949) 362-8877
📄 Spanish
Effective as of 01-JUN-18

BROWN, HOSEA, MD^{M†}













































Provider ID: 100017878016
📄 25431 CABOT RD STE 118
LAGUNA HILLS, CA 92653
☎ (949) 362-8877
📄 Spanish
Effective as of 01-JAN-18

BROWN, HOSEA, MD^{M†}

Provider ID: 100017878007
📄 25431 CABOT RD STE 118
LAGUNA HILLS, CA 92653
☎ (949) 362-8877


C1. Lista de proveedores de la red

Proveedores de atención primaria




-  Spanish
Effective as of 01-JAN-14
- CHANG, KU JUEY, MD^M**
Provider ID: 100079645006
 23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653
 (949) 916-9100
 Chinese
Effective as of 01-NOV-16
- CHANG, KU JUEY, MD^M**
Provider ID: 100079645013
 23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653
 (949) 916-9100
 Chinese
Effective as of 01-JUN-19
- CLARK, LORI, MD^{F†}**
Provider ID: 100054653006
 23521 PASEO DE VALENCIA STE 108
LAGUNA HILLS, CA 92653
 (949) 588-7262
 Spanish
Effective as of 01-JAN-18
- COVARRUBIAS, GRACIA, MD^{F†}**
Provider ID: 100109548017
 24268 EL TORO RD
LAGUNA HILLS, CA 92637
 (657) 241-8455
 Spanish
Effective as of 01-SEP-21
- COVARRUBIAS, GRACIA, MD^{F†}**
Provider ID: 100109548016
 24268 EL TORO RD
LAGUNA HILLS, CA 92637
 (657) 241-8455
 Spanish
Effective as of 01-MAR-20
- DAIGNEAULT, ARTHUR, MD^M**
Provider ID: 100099113005
 24221 CALLE DE LA LOUISA STE 200
LAGUNA HILLS, CA 92653
 (949) 588-8700
 Spanish
Effective as of 01-JAN-18
- EDRIS, MARWAN, MD^M**
Provider ID: 100083033005
 25283 CABOT RD STE 106
LAGUNA HILLS, CA 92653
 (949) 364-9080
 Arabic, Hebrew
Effective as of 01-JAN-18
- FELDMAN, ROBERT, MD^{M*}**
Provider ID: 100016238005
 23961 CALLE DE LA MAGDALENA STE 429
LAGUNA HILLS, CA 92653
 (949) 452-1930
Effective as of 01-MAR-19
- FERNANDEZ, RAYMOND, MD^M**
Provider ID: 100067842005
 24221 CALLE DE LA LOUISA STE 200
LAGUNA HILLS, CA 92653
 (949) 420-5985
Effective as of 01-JAN-18
- HENRY, BRIAN, MD^M**
Provider ID: 100063427004
 24221 CALLE DE LA LOUISA STE 200
LAGUNA HILLS, CA 92653
 (949) 588-8700
Effective as of 01-JAN-18
- HUSEBY, DAVID, MD^M**
Provider ID: 100091780005
 24411 HEALTH CENTER DR STE 460
LAGUNA HILLS, CA 92653
 (949) 373-7799
 Spanish
Effective as of 01-JAN-18
- JAVAHERI, MANIJEH, MD^{F†}**
Provider ID: 100111565009
 23961 CALLE DE LA MAGDALENA STE 430
LAGUNA HILLS, CA 92653
 (949) 770-8100
 Farsi, Turkish
Effective as of 01-JAN-18
- KAURA, MAYA, MD^F**
Provider ID: 100011471005
 24953 PASEO DE VALENCIA STE 22A
LAGUNA HILLS, CA 92653
 (949) 770-7333
 Hindi
Effective as of 01-MAR-21
- LEW, HOMER, DO^{M†}**
Provider ID: 100088621006
 23521 PASEO DE VALENCIA STE 108
LAGUNA HILLS, CA 92653
 (949) 588-7262
 Cantonese, Chinese, Spanish
Effective as of 01-JAN-18
- LIN, CHI WHEI, MD^{M*}**
Provider ID: 100090449006
 23521 PASEO DE VALENCIA STE 310
LAGUNA HILLS, CA 92653
 (949) 716-4555
 Chinese, Mandarin, Spanish
Effective as of 01-JAN-18
- LO, ALAN, MD^M**
Provider ID: 100022892004
 25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653

C1. Lista de proveedores de la red




Proveedores de atención primaria

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




MORCOS-CLARK, NERMINE, MD^{F+t}

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




PACE, SARAH, MD^{F+t}

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

POURBABAK, SAM, MD^M




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

POURBABAK, SAM, MD^M




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

SADEGHI TARI, MAHYAR, MD^{F+t}




Provider ID: 100107614005

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




SIU, CURTIS, MD^{M*}

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



STERNS, DANIEL, MD^M

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


TRAN, CECILIA, MD^{F*}


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

ZAMANI, MAZIAR, MD^{M*}



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

ZAREMBA, MARK, MD^{M†}

Provider ID: 100021573005
 25401 CABOT RD STE 107



LAGUNA HILLS, CA 92653
 (949) 273-8085
 Effective as of 01-APR-18

ZAREMBA, MARK, MD^{M†}



Provider ID: 100021573002
 25401 CABOT RD STE 107
 LAGUNA HILLS, CA 92653
 (949) 273-8085
 Effective as of 01-JAN-13

FAMILY PRACTICE



BEDRAN, ASAD, DO^{M†}

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




BELLO, JUSTINE, MD^{F†}

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

BREWER, SARAH, MD^{F††}

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

FU, KAREN, MD^{F††}

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

LEE, SUSAN, MD^{F†}

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

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

SALL, JEEVAN, MD^{M†}

Provider ID: 100353204063
 27231 LA PAZ RD STE A
 LAGUNA NIGUEL, CA 92677
 (949) 643-9111
 Effective as of 01-JUN-22

INTERNAL MEDICINE

BILAL, BASSAM, MD^{M†}

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

KELLOGG, CHERYL, MD^F

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

MORTAJI, PARISA, MD^F

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

PEDIATRICS

PATEL, JYOTINKUMAR, MD^{M†}

Provider ID: 100035402010
 30281 GOLDEN LANTERN
 LAGUNA NIGUEL, CA 92677
 (949) 495-7144

Gujarati, Hindi
 Effective as of 01-SEP-22

**CERTIFIED NURSE
 PRACTITIONER**

MOY, TALAR, NPF^F

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

FAMILY PRACTICE

HAUSER, BRIAN, MD^M

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

VANVRANKEN, BRUCE, MD^M

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

INTERNAL MEDICINE

ROKSHADFAR, SAGHI, MD^{F†}

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

ROKSHADFAR, SAGHI, MD^{F†}

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

SIEGFRIED, TRACY, MD^F

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

FAMILY PRACTICE

JACKSON, ANITA, MD^{F†}

Provider ID: 100060861006
 31736 MISSION TRL STE G
 LAKE ELSINORE, CA 92530
 (951) 674-1505
 Tagalog
 Effective as of 01-NOV-11

TORRES, REBECCA, MD^{F†}

Provider ID: 100187138016
 31946 MISSION TRL STE A
 LAKE ELSINORE, CA 92530
 (951) 471-1800
 Korean, Mandarin, Spanish
 Effective as of 01-DEC-14

TORRES, REBECCA, MD^{F†}

Provider ID: 100187138015
 31946 MISSION TRL STE A
 LAKE ELSINORE, CA 92530
 (951) 471-1800
 Korean, Mandarin, Spanish
 Effective as of 01-DEC-14

GENERAL PRACTICE

ASPREC, JOSEPH, MD^M

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

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

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

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

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

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

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

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

INTERNAL MEDICINE

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

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

FAMILY PRACTICE

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

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

INTERNAL MEDICINE

GOVASHIRI, REZA, MD^{M†}
 Provider ID: 100047181008
 22621 LAKE FOREST DR STE D1
 LAKE FOREST, CA 92630
 (949) 242-6902
 Farsi, Spanish
 Effective as of 01-JUL-19

MUY, MADINETH, MD^{F†}
 Provider ID: 100082949013
 22621 LAKE FOREST DR STE D1
 LAKE FOREST, CA 92630
 (949) 242-6902
 Cambodian, Khmer
 Effective as of 01-OCT-18

FAMILY PRACTICE

GUNPAT, JOSHUA, MD^M
 Provider ID: 100432396002
 10039 VINE ST
 LAKESIDE, CA 92040
 (619) 390-9975
 Effective as of 01-JUN-24

GUNPAT, JOSHUA, MD^M
 Provider ID: 100432396003
 10039 VINE ST
 LAKESIDE, CA 92040
 (619) 390-9975
 Effective as of 01-JUN-24

MCHENRY, KATHRYN, DO^F
 Provider ID: 100320650014
 10039 VINE ST
 LAKESIDE, CA 92040
 (619) 390-9975
 Spanish
 Effective as of 01-FEB-24

PHAM, CHRISTINE, DO^F
 Provider ID: 100397531003
 10039 VINE ST

C1. Lista de proveedores de la red

Proveedores de atención primaria

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

FQHC

**NEIGHBORHOOD
HEALTHCARE LAKESIDE, ***
Provider ID: PG0024990051
📍 10039 VINE ST
LAKESIDE, CA 92040
☎ (858) 218-3000
Teleservice
Effective as of 01-JUL-22

INTERNAL MEDICINE

MCFARLAND, NATHAN, MD^M
Provider ID: 100216268004
📍 10039 VINE ST
LAKESIDE, CA 92040
☎ (858) 218-3000
📄 Italian, Spanish
Effective as of 01-AUG-20

MCFARLAND, NATHAN, MD^M
Provider ID: 100216268007
📍 10039 VINE ST
LAKESIDE, CA 92040
☎ (858) 218-3000
📄 Italian, Spanish
Effective as of 01-JAN-24

FQHC

**LEMON GROVE FAMILY
HEALTH CENTER,**
Provider ID: PG0085568003
📍 7592 BROADWAY
LEMON GROVE, CA 91945
☎ (619) 515-2550
Teleservice
Effective as of 01-JAN-21

FAMILY PRACTICE

CAMARILLO, DANIEL, MD^{M†}
Provider ID: 100110735009
📍 30420 HAUN RD
MENIFEE, CA 92584
☎ (951) 676-4193
📄 Spanish
Effective as of 01-OCT-15

CAMARILLO, DANIEL, MD^{M†}
Provider ID: 100110735017
📍 30420 HAUN RD
MENIFEE, CA 92584
☎ (951) 676-4193
📄 Spanish
Effective as of 01-NOV-20

GOHIL, RAJIT, MD^M
Provider ID: 100391418014
📍 29826 HAUN RD STE 200
MENIFEE, CA 92586
☎ (951) 414-4020
Effective as of 01-JUL-23

GOHIL, RAJIT, MD^M
Provider ID: 100391418013
📍 29826 HAUN RD STE 200
MENIFEE, CA 92586
☎ (951) 414-4020
Effective as of 01-JUL-23

HARRISON, AMY, MD^F
Provider ID: 100410706003
📍 29826 HAUN RD STE 200
MENIFEE, CA 92586
☎ (951) 414-4020
📄 Spanish
Effective as of 01-AUG-23

HARRISON, AMY, MD^F
Provider ID: 100410706004
📍 29826 HAUN RD STE 200
MENIFEE, CA 92586
☎ (951) 414-4020
📄 Spanish

Effective as of 01-AUG-23
MADRID, RICHARD, MD^{M†}
Provider ID: 100077741007
📍 30420 HAUN RD
MENIFEE, CA 92584
☎ (951) 676-4193
Teleservice
Effective as of 01-JAN-16

SANDHU, BASANT, MD^M
Provider ID: 100315195011
📍 26926 CHERRY HILLS
BLVD
STE B & C
MENIFEE, CA 92586
☎ (951) 216-2200
📄 German, Hindi, Punjabi
Effective as of 01-AUG-20

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

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

ZURITA, DANIELA, MD^{F†}
Provider ID: 100396617009
📍 26926 CHERRY HILLS
BLVD STE C
MENIFEE, CA 92586
☎ (951) 216-2200

C1. Lista de proveedores de la red

Proveedores de atención primaria

 Spanish


Effective as of 01-DEC-22

INTERNAL MEDICINE

ARANETA, TOMAS, MD^{M†}

Provider ID: 100036305006

 29826 HAUN RD STE 201
MENIFEE, CA 92586

 (951) 301-1100


 Spanish, Tagalog


Effective as of 01-OCT-22

BARVE, PRANAV, MD^M

Provider ID: 100318437034

 29826 HAUN RD STE 200
MENIFEE, CA 92586

 (951) 414-4020


 Hindi, Marathi


Effective as of 01-JUL-23

BARVE, PRANAV, MD^M

Provider ID: 100318437033

 29826 HAUN RD STE 200
MENIFEE, CA 92586

 (951) 414-4020


 Hindi, Marathi

Effective as of 01-JUL-23

GONZALES, PATRICK, MD^{M†}

Provider ID: 100109580005

 29798 HAUN RD STE 106
MENIFEE, CA 92586

 (951) 301-3588


 Tagalog


Effective as of 01-SEP-10

GONZALES, PATRICK, MD^{M†}

Provider ID: 100109580006

 29798 HAUN RD STE 106
MENIFEE, CA 92586

 (951) 301-3588


 Tagalog

Effective as of 01-JUN-17

GONZALES, EDIVINA, MD^F

Provider ID: 100039220006

 29798 HAUN RD STE 106
MENIFEE, CA 92586

 (951) 301-3588


 Spanish, Tagalog

Effective as of 01-JAN-11

GONZALES, EDIVINA, MD^F

Provider ID: 100039220005

 29798 HAUN RD STE 106
MENIFEE, CA 92586

 (951) 301-3588


 Spanish, Tagalog

Effective as of 01-OCT-10

KIM, IRENE, DO^F

Provider ID: 100380710004

 27190 SUN CITY BLVD
MENIFEE, CA 92586


 (951) 676-4193

Effective as of 01-JAN-22

MARTINEZ, JORGE, MD^{M†}

Provider ID: 100096235012

 29826 HAUN RD STE 201
MENIFEE, CA 92586

 (951) 301-1100

 Spanish


Effective as of 01-JUN-22

FAMILY PRACTICE

**BALL-ZONDERVAN, MONICA,
MD^{F†}**

Provider ID: 100294482047

 26732 CROWN VALLEY
PKWY STE 170
MISSION VIEJO, CA 92691

 (949) 364-7246


Effective as of 01-SEP-19

BARE, IAN, MD^{M†}

Provider ID: 100110113009

 30492 GATEWAY PL STE

110


MISSION VIEJO, CA 92694
 (949) 542-7700


 Spanish

Effective as of 01-JUN-21

BARE, IAN, MD^{M††}

Provider ID: 100110113017

 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694

 (949) 542-7700


 Spanish

Effective as of 01-JUN-21

BASICH, CANDACE, MD^{F††}

Provider ID: 100073084008

 30707 GATEWAY PL STE A2
MISSION VIEJO, CA 92694

 (657) 241-8435


 Spanish

Effective as of 01-SEP-18

BASICH, CANDACE, MD^{F††}

Provider ID: 100073084010

 30707 GATEWAY PL STE A2
MISSION VIEJO, CA 92694

 (657) 241-8435


 Spanish

Effective as of 01-DEC-21

BISUNA, BLANCA, MD^{F††}

Provider ID: 100199166013

 26732 CROWN VALLEY
PKWY STE 170
MISSION VIEJO, CA 92691


 (949) 364-7246

Effective as of 01-MAR-16

CHO, ANTHONY, MD^{M†}

Provider ID: 100326978002




 30707 GATEWAY PL STE A2
MISSION VIEJO, CA 92694

 (657) 241-8601




Effective as of 01-APR-18

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



DELNITZ, DANUTA, MD^F

Provider ID: 100109319011
 26691 PLAZA STE 140
MISSION VIEJO, CA 92691
 (949) 240-8555
 Polish, Spanish
Effective as of 01-APR-19




DELNITZ, DANUTA, MD^F

Provider ID: 100109319012
 26691 PLAZA STE 140
MISSION VIEJO, CA 92691
 (949) 240-8555
 Polish, Spanish
Effective as of 01-APR-19




ENDSLEY, DELVIN, MD^M

Provider ID: 100413682015
 27725 SANTA MARGARITA
PKWY STE 101
MISSION VIEJO, CA 92691
 (949) 270-2100
Effective as of 01-MAR-24

FIGHTLIN, STEFANIE, DO^{F†}



Provider ID: 100086847010
 26991 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
 (949) 582-5430
 Spanish
Effective as of 01-JAN-18

FLORES, TERESA, MD^{F†}



Provider ID: 100207722054
 27725 SANTA MARGARITA
PKWY STE 101
MISSION VIEJO, CA 92691
 (949) 270-2100
 Spanish
Effective as of 01-DEC-19

FLORES, TERESA, MD^{F†}



Provider ID: 100207722053
 27725 SANTA MARGARITA

PKWY STE 101
MISSION VIEJO, CA 92691
 (949) 270-2100
 Spanish
Effective as of 01-DEC-19



GEBHARD, KARL, MD^M

Provider ID: 100071312010
 26922 OSO PKWY STE 380
MISSION VIEJO, CA 92691
 (949) 305-0110
Effective as of 01-JAN-18



GEBHARD, KARL, MD^M

Provider ID: 100071312004
 26922 OSO PKWY STE 380
MISSION VIEJO, CA 92691
 (949) 305-0110
Effective as of 01-MAR-16



GEBHARD, KARL, MD^M

Provider ID: 100071312012
 26922 OSO PKWY STE 380
MISSION VIEJO, CA 92691
 (949) 305-0110
Effective as of 01-JUN-19


GEBHARD, KARL, MD^M



Provider ID: 100071312013
 26922 OSO PKWY STE 380
MISSION VIEJO, CA 92691
 (949) 305-0110
Effective as of 01-JUN-19

GONZALEZ, DAVID, MD^{M†}




Provider ID: 100096155006
 26732 CROWN VALLEY
PKWY STE 170
MISSION VIEJO, CA 92691
 (949) 364-7246
Effective as of 01-OCT-18

KUMAR, NISHCHAL, MD^{M†}




Provider ID: 100224908013
 23512 MADERO

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




KUMAR, NISHCHAL, MD^{M†}

Provider ID: 100224908011
 23512 MADERO
MISSION VIEJO, CA 92691
 (949) 583-1600
 Hindi, Punjabi, Spanish
Effective as of 01-NOV-19




LY, PHUONG, MD^{M†}

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



PEDARSANI, MARJAN, DO^{F††}

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

PEDARSANI, MARJAN, DO^{F††}

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

RUTTEN, SONIA, MD^F

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

CI. Lista de proveedores de la red

Proveedores de atención primaria

SAMOORI, RAMA, DO^{F†}

Provider ID: 100112028003
📍 26732 CROWN VALLEY
PKWY STE 170
MISSION VIEJO, CA 92691
☎️ (949) 364-7246
🗂️ Farsi, Spanish
Effective as of 01-SEP-15

SHOAPOUR, CAMELLIA, MD^F

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

THOMAS, CHERYL, MD^F

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

THOMAS, CHERYL, MD^F

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

THOMAS, CHERYL, MD^F

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

THOMAS, CHERYL, MD^F

Provider ID: 100043536021
📍 27725 SANTA MARGARITA

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

THOMAS, CHERYL, MD^F

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

THOMAS, CHERYL, MD^F

Provider ID: 100043536023
📍 27725 SANTA MARGARITA
PKWY STE 101
MISSION VIEJO, CA 92691
☎️ (949) 270-2100
Effective as of 01-AUG-21

YAZDANSHENAS, MARYAM, MD^{F††}

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

GENERAL PRACTICE

JANISZEWSKI, EVA, MD^F

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

INTERNAL MEDICINE

BADIE, MEHRNAZ, MD^{F††}

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

BENNER, ERIC, MD^{M††}

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

CHANG, HELEN, MD^{F††}

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

COVARRUBIAS, GRACIA, MD^{F††}

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



COVARRUBIAS, GRACIA, MD^{F††}




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



LU, LESLIE, MD^{M††}




Provider ID: 100332363002
📍 26800 CROWN VALLEY
PKWY STE 305




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


MISSION VIEJO, CA 92691
 (949) 364-6000
 Chinese
 Effective as of 01-SEP-18



MAYET, KHADIJA, MD^{F†}
 Provider ID: 100062204006
 26800 CROWN VALLEY
 PKWY STE 315
 MISSION VIEJO, CA 92691
 (949) 364-6000
 Gujarati, Urdu
 Effective as of 01-FEB-16




MCMILLAN, CATHERINE, DO^F
 Provider ID: 100420167004
 30230 RANCHO VIEJO RD
 STE 200
 MISSION VIEJO, CA 92675
 (949) 443-4303
 Effective as of 01-MAY-24

NABILI, SIAMAK, MD^M
 Provider ID: 100070640062
 27800 MEDICAL CENTER
 RD
 STE 110
 MISSION VIEJO, CA 92691
 (949) 866-3600
 Farsi, Persian
 Effective as of 01-AUG-24

NGUYEN, VY, MD^{F†}
 Provider ID: 100105037005
 26800 CROWN VALLEY
 PKWY STE 325
 MISSION VIEJO, CA 92691
 (949) 364-6000
 Vietnamese
 Effective as of 01-NOV-12




NOORIAN, NADER, MD^{M††}
 Provider ID: 100052175006
 26800 CROWN VALLEY
 PKWY STE 305




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

PRATT, DONALD, MD^{M††}
 Provider ID: 100088649011
 26800 CROWN VALLEY
 PKWY STE 325
 MISSION VIEJO, CA 92691
 (949) 364-6000
 Spanish
 Effective as of 01-AUG-22




ROKHSADFAR, SAGHI, MD^{F†}
 Provider ID: 100113408005
 23512 MADERO
 MISSION VIEJO, CA 92691
 (949) 583-1600
 Farsi
 Effective as of 01-AUG-20




ROKHSADFAR, SAGHI, MD^{F†}
 Provider ID: 100113408006
 23512 MADERO
 MISSION VIEJO, CA 92691
 (949) 583-1600
 Farsi
 Effective as of 01-MAY-12




SELIGSOHN, BRUCE, MD^{M*}
 Provider ID: 100021098007
 26302 LA PAZ RD STE 211
 MISSION VIEJO, CA 92691
 (949) 588-8775
 Spanish
 Effective as of 01-JAN-18



SERGEYEVA, YELENA, MD^F
 Provider ID: 100403248005
 27800 MEDICAL CENTER
 RD STE 110
 MISSION VIEJO, CA 92691
 (949) 364-3532
 Belarusian, Russian,

Ukrainian
 Teleservice
 Effective as of 01-DEC-23

SERGEYEVA, YELENA, MD^F
 Provider ID: 100403248003
 27800 MEDICAL CENTER
 RD STE 110
 MISSION VIEJO, CA 92691
 (949) 364-3532
 Belarusian, Russian,
 Ukrainian
 Teleservice
 Effective as of 01-MAR-23

SERGEYEVA, YELENA, MD^F
 Provider ID: 100403248007
 27800 MEDICAL CENTER
 RD STE 110
 MISSION VIEJO, CA 92691
 (949) 364-3532
 Belarusian, Russian,
 Ukrainian
 Teleservice
 Effective as of 01-DEC-23

SERGEYEVA, YELENA, MD^F
 Provider ID: 100403248004
 27800 MEDICAL CENTER
 RD STE 110
 MISSION VIEJO, CA 92691
 (949) 364-3532
 Belarusian, Russian,
 Ukrainian
 Teleservice
 Effective as of 01-DEC-23

STAUNTON, MICHELE, MD^{F†}
 Provider ID: 100043245014
 26800 CROWN VALLEY
 PKWY STE 325
 MISSION VIEJO, CA 92691
 (949) 364-6000
 Effective as of 01-AUG-22

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

STAUNTON, MICHELE, MD^{F†}

Provider ID: 100043245010

26800 CROWN VALLEY
 PKWY STE 330
 MISSION VIEJO, CA 92691

(949) 364-6000

Effective as of 01-NOV-14

SWADENER, NINA, MD^{F†}

Provider ID: 100219528002

26800 CROWN VALLEY
 PKWY STE 305
 MISSION VIEJO, CA 92691

(949) 364-6000

Spanish

Effective as of 01-NOV-14

TRUONG, ANDREW, MD^{M†}

Provider ID: 100344383002

26800 CROWN VALLEY
 PKWY STE 305
 MISSION VIEJO, CA 92691

(949) 364-6000

Vietnamese

Effective as of 01-JUL-19

TSAI, MON TA, MD^{M†}

Provider ID: 100060379006

25982 PALA STE 250
 MISSION VIEJO, CA 92691

(949) 588-0051

Chinese, Mandarin,
 Taiwanese

Effective as of 01-JAN-18

WADELL, CHAD, MD^{M†}

Provider ID: 100108309006

26800 CROWN VALLEY
 PKWY STE 315
 MISSION VIEJO, CA 92691

(949) 364-6000

Effective as of 01-NOV-14

YAZDI, JANET, MD^{F†}

Provider ID: 100086097007

26800 CROWN VALLEY
 PKWY STE 305
 MISSION VIEJO, CA 92691

(949) 364-6000

Effective as of 01-MAR-13

FAMILY PRACTICE

BREWER, ANH, DO^{F†}

Provider ID: 100260727002

27722 CLINTON KEITH RD
 BLDG F
 MURRIETA, CA 92562

(951) 878-9820

Vietnamese

Effective as of 01-FEB-16

BREWER, ANH, DO^{F†}

Provider ID: 100260727007

27722 CLINTON KEITH RD
 BLDG F
 MURRIETA, CA 92562

(951) 878-9820

Vietnamese

Effective as of 01-NOV-20

BRIGGS, BRIDGET, MD^F

Provider ID: 100069323004

25470 MEDICAL CENTER
 DR STE 102
 MURRIETA, CA 92562

(951) 698-6090

Spanish

Effective as of 01-SEP-10

**ESTRELLA ITCHON, RHODA,
 MD^{F†}**

Provider ID: 100010820002

25495 MEDICAL CENTER
 DR STE 301
 MURRIETA, CA 92562

(951) 461-1070

Tagalog

Effective as of 01-SEP-04

MCKERAHAN, KELLY, DO^M

Provider ID: 100031842003

25095 JEFFERSON AVE
 STE 202
 MURRIETA, CA 92562

(951) 696-9566

Effective as of 01-JUN-03

MEHARDA, SANJIWANI, MD^F

Provider ID: 100327486018

24910 LAS BRISAS RD STE
 111
 MURRIETA, CA 92562

(951) 694-8549

Hindi, Punjabi, Urdu

Effective as of 01-DEC-23

NGUYEN, BACH, MD^{M†}

Provider ID: 100107585007

41680 IVY ST STE A
 MURRIETA, CA 92562

(951) 677-2227

Vietnamese

Effective as of 01-NOV-23

NGUYEN, BACH, MD^{M†}

Provider ID: 100107585005

41680 IVY ST STE A
 MURRIETA, CA 92562

(951) 677-2227

Vietnamese

Effective as of 01-OCT-22

SOTIS, JAMES, MD^{M†}

Provider ID: 100343557003

38860 SKY CANYON DR
 BLDG A
 MURRIETA, CA 92563

(951) 676-4193

Effective as of 01-AUG-19


VOURLITIS, MELISSA, DO^{F†}

Provider ID: 100090572030

24271 JACKSON AVE
 MURRIETA, CA 92562


C1. Lista de proveedores de la red


Proveedores de atención primaria


 (510) 929-1400
Effective as of 01-JUL-24

WALTER, ROME, DO^M

Provider ID: 100198386003

 41011 CALIFORNIA OAKS
RD STE 103
MURRIETA, CA 92562


 (951) 225-6287


 French

Effective as of 01-JUN-19

YUN, JONATHAN, DO^{Mt}

Provider ID: 100025475022

 24910 LAS BRISAS RD STE
111
MURRIETA, CA 92562


 (951) 694-8549


 Korean, Spanish


Effective as of 01-AUG-20

YUN, JONATHAN, DO^{Mt}

Provider ID: 100025475024

 24910 LAS BRISAS RD STE
111
MURRIETA, CA 92562

 (951) 694-8549


 Korean, Spanish


Effective as of 01-NOV-20

GENERAL PRACTICE

LULIC, DZENAN, MD^{Mt}

Provider ID: 100283060006

 40700 CALIFORNIA OAKS
RD STE 206
MURRIETA, CA 92562

 (951) 412-0011


 Spanish


Effective as of 01-MAR-19

INTERNAL MEDICINE

BLACK, JASON, MD^{Mt}

Provider ID: 100073449005

 24680 JEFFERSON AVE
STE A
MURRIETA, CA 92562

 (951) 677-2252


 French

Effective as of 01-JAN-16

GONZALES, PATRICK, MD^{Mt}

Provider ID: 100109580008

 39755 DATE ST STE 103
MURRIETA, CA 92563

 (951) 304-3221


 Tagalog

Effective as of 01-APR-19

GONZALES, EDIVINA, MD^F

Provider ID: 100039220008

 39755 DATE ST STE 103
MURRIETA, CA 92563

 (951) 304-3221


 Spanish, Tagalog

Effective as of 01-SEP-10

GONZALES, EDIVINA, MD^F

Provider ID: 100039220007

 39755 DATE ST STE 103
MURRIETA, CA 92563


 (951) 304-3221


 Spanish, Tagalog

Effective as of 01-JAN-11

GONZALES, PATRICK, MD^{Mt}

Provider ID: 100109580007

 39755 DATE ST STE 103
MURRIETA, CA 92563


 (951) 304-3221


 Tagalog

Effective as of 01-APR-19

MARTINEZ, JORGE, MD^{Mt}

Provider ID: 100096235003

 39755 MURRIETA HOT
SPRINGS RD STE E120
MURRIETA, CA 92563


 (951) 461-1331


 Spanish

Effective as of 01-DEC-12

MARTINEZ, JORGE, MD^{Mt}

Provider ID: 100096235010

 39755 MURRIETA HOT
SPRINGS RD STE E120
MURRIETA, CA 92563


 (951) 461-1331


 Spanish

Effective as of 01-FEB-21

REYNOLDS, RICHARD, MD^{Mt}

Provider ID: 100043439030


 25109 JEFFERSON AVE STE
100
MURRIETA, CA 92562


 (951) 698-0440

Effective as of 01-OCT-22

SALAS, ERNESTO, MD^M

Provider ID: 100093444006

 40690 CALIFORNIA OAKS
RD STE A
MURRIETA, CA 92562

 (951) 677-0098

 Spanish, Tagalog


Effective as of 01-JUL-24

PEDIATRICS

NGUYEN, TUAN, MD^{Mt}

Provider ID: 100105070004

 28078 BAXTER RD STE 320
MURRIETA, CA 92563

 (951) 246-4546

Teleservice

Effective as of 01-APR-21

FAMILY PRACTICE



ALB, SIMONA, MD^F




Provider ID: 100033656024




 22 W 35TH ST STE 101
NATIONAL CITY, CA 91950




C1. Lista de proveedores de la red




Proveedores de atención primaria




 (619) 427-3361
 Romanian
Effective as of 01-JUN-24




ALB, SIMONA, MD^F
Provider ID: 100033656022
 22 W 35TH ST STE 101
NATIONAL CITY, CA 91950
 (619) 427-3361
 Romanian
Effective as of 01-MAY-24




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




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




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




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



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

CEVALLOS, JAMES, MD^{Mt}
Provider ID: 100079582009
 1136 D AVE
NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
Effective as of 01-APR-23




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




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




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




LAW, KAREN, MD^F
Provider ID: 100334676007
 2400 E 8TH ST
NATIONAL CITY, CA 91950
 (619) 662-4100




 Spanish
Effective as of 01-JUN-24

MATTHEWS, MERRITT, MD^{Mt}
Provider ID: 100021162012
 610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 (619) 527-7700
 Spanish, Tagalog
Effective as of 01-NOV-20

MEDINA, ALEXANDER, MD^M
Provider ID: 100325216017
 331 E 8TH ST
NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^{Mt}
Provider ID: 100325216002
 330 E 8TH ST
NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
Effective as of 01-FEB-18




MEDINA, ALEXANDER, MD^M
Provider ID: 100325216019
 333 E 8TH ST
NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^{Mt}
Provider ID: 100325216016
 330 E 8TH ST
NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
Effective as of 01-APR-23




MEDINA, ALEXANDER, MD^M
Provider ID: 100325216026

C1. Lista de proveedores de la red




Proveedores de atención primaria

 340 E 8TH ST STE 330
NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
Effective as of 01-MAY-23




MEDINA, ALEXANDER, MD^M
Provider ID: 100325216025

 339 E 8TH ST
NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
Effective as of 01-APR-23




MEDINA, ALEXANDER, MD^M
Provider ID: 100325216024

 338 E 8TH ST
NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
Effective as of 01-APR-23




MEDINA, ALEXANDER, MD^M
Provider ID: 100325216021

 335 E 8TH ST
NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
Effective as of 01-APR-23




MEDINA, ALEXANDER, MD^M
Provider ID: 100325216018

 332 E 8TH ST
NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
Effective as of 01-APR-23




MEDINA, ALEXANDER, MD^M
Provider ID: 100325216020

 334 E 8TH ST
NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
Effective as of 01-APR-23




MEDINA, ALEXANDER, MD^M
Provider ID: 100325216023

 337 E 8TH ST
NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
Effective as of 01-APR-23




MEDINA, ALEXANDER, MD^M
Provider ID: 100325216022

 336 E 8TH ST
NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
Effective as of 01-APR-23




**NAVARRO, VANESSA MARIA,
MD^{F†}**

Provider ID: 100173914003
 2400 E 8TH ST
NATIONAL CITY, CA 91950
 (619) 662-4100
 Filipino, Spanish, Tagalog
Effective as of 01-JAN-14

NOLASCO, JOANNA, MD^F
Provider ID: 100334048006



 1136 D AVE
NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
Effective as of 01-JUL-24

NOVENCIDO, JOSEPH, DO^{M†}
Provider ID: 100244053019



 610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 (619) 527-7700
 Spanish
Effective as of 01-APR-23

NOVENCIDO, JOSEPH, DO^{M†}
Provider ID: 100244053014



 610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

 (619) 527-7700
 Spanish
Effective as of 01-SEP-20




OCEGUEDA, JOSHUA, MD^{M†}
Provider ID: 100377020006

 1136 D AVE
NATIONAL CITY, CA 91950
 (619) 662-4100
Effective as of 01-JUL-24



OCEGUEDA, JOSHUA, MD^{M†}
Provider ID: 100377020002

 1136 D AVE
NATIONAL CITY, CA 91950
 (619) 662-4100
Effective as of 01-SEP-21



ORTIZ ILIZALITURRI, ANA, MD^{F*}

Provider ID: 100394347012
 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 (619) 434-7308
 Spanish
Teleservice
Effective as of 01-OCT-23

PATEL, PAAVAN, DO^M
Provider ID: 100413256010

 610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 (619) 527-7700
Effective as of 01-DEC-23

PATEL, PAAVAN, DO^M
Provider ID: 100413256006

 610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 (619) 527-7700
Effective as of 01-NOV-23

ROBERTS, POMAI, MD^{F††}
Provider ID: 100323487002

 1136 D AVE

C1. Lista de proveedores de la red

Proveedores de atención primaria

NATIONAL CITY, CA 91950
☎ (619) 662-4100
📠 Spanish
Effective as of 01-SEP-17

SAZEGAR, PAYAM, MD^{M†}
Provider ID: 100187888015
📠 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
☎ (619) 434-7308
Teleservice
Effective as of 01-JUL-21

STILLWELL, CARLA, MD^F
Provider ID: 100147691023
📠 22 W 35TH ST STE 101
NATIONAL CITY, CA 91950
☎ (619) 427-3361
📠 Polish, Portuguese, Spanish
Effective as of 01-MAY-24

STILLWELL, CARLA, MD^F
Provider ID: 100147691025
📠 22 W 35TH ST STE 101
NATIONAL CITY, CA 91950
☎ (619) 427-3361
📠 Polish, Portuguese, Spanish
Effective as of 01-JUN-24

STONES, RACHEL, MD^F
Provider ID: 100387928006
📠 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
☎ (619) 434-7308
📠 Spanish
Teleservice
Effective as of 01-MAY-22

VELASQUEZ, SHARON, MD^{F†}
Provider ID: 100189428010
📠 2400 E 8TH ST
NATIONAL CITY, CA 91950
☎ (619) 662-4100
📠 Spanish
Effective as of 01-NOV-23

VELASQUEZ, SHARON, MD^{F†}
Provider ID: 100189428004
📠 2400 E 8TH ST
NATIONAL CITY, CA 91950
☎ (619) 662-4100
📠 Spanish
Effective as of 01-JAN-14

FQHC

**FAMILY HEALTH CTR SD
NATIONAL CITY,**
Provider ID: PG0085737003
📠 1000 EUCLID AVE
NATIONAL CITY, CA 91950
☎ (619) 515-2399
Effective as of 01-JAN-21

**LA MAESTRA FAMILY CLINIC
INC, †**
Provider ID: PG0053396004
📠 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
☎ (619) 434-7308
Effective as of 01-JAN-21

**OPERATION SAMAHAN -
NATIONAL C, †**
Provider ID: PG0084147004
📠 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
☎ (844) 200-2426
Teleservice
Effective as of 01-JAN-21

**OPERATION SAMAHAN
GRANGER SCHOOL BASED,**
Provider ID: PG0084288003
📠 2101 GRANGER AVE
NATIONAL CITY, CA 91950
☎ (844) 200-2426
Effective as of 01-JAN-21

SAN YSIDRO HEALTH

NATIONAL CITY,
Provider ID: PG0047542010
📠 1136 D AVE
NATIONAL CITY, CA 91950
☎ (619) 662-4100
Teleservice
Effective as of 01-JAN-21

**SAN YSIDRO HEALTH
PARADISE HILLS, †**
Provider ID: PG0047542011
📠 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
☎ (619) 662-4100
Teleservice
Effective as of 01-JAN-21

**SAN YSIDRO HEALTH SOUTH
BAY,**
Provider ID: PG0077626003
📠 330 E 8TH ST
NATIONAL CITY, CA 91950
☎ (619) 662-4100
Teleservice
Effective as of 01-JAN-21

GENERAL PRACTICE

MEDINA, NATALIE, MD^F
Provider ID: 100254911004
📠 502 EUCLID AVE STE 306
NATIONAL CITY, CA 91950
☎ (619) 267-1168
📠 Spanish
Effective as of 01-MAR-18

MEDINA, NATALIE, MD^F
Provider ID: 100254911014
📠 502 EUCLID AVE STE 306
NATIONAL CITY, CA 91950
☎ (619) 267-1168
📠 Spanish
Effective as of 01-JAN-21

C1. Lista de proveedores de la red

Proveedores de atención primaria

MEDINA, NATALIE, MD^F

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

INTERNAL MEDICINE

BRAVERMAN, IRA, MD^{M†}

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

BRAVERMAN, IRA, MD^{M†}

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

BRAVERMAN, IRA, MD^{M†}

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

CANTU-REYNA, GUILLERMO, MD^{M†}

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

COMUNALE, RODERICK, MD^{M†}

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

DE LA ROSA, RENATO, MD^M

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

DELA PAZ, LENNIE, MD^{M†}

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

EL-GHONEIMY, AHMED, MD^{M†}

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

HEKMAT, RAZI, MD^{M†}

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

HEKMAT, RAZI, MD^{M†}

Provider ID: 100081732019
610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950

(619) 267-8181
Spanish
Effective as of 01-AUG-20

HEKMAT, RAZI, MD^{M†}

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

MEDINA, NATALIE, MD^F

Provider ID: 100254911013
502 EUCLID AVE STE 306
NATIONAL CITY, CA 91950
(619) 267-1168
Spanish
Effective as of 01-JAN-21

PRATHIPATI, LAKSHMI, MD^{F†}

Provider ID: 100041945034
502 EUCLID AVE STE 2013
NATIONAL CITY, CA 91950
(619) 267-0553
Spanish, Tagalog, Telugu
Effective as of 01-SEP-22

PRATHIPATI, LAKSHMI, MD^{F†}




Provider ID: 100041945033
502 EUCLID AVE STE 2013
NATIONAL CITY, CA 91950
(619) 267-0553
Spanish, Tagalog, Telugu
Effective as of 01-AUG-22

TIANGCO, IRINEO, MD^{M†}




Provider ID: 100107246019
2340 E 8TH ST STE J
NATIONAL CITY, CA 91950
(619) 479-0320
Spanish, Tagalog
Effective as of 01-NOV-20

TIANGCO, IRINEO, MD^{M†}




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

Provider ID: 100107246017
 2340 E 8TH ST STE J
 NATIONAL CITY, CA 91950
 (619) 479-0320
 Spanish, Tagalog
 Effective as of 01-SEP-20




TIANGCO, IRINEO, MD^{M†}

Provider ID: 100107246005
 2340 E 8TH ST STE J
 NATIONAL CITY, CA 91950
 (619) 479-0320
 Spanish, Tagalog
 Effective as of 01-JAN-14

TIANGCO, IRINEO, MD^{M†}




Provider ID: 100107246016
 2340 E 8TH ST STE J
 NATIONAL CITY, CA 91950
 (619) 479-0320
 Spanish, Tagalog
 Effective as of 01-JAN-21

TIANGCO, IRINEO, MD^{M†}

Provider ID: 100107246018
 2340 E 8TH ST STE J
 NATIONAL CITY, CA 91950
 (619) 479-0320
 Spanish, Tagalog
 Effective as of 01-JAN-21




FAMILY PRACTICE

MANGOBA, LUTHER, MD^{M†}

Provider ID: 100107397011
 400 NEWPORT CENTER
 DR STE 303
 NEWPORT BEACH, CA
 92660
 (949) 644-1300
 Spanish
 Effective as of 01-APR-22




MANGOBA, LUTHER, MD^{M†}

Provider ID: 100107397012



 400 NEWPORT CENTER
 DR STE 303
 NEWPORT BEACH, CA
 92660
 (949) 644-1300
 Spanish
 Effective as of 01-APR-22

INTERNAL MEDICINE

SPRINGSTUBB, ADITI, MD^{F†}




Provider ID: 100201144014
 360 SAN MIGUEL DR STE
 300
 NEWPORT BEACH, CA
 92660
 (949) 557-0830
 Hindi, Spanish
 Effective as of 01-OCT-21

SYED, SAMEENA, DO^F



Provider ID: 100380768002
 360 SAN MIGUEL DR STE
 300
 NEWPORT BEACH, CA
 92660
 (949) 557-0830
 Effective as of 01-DEC-21

FAMILY PRACTICE

BANIADAM, BEHZAD, MD^M




Provider ID: 100069979008
 3231 WARING CT STE L
 OCEANSIDE, CA 92056
 (760) 630-6300
 Spanish
 Effective as of 01-MAR-21

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




Provider ID: 100358800017
 517 N HORNE ST
 OCEANSIDE, CA 92054
 (760) 631-5000

 Spanish
 Effective as of 01-JAN-24




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

Provider ID: 100358800016
 4700 N RIVER RD
 OCEANSIDE, CA 92057
 (760) 631-5000
 Spanish
 Effective as of 01-JAN-24



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

Provider ID: 100358800018
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054
 (760) 631-5000
 Spanish
 Effective as of 01-JAN-24



GONZALES, MICHELLE, MD^F

Provider ID: 100063095006
 3601 VISTA WAY
 OCEANSIDE, CA 92056
 (760) 639-1204
 Spanish
 Teleservice
 Effective as of 01-SEP-21

**KURUKULASURIYA,
 DAYANTHITHI, DO^F**

Provider ID: 100326148005
 605 CROUCH ST
 OCEANSIDE, CA 92054
 (760) 736-6767
 Effective as of 01-FEB-23

PONSFORD, DIANA, DO^F

Provider ID: 100350934010
 517 N HORNE ST
 OCEANSIDE, CA 92054
 (760) 631-5000
 Effective as of 01-MAY-22


CI. Lista de proveedores de la red

Proveedores de atención primaria

PONSFORD, DIANA, DO^F

Provider ID: 100350934011

 517 N HORNE ST
OCEANSIDE, CA 92054


 (760) 631-5000


Effective as of 01-JAN-24

SAFI, ROOZCHEHR, MD^{F†}

Provider ID: 100201387012

 605 CROUCH ST
OCEANSIDE, CA 92054

 (760) 736-6767

 Farsi


Effective as of 01-APR-14

FQHC

TRUECARE,

Provider ID: PG0092588008

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 (760) 736-6767


Teleservice

Effective as of 01-JUL-22

TRUECARE VISTA WAY HEALTH CENTER STE G,

Provider ID: PG0130229002

 3998 VISTA WAY STE G
OCEANSIDE, CA 92056


 (760) 736-6767

Effective as of 01-JUN-24

VISTA COMMUNITY CLINIC, †

Provider ID: PG0072409007

 4700 N RIVER RD
OCEANSIDE, CA 92057

 (760) 631-5000


Teleservice

Effective as of 01-JUL-22

VISTA COMMUNITY CLINIC HORNE STREET,

Provider ID: PG0084639007

 517 N HORNE ST
OCEANSIDE, CA 92054

 (760) 631-5000


Teleservice

Effective as of 01-JUL-22

VISTA COMMUNITY CLINIC PIER VIEW WAY,

Provider ID: PG0084683007

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 (760) 631-5000

Teleservice


Effective as of 01-JUL-22

INTERNAL MEDICINE

ASPIRAS, JULIE, MD^{F*}

Provider ID: 100065479004

 3998 VISTA WAY STE F
OCEANSIDE, CA 92056


 (760) 630-4678

Effective as of 01-SEP-21

CHONG, ILSONG, MD^M

Provider ID: 100334344008

 3998 VISTA WAY STE 204
OCEANSIDE, CA 92056

 (760) 736-6767


 Korean

Effective as of 01-JUN-24

CHONG, ILSONG, MD^M

Provider ID: 100334344009

 3998 VISTA WAY STE 204
OCEANSIDE, CA 92056

 (760) 736-6767


 Korean

Effective as of 01-JUL-24

CURRAN, PERRIN, MD^M

Provider ID: 100083095002

 3601 VISTA WAY STE 201
OCEANSIDE, CA 92056


 (760) 639-1714

Effective as of 01-FEB-05

HEIFETZ, SUSAN, MD^F

Provider ID: 100024397011

 3601 VISTA WAY STE 201
OCEANSIDE, CA 92056

 (760) 529-9514


Effective as of 01-SEP-21

LIZOTTE, PAUL, DO^{M†}

Provider ID: 100212648008

 115 N EL CAMINO REAL STE
A

OCEANSIDE, CA 92058

 (760) 330-5055


 Spanish

Effective as of 01-MAR-21

MACMURRAY, MICHAEL, MD^M

Provider ID: 100067535007

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 (760) 631-5000


 Spanish

Effective as of 01-MAR-20

MACMURRAY, MICHAEL, MD^M

Provider ID: 100067535003

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 (760) 631-5000


 Spanish

Effective as of 01-OCT-05

MACMURRAY, MICHAEL, MD^M

Provider ID: 100067535012

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 (760) 631-5000

 Spanish

Effective as of 01-JAN-24

SAMANI, PARGOL, MD^F

Provider ID: 100325205012

 3927 WARING RD STE C

C1. Lista de proveedores de la red

Proveedores de atención primaria

OCEANSIDE, CA 92056
☎ (619) 703-7220
📠 Farsi, Persian
Teleservice
Effective as of 01-DEC-23

ZIMMERMANN, ANDRES, MD^M

Provider ID: 100015622004
📠 3601 VISTA WAY STE 201
OCEANSIDE, CA 92056
☎ (760) 639-1714
📠 Spanish
Effective as of 01-SEP-21

FAMILY PRACTICE

MCHENRY, KATHRYN, DO^F

Provider ID: 100320650015
📠 16650 HIGHWAY 76
PAUMA VALLEY, CA 92061
☎ (760) 742-9919
📠 Spanish
Effective as of 01-FEB-24

GENERAL PRACTICE

LAFONTANT, JEAN, MD^{M†}

Provider ID: 100218405011
📠 524 W 4TH ST STE B
PERRIS, CA 92570
☎ (951) 355-0030
📠 French, Haitian Creole,
Spanish
Effective as of 01-APR-21

INTERNAL MEDICINE

SANUCCI, SHAUN, DO^F

Provider ID: 100352649064
📠 524 W 4TH ST STE B
PERRIS, CA 92570
☎ (951) 355-0030
Effective as of 01-FEB-24

SANUCCI, SHAUN, DO^F

Provider ID: 100352649063
📠 524 W 4TH ST STE B
PERRIS, CA 92570
☎ (951) 355-0030
Effective as of 01-NOV-23

FAMILY PRACTICE

KAUR, JATINDER, MD^F

Provider ID: 100315025014
📠 13010 POWAY RD
POWAY, CA 92064
☎ (858) 218-3000
📠 Hindi, Punjabi, Urdu
Effective as of 01-JAN-24

KAUR, JATINDER, MD^F

Provider ID: 100315025013
📠 13010 POWAY RD
POWAY, CA 92064
☎ (858) 218-3000
📠 Hindi, Punjabi, Urdu
Effective as of 01-MAY-23

TANKSLEY, SIMON, MD^M

Provider ID: 100353447004
📠 15611 POMERADO RD FL 3
POWAY, CA 92064
☎ (858) 675-3210
📠 Spanish
Effective as of 01-JAN-24

FQHC

NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER,

Provider ID: PG0092632004
📠 13010 POWAY RD
POWAY, CA 92064
☎ (858) 218-3000
Effective as of 01-JUL-22

INTERNAL MEDICINE

RIVERA, MARCELO, MD^M

Provider ID: 100036662021
📠 15644 POMERADO RD STE
100
POWAY, CA 92064
☎ (858) 485-5111
📠 Spanish, Tagalog
Effective as of 01-SEP-23

RIVERA, MARCELO, MD^M

Provider ID: 100036662020
📠 15644 POMERADO RD STE
100
POWAY, CA 92064
☎ (858) 485-5111
📠 Spanish, Tagalog
Effective as of 01-SEP-23

RIVERA, MARCELO, MD^M

Provider ID: 100036662022
📠 15644 POMERADO RD STE
100
POWAY, CA 92064
☎ (858) 485-5111
📠 Spanish, Tagalog
Effective as of 01-DEC-23

RIVERA, MARCELO, MD^{M†}

Provider ID: 100036662016
📠 15644 POMERADO RD STE
300
POWAY, CA 92064
☎ (858) 613-8743
📠 Spanish, Tagalog
Teleservice
Effective as of 01-JAN-21

RIVERA, MARCELO, MD^{M†}

Provider ID: 100036662015
📠 13525 MIDLAND RD STE F
POWAY, CA 92064
☎ (858) 486-9100
📠 Spanish, Tagalog
Effective as of 01-JAN-21

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

RIVERA, MARCELO, MD^{M†}

Provider ID: 100036662019

13525 MIDLAND RD STE F
 POWAY, CA 92064

(858) 486-9100

Spanish, Tagalog

Effective as of 01-SEP-23

FQHC

TRUECARE, †

Provider ID: PG0025086043

220 ROTANZI ST
 RAMONA, CA 92065

(760) 736-6767

Teleservice

Effective as of 01-JUL-22

INTERNAL MEDICINE

YUNG, DORIS, MD^{F†}

Provider ID: 100036513005

220 ROTANZI ST
 RAMONA, CA 92065

(760) 736-6767

Chinese, Mandarin, Spanish

Effective as of 01-DEC-18

FAMILY PRACTICE

BILAN, NATALIA, MD^F

Provider ID: 100112756005

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

(949) 709-5100

Russian

Effective as of 01-JAN-18

CIANCIOLA, MARK, MD^{M††}

Provider ID: 100057057005

29472 AVENIDA DE LAS
 BANDERA
 RANCHO SANTA

MARGARITA, CA 92688

(949) 459-9968

Effective as of 01-MAY-12

GHAZI, FARANAK, MD^{F†}

Provider ID: 100332514003

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

(949) 709-0988

Effective as of 01-AUG-18

HAUSER, BRIAN, MD^M

Provider ID: 100262507010

29472 AVENIDA DE LAS
 BANDERA
 RANCHO SANTA
 MARGARITA, CA 92688

(949) 459-9968

Effective as of 01-JUL-24

KARIMABADI, MARJAN, MD^{F††}

Provider ID: 100196435002

29472 AVENIDA DE LAS
 BANDERA
 RANCHO SANTA
 MARGARITA, CA 92688

(949) 459-9968

Farsi

Effective as of 01-OCT-13

INTERNAL MEDICINE

GORE, GWENDOLYN, MD^{F††}

Provider ID: 100020754005

29472 AVENIDA DE LAS
 BANDERA
 RANCHO SANTA
 MARGARITA, CA 92688

(949) 459-9968

Effective as of 01-MAY-12

KAMAREI, SHAPARAK, MD^{F†}

Provider ID: 100132319012

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

(949) 709-0988

Faroese, Farsi

Effective as of 01-JAN-18

TRAN, LILIAN, MD^{F††}

Provider ID: 100105534008

29472 AVENIDA DE LAS
 BANDERA
 RANCHO SANTA
 MARGARITA, CA 92688

(949) 459-9968

Vietnamese

Effective as of 01-MAR-15

FAMILY PRACTICE

DESILVA, PETER, MD^M

Provider ID: 100046594003

29809 SANTA MARGARITA
 PKWY STE 300
 RCHO STA MARG, CA
 92688

(949) 709-5100

Effective as of 01-JAN-18

DAVALOS, RICARDO, MD^M

Provider ID: 100077642004

150 AVENIDA CABRILLO
 STE A

SAN CLEMENTE, CA 92672

(949) 369-6993

Spanish

Effective as of 01-JAN-18

RAMSEY, KAYLA, DO^F

Provider ID: 100365540002

1031 AVENIDA PICO STE
 203

SAN CLEMENTE, CA 92673

(949) 557-0820

Effective as of 01-JAN-21

CI. Lista de proveedores de la red

Proveedores de atención primaria

ROBERSON, ANDREA, DO^{F†}

Provider ID: 100091717003

📍 105 AVENIDA DE LA ESTRELLA STE 1A
SAN CLEMENTE, CA 92672

☎ (949) 586-8000

Effective as of 01-JAN-18

SAFAVI, MAHSA, MD^{F†}

Provider ID: 100350049007

📍 724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

☎ (949) 493-6113

🗂 Farsi, Persian

Effective as of 01-JAN-23

SHOKOUHI, SARA, MD^{F†}

Provider ID: 100111432006

📍 665 CAMINO DE LOS MARES STE 207
SAN CLEMENTE, CA 92673

☎ (949) 661-4411

🗂 Farsi, Persian

Effective as of 01-JAN-18

INTERNAL MEDICINE

CHANG, LAWRENCE, MD^M

Provider ID: 100045275002

📍 665 CAMINO LOS MARES 301
SAN CLEMENTE, CA 92673

☎ (949) 240-9664

🗂 Chinese, Mandarin, Spanish

Effective as of 01-JAN-18

CLARK, LORI, MD^{F†}

Provider ID: 100054653008

📍 655 CAMINO DE LOS MARES STE 122
SAN CLEMENTE, CA 92673

☎ (949) 588-7262

🗂 Spanish

Effective as of 01-JUL-22

GARNER, KAREN, MD^{F†}

Provider ID: 100100519023

📍 831 VIA SUERTE STE 102
SAN CLEMENTE, CA 92673

☎ (949) 364-5600

Effective as of 01-NOV-17

MITREVSKI, PREDRAG, MD^{M†}

Provider ID: 100071204007

📍 675 CAMINO DE LOS MARES STE 200
SAN CLEMENTE, CA 92673

☎ (949) 542-8865

Effective as of 01-JAN-15

MITREVSKI, PREDRAG, MD^{M*}

Provider ID: 100071204011

📍 638 CAMINO DE LOS MARES STE D4
SAN CLEMENTE, CA 92673

☎ (949) 542-8865

Effective as of 01-APR-24

ONYEKWULUJE, ANNE, MD^F

Provider ID: 100176684006

📍 638 CAMINO DE LOS MARES STE D4
SAN CLEMENTE, CA 92673

☎ (949) 542-8865

Effective as of 01-APR-24

REXINGER, KENNETH, MD^{M†}

Provider ID: 100058286009

📍 831 VIA SUERTE STE 102
SAN CLEMENTE, CA 92673

☎ (949) 364-5600

Effective as of 01-JAN-15

UNDERWOOD JOLLY, AMY, MD^{F†}

Provider ID: 100086849011

📍 831 VIA SUERTE STE 102
SAN CLEMENTE, CA 92673

☎ (949) 364-5600

Effective as of 01-JAN-22

WOOD, YELENA, MD^{F†}

Provider ID: 100018427006

📍 724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

☎ (949) 493-6113

Effective as of 01-JAN-18

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL, MD^{M†}

Provider ID: 100360099012

📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

☎ (619) 662-4100

🗂 Spanish

Effective as of 01-JAN-21

ALVAREZ-ESTRADA, MIGUEL, MD^{M†}

Provider ID: 100360099016

📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

☎ (619) 662-4100

🗂 Spanish

Effective as of 01-MAY-22

BAIK, JESSICA, MD^F

Provider ID: 100427411002

📍 7825 ENGINEER RD STE 101
SAN DIEGO, CA 92111

☎ (858) 277-7111

🗂 Korean, Spanish

Teleservice

Effective as of 01-APR-24

BAIK, JESSICA, MD^F

Provider ID: 100427411004

📍 7825 ENGINEER RD
SAN DIEGO, CA 92111




☎ (858) 277-7111

🗂 Korean, Spanish




Effective as of 01-APR-24

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




BOYD, JAMES, MD^M

Provider ID: 100053030010
 9333 GENESEE AVE STE 250
 SAN DIEGO, CA 92121
 (619) 810-7027
 Spanish
 Teleservice
 Effective as of 01-DEC-23




CUTLER, MICHAEL, MD^M

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




CUTLER, MICHAEL, MD^M

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

CUTLER, MICHAEL, MD^M




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

CUTLER, MICHAEL, MD^M




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

DABO, TARAM, MD^{M†}




Provider ID: 100075261003

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




DABO, TARAM, MD^{M†}

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




DAO, VIET, MD^{M†}

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


DAO, VIET, MD^{M†}



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

DAO, VIET, MD^{M†}




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

DAO, VIET, MD^{M†}




Provider ID: 100105020062
 2363 ULRIC ST STE B
 SAN DIEGO, CA 92111

 (858) 268-1747
 Mandarin, Spanish, Vietnamese
 Effective as of 01-AUG-20




DAO, VIET, MD^{M†}

Provider ID: 100105020064
 4616 EL CAJON BLVD STE 9
 SAN DIEGO, CA 92115
 (619) 583-0553
 Mandarin, Spanish, Vietnamese
 Effective as of 01-AUG-20




DAO, VIET, MD^{M†}

Provider ID: 100105020067
 4616 EL CAJON BLVD STE 9
 SAN DIEGO, CA 92115
 (619) 583-0553
 Mandarin, Spanish, Vietnamese
 Effective as of 01-JAN-21


DAO, VIET, MD^{M†}

Provider ID: 100105020068
 4616 EL CAJON BLVD STE 9
 SAN DIEGO, CA 92115
 (619) 583-0553
 Mandarin, Spanish, Vietnamese
 Effective as of 01-JAN-21

DAO, VIET, MD^{M†}













































Provider ID: 100105020069
 4616 EL CAJON BLVD STE 9
 SAN DIEGO, CA 92115
 (619) 583-0553
 Mandarin, Spanish, Vietnamese
 Effective as of 01-NOV-20

DAO, VIET, MD^{M†}

Provider ID: 100105020035
 4616 EL CAJON BLVD STE 9
 SAN DIEGO, CA 92115

C1. Lista de proveedores de la red

Proveedores de atención primaria

 (619) 583-0553  Mandarin, Spanish, Vietnamese Effective as of 01-OCT-17	Effective as of 01-JAN-21	Effective as of 01-JUN-22
DAVIS, DEIRDRE, MD^{Ft} Provider ID: 100375869006  950 S EUCLID AVE SAN DIEGO, CA 92114  (619) 662-4100  Spanish Teleservice Effective as of 01-JUN-24	DENYSIAK, JACQUELINE, MD^{Ft} Provider ID: 100363725007  3969 4TH AVE STE 203 SAN DIEGO, CA 92103  (619) 294-6500 Teleservice Effective as of 01-NOV-21	FAMBRO, CYNTHIA, MD^{Ft} Provider ID: 100350838004  950 S EUCLID AVE SAN DIEGO, CA 92114  (619) 662-4100  Spanish Effective as of 01-JAN-21
DAVIS, DEIRDRE, MD^{Ft} Provider ID: 100375869002  950 S EUCLID AVE SAN DIEGO, CA 92114  (619) 662-4100  Spanish Teleservice Effective as of 01-AUG-21	DESHPANDE, KAVITA, MD^F Provider ID: 100427408003  4060 FAIRMOUNT AVE SAN DIEGO, CA 92105  (619) 255-9155  French Teleservice Effective as of 01-APR-24	GERBATSCH-BORNEMISZA, ILDIKO, MD^F Provider ID: 100325246016  3490 PALM AVE SAN DIEGO, CA 92154  (619) 423-5616  Spanish Teleservice Effective as of 01-JUL-23
DE ROTH, GEORGINE, MD^F Provider ID: 100409222005  3750 CONVOY ST STE 118 SAN DIEGO, CA 92111  (760) 741-1224  French, Hungarian, Spanish Effective as of 01-AUG-23	DESHPANDE, KAVITA, MD^F Provider ID: 100427408004  4171 FAIRMOUNT AVE SAN DIEGO, CA 92105  (619) 269-1269  French Teleservice Effective as of 01-APR-24	GIL, GABRIEL, MD^{Mt} Provider ID: 100094547025  909 CARDIFF ST SAN DIEGO, CA 92114  (619) 465-3121  Spanish Effective as of 01-JAN-21
DENYSIAK, JACQUELINE, MD^{Ft} Provider ID: 100363725002  3969 4TH AVE STE 203 SAN DIEGO, CA 92103  (619) 294-6500 Teleservice Effective as of 01-DEC-20	DIEP, BRIAN, MD^{Mt} Provider ID: 100324529013  4551 EL CAJON BLVD SAN DIEGO, CA 92115  (619) 280-7185  Vietnamese Teleservice Effective as of 01-OCT-22	GIL, GABRIEL, MD^{Mt} Provider ID: 100094547011  903 CARDIFF ST SAN DIEGO, CA 92114  (619) 465-3121  Spanish Effective as of 01-JAN-18
DENYSIAK, JACQUELINE, MD^{Ft} Provider ID: 100363725005  3969 4TH AVE STE 203 SAN DIEGO, CA 92103  (619) 294-6500 Teleservice	DIEP, BRIAN, MD^{Mt} Provider ID: 100324529011  7345 LINDA VISTA RD STE A SAN DIEGO, CA 92111  (858) 277-5463  Vietnamese Teleservice	GIL, GABRIEL, MD^{Mt} Provider ID: 100094547010  903 CARDIFF ST SAN DIEGO, CA 92114  (619) 465-3121  Spanish Effective as of 01-JAN-18
		GIL, GABRIEL, MD^{Mt}

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

Provider ID: 100094547026

903 CARDIFF ST
 SAN DIEGO, CA 92114
 (619) 465-3121
 Spanish
 Effective as of 01-NOV-20

GUTIERREZ, LORAIN, MD^{Ft}

Provider ID: 100334279007
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 (619) 255-9155
 Spanish
 Teleservice
 Effective as of 01-AUG-21

HAMIDI, MAHSHID, MD^{Ft}

Provider ID: 100110351017
 5222 BALBOA AVE STE 31
 SAN DIEGO, CA 92117
 (858) 565-6394
 Faroese, Farsi, French
 Effective as of 01-APR-23

HAMIDI, MAHSHID, MD^{Ft}

Provider ID: 100110351013
 5222 BALBOA AVE STE 31
 SAN DIEGO, CA 92117
 (858) 565-6394
 Faroese, Farsi, French
 Effective as of 01-AUG-20

HAMIDI, MAHSHID, MD^{Ft}

Provider ID: 100110351005
 5222 BALBOA AVE STE 31
 SAN DIEGO, CA 92117
 (858) 565-6394
 Faroese, Farsi, French
 Effective as of 01-APR-18

HAMIDI, MAHSHID, MD^{Ft}

Provider ID: 100110351015
 5222 BALBOA AVE STE 31
 SAN DIEGO, CA 92117
 (858) 565-6394

Faroese, Farsi, French
 Effective as of 01-JAN-21

HAMIDI, MAHSHID, MD^{Ft}

Provider ID: 100110351016
 5222 BALBOA AVE STE 31
 SAN DIEGO, CA 92117
 (858) 565-6394
 Faroese, Farsi, French
 Effective as of 01-FEB-22

HEIMLER, GRAHAM, MD^M

Provider ID: 100395560005
 9333 GENESEE AVE
 SAN DIEGO, CA 92121
 (800) 926-8273
 Effective as of 01-JUL-23

HEINRICI, ALEKA, MD^F

Provider ID: 100244401008
 286 EUCLID AVE STE 302
 SAN DIEGO, CA 92114
 (619) 662-4100
 Spanish
 Teleservice
 Effective as of 01-APR-23

HENRY, REBECCA, MD^F

Provider ID: 100418054006
 6386 ALVARADO CT STE
 101
 SAN DIEGO, CA 92120
 (858) 554-1212
 Effective as of 01-APR-24

HENRY, REBECCA, MD^F

Provider ID: 100418054008
 6386 ALVARADO CT STE
 101
 SAN DIEGO, CA 92120
 (858) 554-1212
 Effective as of 01-MAY-24

HENRY, REBECCA, MD^F

Provider ID: 100418054002

6386 ALVARADO CT STE
 101
 SAN DIEGO, CA 92120
 (858) 554-1212
 Effective as of 01-NOV-23

HENRY, REBECCA, MD^F

Provider ID: 100418054007
 6386 ALVARADO CT STE
 101
 SAN DIEGO, CA 92120
 (858) 554-1212
 Effective as of 01-MAY-24

HOUGHTON, ROBERT, MD^{Mt}

Provider ID: 100034977002
 1855 1ST AVE STE 200B
 SAN DIEGO, CA 92101
 (619) 233-4044
 German, Spanish
 Effective as of 01-FEB-07

JENKIN, FREDERICK, DO^{Mt}

Provider ID: 100038612009
 3562 GOVERNOR DR STE 1
 SAN DIEGO, CA 92122
 (858) 774-5157
 Effective as of 01-MAY-21

JOHN, TANNER, MD^M

Provider ID: 100415495003
 3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113
 (619) 662-4100
 Teleservice
 Effective as of 01-OCT-23

KIDDER, BRENDAN, MD^{Mt}

Provider ID: 100334556005
 3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113
 (619) 662-4100
 Spanish
 Effective as of 01-MAY-22

CI. Lista de proveedores de la red

Proveedores de atención primaria

LEBANO, RICHARD, MD^M

Provider ID: 100340129005

📍 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

☎ (844) 200-2426

🗂 Spanish

Effective as of 01-OCT-23

LIU, CHIA-LIN, DO^M

Provider ID: 100102354004

📍 2185 GARNET AVE

SAN DIEGO, CA 92109

☎ (858) 270-9270

🗂 Chinese, Mandarin, Spanish

Effective as of 01-APR-23

LIU, CHIA-LIN, DO^M

Provider ID: 100102354002

📍 2185 GARNET AVE

SAN DIEGO, CA 92109

☎ (858) 270-9270

🗂 Chinese, Mandarin, Spanish

Effective as of 01-DEC-03

LUAN, GORDON, MD^{Mt}

Provider ID: 100012685018

📍 4320 GENESEE AVE STE
103

SAN DIEGO, CA 92117

☎ (858) 598-6789

🗂 Chinese, Mandarin

Effective as of 01-NOV-23

LUAN, GORDON, MD^{Mt}

Provider ID: 100012685016

📍 4320 GENESEE AVE STE
103

SAN DIEGO, CA 92117

☎ (858) 598-6789

🗂 Chinese, Mandarin

Effective as of 01-JUN-22

MARQUEZ, LUIS, MD^{Mt}

Provider ID: 100078829006

📍 4060 4TH AVE STE 540
SAN DIEGO, CA 92103

☎ (619) 236-8796

🗂 Italian, Spanish

Effective as of 01-NOV-21

MATSON, GARY, DO^{Mt}

Provider ID: 100051901002

📍 4501 MISSION BAY DR STE
3E

SAN DIEGO, CA 92109

☎ (858) 270-4343

🗂 French, German, Spanish

Teleservice

Effective as of 01-FEB-07

MONTENEGRO, CLAUDIA, DO^F

Provider ID: 100427447003

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

☎ (619) 255-9155

🗂 Spanish

Teleservice

Effective as of 01-APR-24

MONTENEGRO, CLAUDIA, DO^F

Provider ID: 100427447004

📍 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

☎ (619) 269-1269

🗂 Spanish

Teleservice

Effective as of 01-APR-24

MORALES, ALEJANDRA, MD^{Ft}

Provider ID: 100363732006

📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

☎ (619) 662-4100

Effective as of 01-MAY-22

MORALES, ALEJANDRA, MD^{Ft}

Provider ID: 100363732003

📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

☎ (619) 662-4100

Effective as of 01-JAN-21

NGUYEN, LINHKIEU, MD^{Ft}

Provider ID: 100073181012

📍 3575 EUCLID AVE STE 100
SAN DIEGO, CA 92105

☎ (619) 284-1400

🗂 Chinese, Spanish, Tagalog
Teleservice

Effective as of 01-JAN-21

NGUYEN, LINHKIEU, MD^{Ft}

Provider ID: 100073181014

📍 6905 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ (619) 284-1400

🗂 Chinese, Spanish, Tagalog

Effective as of 01-FEB-22

ORTIZ ILIZALITURRI, ANA, MD^{F*}

Provider ID: 100394347011

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

☎ (619) 280-4213

🗂 Spanish

Teleservice

Effective as of 01-OCT-23

RECALDE, FRANCISCO, MD^{Mt}

Provider ID: 100015266003

📍 3811 EL CAJON BLVD
SAN DIEGO, CA 92105

☎ (619) 284-5622

🗂 Spanish

Effective as of 01-SEP-09

RECALDE, FRANCISCO, MD^{Mt}

Provider ID: 100015266018

📍 3811 EL CAJON BLVD
SAN DIEGO, CA 92105

☎ (619) 284-5622

🗂 Spanish


Effective as of 01-JAN-21


C1. Lista de proveedores de la red

Proveedores de atención primaria

RODRIGUEZ, SEAN, MD^M

Provider ID: 100197884009

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 (619) 662-4100


 Spanish

Effective as of 01-MAR-21

ROSADO, IVAN, MD^M

Provider ID: 100365788012

 316 25TH ST
SAN DIEGO, CA 92102


 (619) 662-4100

Effective as of 01-JUL-24

RYAN, DAVID, MD^M

Provider ID: 100078982005

 2931 JARVIS ST
SAN DIEGO, CA 92106

 (619) 222-2355


 Spanish


Effective as of 01-FEB-07

SALEH, ANDREW, MD^{Mt}

Provider ID: 100293587004

 1370 ROSECRANS ST STE A
SAN DIEGO, CA 92106

 (619) 223-2668


 Arabic, Spanish

Effective as of 01-DEC-23

SAZEGAR, PAYAM, MD^{Mt}

Provider ID: 100187888011

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 (619) 255-9155


Teleservice

Effective as of 01-JUL-21

SAZEGAR, PAYAM, MD^{Mt}

Provider ID: 100187888013

 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105


 (619) 269-1269


Teleservice

Effective as of 01-JUL-21

SCOTT, LAGINA, MD^F

Provider ID: 100363586007

 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114


 (619) 662-4100


Teleservice

Effective as of 01-JUN-24

SCOTT, LAGINA, MD^F

Provider ID: 100363586003

 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

 (619) 662-4100

Teleservice


Effective as of 01-MAR-21


SHAMANI, AZAM, MD^{Ft}

Provider ID: 100132296023

 5555 RESERVOIR DR STE
312

SAN DIEGO, CA 92120

 (619) 639-7285

 Faroese, Farsi, Persian


Effective as of 01-SEP-22


SHAMANI, AZAM, MD^{Ft}

Provider ID: 100132296015

 5555 RESERVOIR DR STE
312

SAN DIEGO, CA 92120

 (619) 639-7285

 Faroese, Farsi, Persian


Effective as of 01-APR-18


SHAMANI, AZAM, MD^{Ft}

Provider ID: 100132296022

 5555 RESERVOIR DR STE
312

SAN DIEGO, CA 92120

 (619) 639-7285

 Faroese, Farsi, Persian


Effective as of 01-SEP-21


SHAMANI, AZAM, MD^{Ft}

Provider ID: 100132296021

 5555 RESERVOIR DR STE
312

SAN DIEGO, CA 92120


 (619) 639-7285


 Faroese, Farsi, Persian

Effective as of 01-JAN-21

SIVA, TENAYA, MD^{M*}

Provider ID: 100418703006

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 (619) 662-4100


 Spanish


Teleservice

Effective as of 01-SEP-24

SIVA, TENAYA, MD^M

Provider ID: 100418703003

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 (619) 662-4100

 Spanish


Teleservice

Effective as of 01-NOV-23

SNYDER, CHRISTOPHER, DO^{Mt}

Provider ID: 100024789053

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

 (619) 662-4100

 Spanish


Teleservice

Effective as of 01-MAR-22

SNYDER, CHRISTOPHER, DO^{Mt}

Provider ID: 100024789058

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

 (619) 662-4100

 Spanish

Teleservice

Effective as of 01-AUG-24


C1. Lista de proveedores de la red

Proveedores de atención primaria

STONES, RACHEL, MD^F

Provider ID: 100387928007

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 (619) 255-9155

 Spanish


Teleservice

Effective as of 01-MAY-22

STONES, RACHEL, MD^F

Provider ID: 100387928008

 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 (619) 269-1269

 Spanish

Teleservice


Effective as of 01-MAY-22

SZMIDT, MARIA, MD^F

Provider ID: 100108398011

 12395 EL CAMINO REAL
STE 100

SAN DIEGO, CA 92130

 (858) 259-5655

 Polish, Russian, Spanish


Effective as of 01-JAN-21

SZMIDT, MARIA, MD^F

Provider ID: 100108398007

 12395 EL CAMINO REAL
STE 100

SAN DIEGO, CA 92130

 (858) 259-5655


 Polish, Russian, Spanish


Effective as of 01-SEP-15

TEGUH, COLLIN, DO^{M†}

Provider ID: 100089123007

 2045 ADAMS AVE
SAN DIEGO, CA 92116

 (619) 281-8988

 German, Indonesian,
Malayalam

Teleservice


Effective as of 01-AUG-20

VAZQUEZ-BOJORQUEZ,

ALEJANDRA, MD^F

Provider ID: 100391945010

 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

 (858) 554-1212


 Spanish

Effective as of 01-NOV-22

VILLA, MARIA, MD^{F†}

Provider ID: 100111602017

 655 SATURN BLVD STE J
SAN DIEGO, CA 92154

 (619) 575-4442


 Spanish, Tagalog

Effective as of 01-JAN-21

VILLA, MARIA, MD^{F†}

Provider ID: 100111602005

 655 SATURN BLVD STE J
SAN DIEGO, CA 92154

 (619) 575-4442


 Spanish, Tagalog

Effective as of 01-FEB-18

VILLA, MARIA, MD^{F†}

Provider ID: 100111602016

 655 SATURN BLVD STE J
SAN DIEGO, CA 92154

 (619) 575-4442


 Spanish, Tagalog

Effective as of 01-JAN-21

VILLA, MARIA, MD^{F†}

Provider ID: 100111602015

 655 SATURN BLVD STE J
SAN DIEGO, CA 92154

 (619) 575-4442


 Spanish, Tagalog


Effective as of 01-JAN-21

VO, PHU LUONG, DO^F

Provider ID: 100415527006

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

 (619) 662-4100


 Spanish, Vietnamese
Teleservice


Effective as of 01-JUN-24

VO, PHU LUONG, DO^F

Provider ID: 100415527003

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

 (619) 662-4100


 Spanish, Vietnamese
Teleservice

Effective as of 01-NOV-23

VOURLITIS, MELISSA, DO^{F†}

Provider ID: 100090572016

 9800 GLEN CENTER DR
SAN DIEGO, CA 92131

 (858) 832-2500


Teleservice

Effective as of 01-NOV-23

WONG, CALVIN, MD^{M†}

Provider ID: 100095226007

 444 W C ST STE 185
SAN DIEGO, CA 92101

 (619) 232-6262

 Chinese, Spanish


Effective as of 01-JUN-11

YUEN, SELENE, MD^{F†}

Provider ID: 100246155013

 4320 GENESEE AVE STE
103

SAN DIEGO, CA 92117

 (858) 598-6789

 Chinese




Teleservice




Effective as of 01-APR-22




YUEN, SELENE, MD^{F†}

Provider ID: 100246155015



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



 4320 GENESEE AVE STE 103
 SAN DIEGO, CA 92117
 (858) 598-6789
 Chinese
 Teleservice
 Effective as of 01-JUN-22

ZINK, IRENE, MD^{F†}
 Provider ID: 100324255006
 3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113
 (619) 662-4100
 German
 Teleservice
 Effective as of 01-APR-23



ZINK, IRENE, MD^{F†}
 Provider ID: 100324255002
 3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113
 (619) 662-4100
 German
 Teleservice
 Effective as of 01-AUG-17



FQHC



DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC,
 Provider ID: PG0025044041
 4725 MARKET ST
 SAN DIEGO, CA 92102
 (619) 515-2560
 Effective as of 01-JAN-21



DOWNTOWN FAMILY CTR AT CONNECTIONS, †
 Provider ID: PG0084437004
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101
 (619) 515-2430
 Effective as of 01-JAN-21



FAMILY HEALTH CTR IBARRA,

†
 Provider ID: PG0084517004
 4874 POLK AVE
 SAN DIEGO, CA 92105
 (619) 515-2426
 Effective as of 01-JAN-21


FAMILY HEALTH CTR OF SD-ELM ST, †
 Provider ID: PG0083911003
 140 ELM ST
 SAN DIEGO, CA 92101
 (619) 515-2520
 Effective as of 01-JAN-21



FAMILY HEALTH CTR SAN DIEGO-OAK PARK,
 Provider ID: PG0084522006
 2114 NATIONAL AVE
 SAN DIEGO, CA 92113
 (619) 515-2406
 Effective as of 01-JAN-21



FAMILY HEALTH CTR SAN DIEGO-OAK PARK,
 Provider ID: PG0084522003
 5160 FEDERAL BLVD
 SAN DIEGO, CA 92105
 (619) 515-2454
 Effective as of 01-JAN-21



FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL,
 Provider ID: PG0083950003
 2325 COMMERCIAL ST STE 1400
 SAN DIEGO, CA 92113
 (619) 515-2422
 Effective as of 01-JAN-21



FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE,
 Provider ID: PG0085338003
 1550 BROADWAY STE 2



SAN DIEGO, CA 92101
 (619) 515-2525
 Effective as of 01-JAN-21

FAMILY HLTH CTR SAN DIEGO-BEACH AREA,
 Provider ID: PG0083156003
 3705 MISSION BLVD
 SAN DIEGO, CA 92109
 (619) 515-2444
 Effective as of 01-JAN-21

FAMILY HLTH CTR SD HILLCREST, †
 Provider ID: PG0084516014
 4094 4TH AVE
 SAN DIEGO, CA 92103
 (619) 515-2545
 Effective as of 01-JAN-21

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

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

LINDA VISTA HEALTH CARE CTR,
 Provider ID: PG0024858005
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111
 (858) 279-0925

C1. Lista de proveedores de la red

Proveedores de atención primaria

Teleservice

Effective as of 01-JUL-22

LOGAN HEIGHTS FAMILY HEALTH CENTER,

Provider ID: PG0025044044

2204 NATIONAL AVE
SAN DIEGO, CA 92113

(619) 515-2355

Effective as of 01-JAN-21

LOGAN HEIGHTS FAMILY HEALTH CENTER,

Provider ID: PG0025044036

1809 NATIONAL AVE
SAN DIEGO, CA 92113

(619) 515-2300

Effective as of 01-JAN-21

MID-CITY COMMUNITY CLINIC,

†

Provider ID: PG0049261010

4290 POLK AVE
SAN DIEGO, CA 92105

(619) 563-0250

Teleservice

Effective as of 01-JUL-22

MID-CITY COMMUNITY CLINIC,

Provider ID: PG0049261008

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

(619) 280-2058

Effective as of 01-JUL-22

NESTOR COMMUNITY HEALTH CENTER,

Provider ID: PG0031643004

1016 OUTER RD
SAN DIEGO, CA 92154

(619) 429-3733

Teleservice

Effective as of 01-JUL-22

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: PG0084186003

3514 30TH ST
SAN DIEGO, CA 92104

(619) 515-2424

Effective as of 01-JAN-21

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: PG0025044037

3544 30TH ST
SAN DIEGO, CA 92104

(619) 515-2424

Effective as of 01-JAN-21

OPERATION SAMAHAN - MIRA MESA,

Provider ID: PG0083606006

9855 ERMA RD STE 105
SAN DIEGO, CA 92131

(844) 200-2426

Effective as of 01-JAN-21

OPERATION SAMAHAN - MIRA MESA, †

Provider ID: PG0083606005

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126

(844) 200-2426

Teleservice

Effective as of 01-JAN-21

OPERATION SAMAHAN RANCHO PENASQUITOS,

Provider ID: PG0083903005

9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

(844) 200-2426

Effective as of 01-JAN-21

SAN DIEGO AMERICAN INDIAN

HEALTH CENTER,

Provider ID: PG0025869017

2630 1ST AVE
SAN DIEGO, CA 92103

(619) 234-2158

Teleservice

Effective as of 01-JUL-22

Indian Health Services: Y

SAN DIEGO FAMILY CARE,

Provider ID: PG0092672004

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

(858) 810-8700

Teleservice

Effective as of 01-JUL-22

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE,

Provider ID: PG0094135003

316 25TH ST
SAN DIEGO, CA 92102

(619) 238-5551

Effective as of 01-JAN-21

SAN YSIDRO HEALTH CHC - OCEAN VIEW, †

Provider ID: PG0047560013

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

(619) 662-4100

Teleservice

Effective as of 01-JAN-21

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED,

Provider ID: PG0094138003

4690 EL CAJON BLVD
SAN DIEGO, CA 92115



(619) 662-4100

Teleservice



Effective as of 01-JAN-21

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



**SAN YSIDRO HEALTH
PRECISION PARK,**

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

**SHERMAN HEIGHTS FAMILY
HLTH CTRS INC,**




Provider ID: PG0082766003
 2391 ISLAND AVE
SAN DIEGO, CA 92102
 (619) 515-2435
Effective as of 01-JAN-21

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



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

GENERAL PRACTICE

CAMPBELL, BRIANNA, MD^F



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

DABROWSKI, THOMAS, MD^M



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

DABROWSKI, THOMAS, MD^M



Provider ID: 100343180011

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




DABROWSKI, THOMAS, MD^M

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

DENYSIAK, JACQUELINE, MD^{Ft}

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

GUEFEN, URI, MD^M

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

KIDOKORO, YASUKO, MD^{Ft}

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




KIDOKORO, YASUKO, MD^{Ft}

Provider ID: 100075657018
 5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117
 (858) 277-9669
 Japanese




Teleservice

Effective as of 01-MAY-22




KIDOKORO, YASUKO, MD^{Ft}

Provider ID: 100075657015
 5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117
 (858) 277-9669
 Japanese
Teleservice
Effective as of 01-JAN-21




MIRKARIMI, MORTEZA, MD^{Mt}

Provider ID: 100084653003
 3863 CLAIREMONT DR
SAN DIEGO, CA 92117
 (858) 483-5570
 Faroese, Farsi, Persian
Effective as of 01-DEC-12




MIRKARIMI, MORTEZA, MD^{Mt}

Provider ID: 100084653009
 3863 CLAIREMONT DR
SAN DIEGO, CA 92117
 (858) 483-5570
 Faroese, Farsi, Persian
Effective as of 01-AUG-20

MIRKARIMI, MORTEZA, MD^{Mt}

Provider ID: 100084653010
 3863 CLAIREMONT DR
SAN DIEGO, CA 92117
 (858) 483-5570
 Faroese, Farsi, Persian
Effective as of 01-JAN-21

RECALDE, FRANCISCO, MD^{Mt}

Provider ID: 100015266017
 3811 EL CAJON BLVD
SAN DIEGO, CA 92105
 (619) 284-5622
 Spanish
Effective as of 01-AUG-20

RECALDE, FRANCISCO, MD^{Mt}

C1. Lista de proveedores de la red

Proveedores de atención primaria

Provider ID: 100015266020

3811 EL CAJON BLVD
SAN DIEGO, CA 92105

(619) 284-5622

Spanish

Effective as of 01-JAN-21

RECALDE, FRANCISCO, MD^{Mt}

Provider ID: 100015266019

3811 EL CAJON BLVD
SAN DIEGO, CA 92105

(619) 284-5622

Spanish

Effective as of 01-JAN-21

RECALDE, FRANCISCO, MD^{Mt}

Provider ID: 100015266021

3811 EL CAJON BLVD
SAN DIEGO, CA 92105

(619) 284-5622

Spanish

Effective as of 01-SEP-22

INTERNAL MEDICINE

AL-SALEH, YADANI, MD^{Ft}

Provider ID: 100358544020

3737 MORAGA AVE STE
B103

SAN DIEGO, CA 92117

(858) 799-0855

Spanish

Effective as of 01-FEB-24

AL-SALEH, YADANI, MD^{Ft}

Provider ID: 100358544019

3737 MORAGA AVE STE
B103

SAN DIEGO, CA 92117

(858) 799-0855

Spanish

Effective as of 01-SEP-23

AL-SALEH, YADANI, MD^{Ft}

Provider ID: 100358544012

3737 MORAGA AVE STE
B103

SAN DIEGO, CA 92117

(858) 799-0855

Spanish

Effective as of 01-DEC-22

BUTLER, LISA, MD^{Ft}

Provider ID: 100068570008

3260 3RD AVE
SAN DIEGO, CA 92103

(619) 297-3737

Hindi, Italian, Spanish

Effective as of 01-JUN-20

CARAMBAS, CLARITA, MD^{Ft}

Provider ID: 100070756004

9190 MIRA MESA BLVD
SAN DIEGO, CA 92126

(858) 689-1814

Tagalog

Effective as of 01-SEP-22

CSAPOCZI, PETER, MD^M

Provider ID: 100187372011

950 S EUCLID AVE
SAN DIEGO, CA 92114

(619) 662-4100

Hungarian, Spanish,
Ukrainian

Teleservice

Effective as of 01-JUN-24

DE CARVALHO, CARLOS, MD^{Mt}

Provider ID: 100077227047

2939 BEYER BLVD
SAN DIEGO, CA 92154

(619) 423-0343

Portuguese, Spanish,
Tagalog

Teleservice

Effective as of 01-JAN-21

DE CARVALHO, CARLOS, MD^{Mt}

Provider ID: 100077227054

2939 BEYER BLVD
SAN DIEGO, CA 92154

(619) 423-0343

Portuguese, Spanish,
Tagalog

Teleservice

Effective as of 01-SEP-22

DE CARVALHO, CARLOS, MD^{Mt}

Provider ID: 100077227048

2939 BEYER BLVD
SAN DIEGO, CA 92154

(619) 423-0343

Portuguese, Spanish,
Tagalog

Teleservice

Effective as of 01-SEP-20

EL-GHONEIMY, AHMED, MD^{Mt}

Provider ID: 100103500012

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

(619) 255-9155

Arabic, French, Italian

Teleservice

Effective as of 01-AUG-22

EL-GHONEIMY, AHMED, MD^{Mt}

Provider ID: 100103500013

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

(619) 269-1269

Arabic, French, Italian

Teleservice

Effective as of 01-AUG-22

ELIAS, RAMIZ, MD^{Mt}

Provider ID: 100105850036

7695 CARDINAL CT STE
370-375

SAN DIEGO, CA 92123

(858) 384-7072

Spanish

Effective as of 01-MAR-18

C1. Lista de proveedores de la red


Proveedores de atención primaria

ELIAS, RAMIZ, MD^{M†}

Provider ID: 100105850039

 7695 CARDINAL CT STE
370-375


SAN DIEGO, CA 92123

 (858) 384-7072 Spanish

Effective as of 01-SEP-22

FABELLA, GABRIEL, MD^M


Provider ID: 100011192020

 10737 CAMINO RUIZ STE 115
SAN DIEGO, CA 92126 (858) 695-1262 Japanese, Spanish, Tagalog

Effective as of 01-JAN-21

FABELLA, GABRIEL, MD^M


Provider ID: 100011192003

 10737 CAMINO RUIZ STE 115
SAN DIEGO, CA 92126 (858) 695-1262 Japanese, Spanish, Tagalog

Effective as of 01-NOV-09

FABELLA, GABRIEL, MD^M


Provider ID: 100011192021

 10737 CAMINO RUIZ STE 115
SAN DIEGO, CA 92126 (858) 695-1262 Japanese, Spanish, Tagalog

Effective as of 01-MAY-23

FABELLA, GABRIEL, MD^M



Provider ID: 100011192019

 10737 CAMINO RUIZ STE 115
SAN DIEGO, CA 92126 (858) 695-1262 Japanese, Spanish, Tagalog

Effective as of 01-JAN-21

FABELLA, GABRIEL, MD^M


Provider ID: 100011192018

 10737 CAMINO RUIZ STE 115
SAN DIEGO, CA 92126 (858) 695-1262 Japanese, Spanish, Tagalog
Effective as of 01-JAN-21**FAKHRO, SAMEEH, MD^{M†}**

Provider ID: 100379921011

 3490 PALM AVE

SAN DIEGO, CA 92154

 (619) 423-5616


Effective as of 01-JUN-23

FAKHRO, SAMEEH, MD^{M†}

Provider ID: 100379921002

 3490 PALM AVE

SAN DIEGO, CA 92154

 (619) 423-5616


Effective as of 01-NOV-21

FAKHRO, SAMEEH, MD^{M†}

Provider ID: 100379921004

 3490 PALM AVE

SAN DIEGO, CA 92154

 (619) 423-5616


Effective as of 01-DEC-21

FAKHRO, SAMEEH, MD^{M†}

Provider ID: 100379921006

 3490 PALM AVE


SAN DIEGO, CA 92154

 (619) 423-5616

Effective as of 01-APR-22

FRANK, STEWART, MD^{M†}



Provider ID: 100018840004

 4060 4TH AVE STE 605
SAN DIEGO, CA 92103 (619) 298-1318 Spanish

Effective as of 01-FEB-07

GAVRILYUK, IGOR, MD^{M†}

Provider ID: 100107169005

 4060 4TH AVE STE 100
SAN DIEGO, CA 92103 (619) 718-9444 Russian, Ukrainian



Effective as of 01-SEP-09

GREEN, BILLIE, MD^{F†}

Provider ID: 100023101004

 1101 FELSPAR ST

SAN DIEGO, CA 92109

 (858) 483-1720 French


Effective as of 01-AUG-05

GREEN, BILLIE, MD^{F†}

Provider ID: 100023101005

 1101 FELSPAR ST

SAN DIEGO, CA 92109

 (858) 483-1720 French



Effective as of 01-SEP-09

GUHA ROY, ASIM, MD^{M†}

Provider ID: 100107045009

 4540 KEARNY VILLA RD
STE 106


SAN DIEGO, CA 92123

 (858) 430-6656 Bengali, Hindi, Malay



Effective as of 01-SEP-20

GUHA ROY, ASIM, MD^{M†}

Provider ID: 100107045011

 4540 KEARNY VILLA RD
STE 106

SAN DIEGO, CA 92123

 (858) 430-6656 Bengali, Hindi, Malay



Effective as of 01-JAN-21

GUHA ROY, ASIM, MD^{M†}

Provider ID: 100107045003

 4540 KEARNY VILLA RD
STE 106




SAN DIEGO, CA 92123

 (858) 430-6656 Bengali, Hindi, Malay




Effective as of 01-APR-16

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




GUHA ROY, ASIM, MD^{M†}

Provider ID: 100107045012
 4540 KEARNY VILLA RD
 STE 106
 SAN DIEGO, CA 92123
 (858) 430-6656
 Bengali, Hindi, Malay
 Effective as of 01-MAR-23



GUHA ROY, ASIM, MD^{M†}

Provider ID: 100107045016
 4540 KEARNY VILLA RD
 STE 106
 SAN DIEGO, CA 92123
 (858) 430-6656
 Bengali, Hindi, Malay
 Effective as of 01-OCT-23



GUHA ROY, ASIM, MD^M

Provider ID: 100107045014
 4075 54TH ST
 SAN DIEGO, CA 92105
 (858) 430-6656
 Bengali, Hindi, Malay
 Effective as of 01-APR-23


HENDRICKS, MARK, MD^{M†}


Provider ID: 100055830004
 2525 CAMINO DEL RIO S
 STE 165
 SAN DIEGO, CA 92108
 (619) 543-9655
 Effective as of 01-AUG-22

HENRY, ANEEL, MD^M



Provider ID: 100418814002
 6386 ALVARADO CT STE
 101
 SAN DIEGO, CA 92120
 (858) 554-1212
 Effective as of 01-DEC-23

HENRY, ANEEL, MD^{M†}




Provider ID: 100418814004
 6386 ALVARADO CT STE

101
 SAN DIEGO, CA 92120
 (858) 554-1212
 Effective as of 01-APR-24




HENRY, ANEEL, MD^M

Provider ID: 100418814003
 6386 ALVARADO CT STE
 101
 SAN DIEGO, CA 92120
 (858) 554-1212
 Effective as of 01-APR-24



**HINOJOSA-VALENCIA,
 ALEJANDRO, MD^M**

Provider ID: 100108386020
 2939 BEYER BLVD
 SAN DIEGO, CA 92154
 (619) 423-0343
 Spanish
 Effective as of 01-MAY-24




HUA, NATHAN, MD^M

Provider ID: 100408831002
 7345 LINDA VISTA RD STE A
 SAN DIEGO, CA 92111
 (858) 277-5463
 Vietnamese
 Effective as of 01-JUN-23



HUYNH, ANDREW, MD^M

Provider ID: 100427366002
 4551 EL CAJON BLVD
 SAN DIEGO, CA 92115
 (619) 280-7185
 Teleservice
 Effective as of 01-APR-24




KHEHAR, BHUPINDER, MD^{M†}

Provider ID: 100110360008
 3260 3RD AVE
 SAN DIEGO, CA 92103
 (619) 297-3737
 Hindi, Punjabi, Swahili
 Effective as of 01-JAN-21




KINGSBURY, A GRANT, MD^{M†}

Provider ID: 100063083007
 4060 4TH AVE STE 102
 SAN DIEGO, CA 92103
 (619) 298-2900
 Effective as of 01-NOV-22



MAI, KENNY, DO^M

Provider ID: 100169616004
 8901 ACTIVITY RD STE 205
 SAN DIEGO, CA 92126
 (858) 779-9919
 Vietnamese
 Effective as of 01-JUL-24




MAI, KENNY, DO^M

Provider ID: 100169616003
 8901 ACTIVITY RD STE 205
 SAN DIEGO, CA 92126
 (858) 779-9919
 Vietnamese
 Effective as of 01-MAY-24




MOSSON, MARK, MD^{M†}

Provider ID: 100176768003
 4060 4TH AVE STE 505
 SAN DIEGO, CA 92103
 (619) 298-1318
 Effective as of 01-AUG-13

NAJAR, FAUZI, MD^{M*}

Provider ID: 100390568005
 3490 PALM AVE
 SAN DIEGO, CA 92154
 (619) 423-5616
 Arabic
 Effective as of 01-JUN-23

NAJAR, FAUZI, MD^M

Provider ID: 100390568003
 3490 PALM AVE
 SAN DIEGO, CA 92154
 (619) 423-5616
 Arabic

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

Effective as of 01-DEC-22

NAJAR, FAUZI, MD^M

Provider ID: 100390568007

3490 PALM AVE
 SAN DIEGO, CA 92154

(619) 423-5616

Arabic

Effective as of 01-OCT-23

NAJAR, FAUZI, MD^M

Provider ID: 100390568002

3490 PALM AVE
 SAN DIEGO, CA 92154

(619) 423-5616

Arabic

Effective as of 01-AUG-22

NARAYANAN,

PRIYADHARSHINI, MD^F

Provider ID: 100355661006

11865 CARMEL MOUNTAIN
 RD STE 1104
 SAN DIEGO, CA 92128

(858) 554-1212

Teleservice

Effective as of 01-MAY-24

OLIVER, DEANNA, MD^{Ft}

Provider ID: 100328564035

995 GATEWAY CENTER
 WAY
 SAN DIEGO, CA 92102

(619) 264-1935

Spanish

Effective as of 01-SEP-22

QUINONEZ, JOSE, MD^M

Provider ID: 100085905004

250 MARKET ST
 SAN DIEGO, CA 92101

(619) 239-9675

Spanish

Effective as of 01-FEB-07

**RAMINENI, NEELAKANTAN,
 MD^{Mt}**

Provider ID: 100051318002

4537 COLLEGE AVE
 SAN DIEGO, CA 92115

(619) 265-0504

Spanish, Telugu

Effective as of 01-FEB-07

**RAMINENI, NEELAKANTAN,
 MD^{Mt}**

Provider ID: 100051318005

4537 COLLEGE AVE
 SAN DIEGO, CA 92115

(619) 265-0504

Spanish, Telugu

Effective as of 01-NOV-18

RIADH, MAYSAM, MD^F

Provider ID: 100413125002

3260 3RD AVE
 SAN DIEGO, CA 92103

(619) 297-3737

Arabic

Effective as of 01-SEP-23

SHAJAN, JOSHAN, MD^M

Provider ID: 100422554002

3863 CLAIREMONT DR
 SAN DIEGO, CA 92117

(858) 483-5570

Spanish

Effective as of 01-FEB-24

**SHAMSINEJAD BABAKI,
 ARASH, MD^M**

Provider ID: 100107114026

1666 PRECISION PARK LN
 SAN DIEGO, CA 92173

(619) 662-4100

Farsi

Effective as of 01-JUL-24

SHI, RONG, MD^{Ft}

Provider ID: 100133432007

3260 3RD AVE
 SAN DIEGO, CA 92103

(619) 297-3737

Mandarin

Effective as of 01-AUG-15

SLAYDEN, TANNER, MD^M

Provider ID: 100433415003

330 LEWIS ST
 SAN DIEGO, CA 92103

(800) 926-8273

Effective as of 01-JUL-24

SPECKART, PAUL, MD^{Mt}

Provider ID: 100053933006

3260 3RD AVE
 SAN DIEGO, CA 92103

(619) 297-3737

Effective as of 01-FEB-07

SZMIDT, MARIA, MD^F

Provider ID: 100108398006

12395 EL CAMINO REAL
 STE 100
 SAN DIEGO, CA 92130

(858) 259-5655

Polish, Russian, Spanish

Effective as of 01-JUL-04

TESSIER, ADLA, MD^F

Provider ID: 100077390010

4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105

(619) 255-9155

Spanish

Effective as of 01-JUN-23

VASANI, DHWANISHIVA, MD^F

Provider ID: 100317624004

12843 EL CAMINO REAL
 STE 203
 SAN DIEGO, CA 92130

(858) 554-1212

Gujarati, Hindi, Spanish

C1. Lista de proveedores de la red

Proveedores de atención primaria

Effective as of 01-MAY-24

VILLA, MARIA, MD^{Ft}

Provider ID: 100111602014

📍 655 SATURN BLVD STE J
SAN DIEGO, CA 92154

☎ (619) 575-4442

🗂 Spanish, Tagalog

Effective as of 01-JAN-21

WAGNER, PAUL, MD^M

Provider ID: 100088692006

📍 4060 4TH AVE STE 100
SAN DIEGO, CA 92103

☎ (619) 718-9444

🗂 Spanish

Effective as of 01-JAN-08

WATTS, ELI, MD^{Mt}

Provider ID: 100384223003

📍 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

☎ (619) 662-4100

🗂 Spanish

Effective as of 01-MAR-22

WILLGING, STEFAN, MD^{Mt}

Provider ID: 100106507003

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

☎ (619) 298-1318

🗂 German

Effective as of 01-FEB-07

WILLIAMS, HOWARD, MD^{Mt}

Provider ID: 100070298003

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

☎ (619) 298-1318

🗂 Spanish

Effective as of 01-FEB-07

WOODALL, GARY, MD^{Mt}

Provider ID: 100096806003

📍 2970 5TH AVE STE 140

SAN DIEGO, CA 92103

☎ (619) 260-3456

Effective as of 01-FEB-07

FAMILY PRACTICE

ASHIZAWA, JAMES, MD^{Mt}

Provider ID: 100056553008

📍 31001 RANCHO VIEJO RD
STE 200

SAN JUAN CAPISTRANO,
CA 92675

☎ (949) 661-9600

🗂 Japanese, Spanish

Effective as of 01-JUL-15

GIGER, ANTON, DO^{Mt}

Provider ID: 100164128006

📍 31001 RANCHO VIEJO RD
STE 200

SAN JUAN CAPISTRANO,
CA 92675

☎ (949) 661-9600

Effective as of 01-OCT-15

GONZALEZ, DAVID, MD^{Mt}

Provider ID: 100200908009

📍 31001 RANCHO VIEJO RD
STE 200

SAN JUAN CAPISTRANO,
CA 92675

☎ (949) 661-9600

🗂 Spanish

Effective as of 01-JUL-15

GREENSPAN, SCOTT, MD^M

Provider ID: 100067813008

📍 31001 RANCHO VIEJO RD
STE 200

SAN JUAN CAPISTRANO,
CA 92675

☎ (949) 661-9600

🗂 Spanish

Effective as of 01-JUN-24

HONG, ANDREW, MD^{Mt}

Provider ID: 100043550008

📍 31001 RANCHO VIEJO RD
STE 200

SAN JUAN CAPISTRANO,
CA 92675

☎ (949) 661-9600

Effective as of 01-OCT-15

NAFICY, K, MD^{Mt}

Provider ID: 100104435017

📍 30448 RANCHO VIEJO RD
STE 150

SAN JUAN CAPISTRANO,
CA 92675

☎ (949) 489-0773

🗂 Farsi, French, Spanish

Teleservice

Effective as of 01-MAY-21

NAFICY, K, MD^{Mt}

Provider ID: 100104435018

📍 30448 RANCHO VIEJO RD
STE 150

SAN JUAN CAPISTRANO,
CA 92675

☎ (949) 489-0773

🗂 Farsi, French, Spanish

Teleservice

Effective as of 01-JUL-21

NAFICY, K, MD^{Mt}

Provider ID: 100104435016

📍 30448 RANCHO VIEJO RD
STE 150

SAN JUAN CAPISTRANO,
CA 92675

☎ (949) 489-0773

🗂 Farsi, French, Spanish

Teleservice

Effective as of 01-MAY-21

PANDY, LIZANDER, DO^{Mt}

Provider ID: 100113474013

📍 31001 RANCHO VIEJO RD
STE 200

C1. Lista de proveedores de la red

Proveedores de atención primaria

SAN JUAN CAPISTRANO,
CA 92675
☎ (949) 661-9600
📄 Spanish
Effective as of 01-OCT-21

PANDY, LIZANDER, DO^{M†}

Provider ID: 100113474012
📄 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
☎ (949) 661-9600
📄 Spanish
Effective as of 01-OCT-21

SERNA, SANDY, MD^{F†}

Provider ID: 100393508002
📄 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
☎ (949) 661-9600
📄 Spanish
Effective as of 01-SEP-22

SHRESTHA, ALINA, MD^{F*}

Provider ID: 100436871002
📄 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
☎ (949) 661-9600
Effective as of 01-NOV-24

TRINH, MIMI, MD^{F††}

Provider ID: 100105591008
📄 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
☎ (949) 661-9600
📄 Vietnamese
Effective as of 01-JUL-15

ZHENG, VINCENT, DO^{M†}

Provider ID: 100393531003
📄 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
☎ (949) 661-9600
Effective as of 01-SEP-22

ZHENG, VINCENT, DO^{M†}

Provider ID: 100393531002
📄 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
☎ (949) 661-9600
Effective as of 01-SEP-22

INTERNAL MEDICINE

FORTMANN, DANIEL, MD^{M*}

Provider ID: 100017458004
📄 32281 CAMINO CPSTRN
C102
SAN JUAN CAPISTRANO,
CA 92675
☎ (949) 493-7981
Teleservice
Effective as of 01-JAN-18

NGUYEN, THUYTRANG, MD^{F††}

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

FAMILY PRACTICE

HALIM, NEIL, MD^M

Provider ID: 100153551007
📄 1030 LA BONITA DR STE
316

SAN MARCOS, CA 92078
☎ (760) 744-9626
📄 Arabic, Spanish
Effective as of 01-FEB-13

ROCHA, CLAUDIA ROMELIA, MD^F

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

WILLIE, KADEN, DO^M

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

FQHC

TRUECARE,

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

TRUECARE,

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



INTERNAL MEDICINE




NGUYEN, MINH, MD^M




Provider ID: 100055170007
📄 1595 GRAND AVE STE 100
SAN MARCOS, CA 92078

C1. Lista de proveedores de la red




Proveedores de atención primaria




 (760) 736-6767
 Vietnamese
Effective as of 01-JUN-24



TOLENTINO, ARTURO, MD^M
Provider ID: 100112985010
 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
 (833) 867-4642
 Tagalog
Effective as of 01-JUN-24


WITCZAK, IZABELA, MD^{F†}
Provider ID: 100036527006
 150 VALPRED A RD
SAN MARCOS, CA 92069
 (760) 736-6767
 Polish
Effective as of 01-FEB-19




FAMILY PRACTICE




**ALVAREZ-ESTRADA, MIGUEL,
MD^{M†}**
Provider ID: 100360099010
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-JAN-21




**ALVAREZ-ESTRADA, MIGUEL,
MD^{M†}**
Provider ID: 100360099011
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-JAN-21




ARRIETA, NOEMI, DO^F
Provider ID: 100214881015
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100


 Spanish
Teleservice
Effective as of 01-JUN-24



ARRIETA, NOEMI, DO^F
Provider ID: 100214881011
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Teleservice
Effective as of 01-APR-23



**CARRIEDO-CENICEROS,
MARIA, MD^{F†}**
Provider ID: 100066452012
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-JAN-21




CUTLER, MICHAEL, MD^M
Provider ID: 100225708025
 4630 BORDER VILLAGE RD
STE H
SAN YSIDRO, CA 92173
 (619) 264-2591
 Russian, Spanish
Effective as of 01-APR-24




CUTLER, MICHAEL, MD^M
Provider ID: 100225708022
 4630 BORDER VILLAGE RD
STE H
SAN YSIDRO, CA 92173
 (619) 264-2591
 Russian, Spanish
Effective as of 01-JAN-24



CUTLER, MICHAEL, MD^M
Provider ID: 100225708024
 4630 BORDER VILLAGE RD
STE H
SAN YSIDRO, CA 92173




 (619) 264-2591
 Russian, Spanish
Effective as of 01-APR-24

LEE, JOSEPH, MD^{M†}
Provider ID: 100368709004
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
Teleservice
Effective as of 01-AUG-21

LEPEZ, DAVID, MD^{M†}
Provider ID: 100255267005
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-APR-23

LEPEZ, DAVID, MD^{M†}
Provider ID: 100255267002
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-NOV-15

MANSOUR, SABAH, MD^M
Provider ID: 100436982002
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
Effective as of 01-AUG-24

MOYA, MARY, MD^{F*}
Provider ID: 100099596010
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-APR-23

**NAVARRO, VANESSA MARIA,
MD^{F†}**

C1. Lista de proveedores de la red

Proveedores de atención primaria

Provider ID: 100173914012

3364 BEYER BLVD STE 103
SAN YSIDRO, CA 92173

(619) 662-4100

Filipino, Spanish, Tagalog

Effective as of 01-JAN-21

NAVARRO, VANESSA MARIA, MD^{F†}

Provider ID: 100173914015

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

(619) 662-4100

Filipino, Spanish, Tagalog

Effective as of 01-AUG-22

ORTEGA, LUIS, MD^{M†}

Provider ID: 100394387002

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Teleservice

Effective as of 01-OCT-22

ORTEGA, LUIS, MD^{M†}

Provider ID: 100394387007

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Teleservice

Effective as of 01-JUN-24

ORTIZ ILIZALITURRI, ANA, MD

^{F††}

Provider ID: 100394347003

4050 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Teleservice

Effective as of 01-OCT-22

RAJAIPOUR, NEGIN, MD^{F†}

Provider ID: 100300998007

3364 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Farsi, Persian

Effective as of 01-JAN-21

SNYDER, CHRISTOPHER, DO^{M†}

Provider ID: 100024789042

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Effective as of 01-JAN-21

STALEY, MICHAELA, MD^{F†}

Provider ID: 100359422003

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Effective as of 01-JAN-21

TALAVERA, GREGORY, MD^M

Provider ID: 100334847007

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Teleservice

Effective as of 01-APR-23

FQHC

SAN YSIDRO HEALTH

MATERNAL AND CHILD

HEALTH CTR, †

Provider ID: PG0047542012

4050 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Teleservice

Effective as of 01-JAN-21

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER, †

Provider ID: PG0047448004

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Teleservice

Effective as of 01-JAN-21

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS,

Provider ID: PG0047560015

3364 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Teleservice

Effective as of 01-JAN-21

INTERNAL MEDICINE

CHEGINI, SEPIDEH, MD^F

Provider ID: 100042216003

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

German, Persian

Effective as of 01-FEB-24

DILLON, BENEDICT, MD^{M††}

Provider ID: 100166636014

4050 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Effective as of 01-SEP-24

DILLON, BENEDICT, MD^{M†}

Provider ID: 100166636015

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish




Effective as of 01-SEP-24

DILLON, BENEDICT, MD^{M††}




Provider ID: 100166636010

CI. Lista de proveedores de la red




Proveedores de atención primaria

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-JAN-21




RAMIREZ SANCHEZ, CLAUDIA, MD^{F†}

Provider ID: 100392011002
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-AUG-22

SALERNO, MARIANA, MD^{F†}



Provider ID: 100287873007
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Teleservice
Effective as of 01-MAR-21

SCHNEIDER-MUNOZ, MARGARITA, MD^{F*}

Provider ID: 100335002005
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-SEP-24




FAMILY PRACTICE

ADEMA, DONALD, DO^M




Provider ID: 100086591006
 10201 MISSION GORGE RD
STE M
SANTEE, CA 92071
 (619) 596-5445
Effective as of 01-JAN-14

INTERNAL MEDICINE



CORBIN, DAVID, MD^{M†}

Provider ID: 100378968006
 120 TOWN CENTER PKWY
SANTEE, CA 92071
 (619) 662-4100
 Hungarian
Teleservice
Effective as of 01-JUN-24



CORBIN, DAVID, MD^{M†}

Provider ID: 100378968002
 120 TOWN CENTER PKWY
SANTEE, CA 92071
 (619) 662-4100
 Hungarian
Teleservice
Effective as of 01-NOV-21

GUERRA, JACQUELINE, MD^{F†}



Provider ID: 100324693009
 120 TOWN CENTER PKWY
SANTEE, CA 92071
 (619) 873-3476
Teleservice
Effective as of 01-JUN-24

GUERRA, JACQUELINE, MD^{F†}

Provider ID: 100324693006
 120 TOWN CENTER PKWY
SANTEE, CA 92071
 (619) 873-3476
Teleservice
Effective as of 01-MAR-21



FAMILY PRACTICE

VOURLITIS, MELISSA, DO^{F*}

Provider ID: 100090572017
 850 DEL MAR DOWNS RD
SOLANA BEACH, CA 92075
 (858) 832-2500
Teleservice
Effective as of 01-NOV-23



INTERNAL MEDICINE

NARAYANAN, PRIYADHARSHINI, MD^F

Provider ID: 100355661007
 665 SAN RODOLFO DR STE
1104
SOLANA BEACH, CA 92075
 (858) 266-9551
Teleservice
Effective as of 01-MAY-24



FAMILY PRACTICE

AFFLALO, SUZANNE, MD^F

Provider ID: 100402675004
 10225 AUSTIN DR STE 105
SPRING VALLEY, CA 91978
 (858) 648-0755
Teleservice
Effective as of 01-SEP-23



FQHC

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC,

Provider ID: PG0025044038
 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 (619) 515-2555
Effective as of 01-JAN-21

FAMILY PRACTICE

BEHNAWA, SUSAN, MD^{F†}



Provider ID: 100343610004
 27190 SUN CITY BLVD
SUN CITY, CA 92586
 (951) 676-4193
Teleservice
Effective as of 01-JAN-20




BEHNAWA, SUSAN, MD^{F†}




Provider ID: 100343610010




CI. Lista de proveedores de la red




Proveedores de atención primaria

 27190 SUN CITY BLVD
SUN CITY, CA 92586
 (951) 676-4193
Teleservice
Effective as of 01-NOV-20




GANTA, SANYASI, MD^{M†}
Provider ID: 100113069006
 26960 CHERRY HILLS
BLVD STE A
SUN CITY, CA 92586
 (951) 672-2856
 Hindi, Spanish, Telugu
Teleservice
Effective as of 01-AUG-16




GANTA, SANYASI, MD^{M†}
Provider ID: 100113069012
 26960 CHERRY HILLS
BLVD STE A
SUN CITY, CA 92586
 (951) 672-2856
 Hindi, Spanish, Telugu
Teleservice
Effective as of 01-APR-21



GANTA, SANYASI, MD^{M†}
Provider ID: 100113069009
 26960 CHERRY HILLS
BLVD STE A
SUN CITY, CA 92586
 (951) 672-2856
 Hindi, Spanish, Telugu
Teleservice
Effective as of 01-NOV-17

SCHOONMAKER, JOHN, DO^{M†}
Provider ID: 100064979020
 29826 HAUN RD STE 300
SUN CITY, CA 92586
 (951) 679-7022
 Spanish
Effective as of 01-SEP-22




INTERNAL MEDICINE




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

NGUYEN, THANG, MD^{M†}
Provider ID: 100068936002
 27830 BRADLEY RD
SUN CITY, CA 92586
 (951) 679-2358
 Vietnamese
Teleservice
Effective as of 01-SEP-09




STANFORD, DAVID, MD^{M†}
Provider ID: 100030388002
 29798 HAUN RD STE 308
SUN CITY, CA 92586
 (951) 301-7611
Teleservice
Effective as of 01-SEP-09




FAMILY PRACTICE




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



**AYON MARTINEZ, CARLOS,
MD^M**
Provider ID: 100152029006
 41840 ENTERPRISE CIR N
TEMECULA, CA 92590
 (619) 440-2751
 Spanish



Effective as of 01-AUG-20

**AYON MARTINEZ, CARLOS,
MD^M**
Provider ID: 100152029007
 41715 WINCHESTER RD
TEMECULA, CA 92590
 (951) 694-9449
 Spanish
Effective as of 01-AUG-20

BAILEY, CRISTINA, MD^{F†}
Provider ID: 100060834004
 28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590
 (951) 676-4193
 Spanish
Effective as of 01-JUN-04

BAILEY, CRISTINA, MD^{F†}
Provider ID: 100060834010
 28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590
 (951) 676-4193
 Spanish
Effective as of 01-NOV-20

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

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

C1. Lista de proveedores de la red

Proveedores de atención primaria

BRIGGS, BRIDGET, MD^F

Provider ID: 100069323005

31170 TEMECULA PKWY
STE 100
TEMECULA, CA 92592

(951) 698-6090

Spanish

Effective as of 01-JAN-16

CAMARILLO, DANIEL, MD^{Mt}

Provider ID: 100110735008

28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590

(951) 676-4193

Spanish

Effective as of 01-MAR-12

CAMARILLO, DANIEL, MD^{Mt}

Provider ID: 100110735016

28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590

(951) 676-4193

Spanish

Effective as of 01-NOV-20

COBIAN, VANESSA, MD^F

Provider ID: 100350271006

31537 RANCHO PUEBLO
RD STE 102
TEMECULA, CA 92592

(833) 684-4642

Effective as of 01-JUL-24

COBIAN, VANESSA, MD^F

Provider ID: 100350271003

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

(951) 225-6400

Effective as of 01-MAR-22

COMBS, WALTER, MD^{Mt}

Provider ID: 100085605012

28780 SINGLE OAK DR STE
160

TEMECULA, CA 92590

(951) 252-8650

Spanish

Effective as of 01-NOV-20

COMBS, WALTER, MD^{Mt}

Provider ID: 100085605005

28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590

(951) 252-8650

Spanish

Effective as of 01-JUN-04

COMBS, MATTHEW, MD^{Mt}

Provider ID: 100337168003

28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590

(951) 676-4193

Effective as of 01-DEC-18

DORR, KASIE, DO^F

Provider ID: 100422004002

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

(951) 225-6400

Effective as of 01-JAN-24

ELKAYAM, ISAK, MD^M

Provider ID: 100400487003

31537 RANCHO PUEBLO
RD STE 102
TEMECULA, CA 92592

(833) 867-4642

Hebrew, Spanish

Effective as of 01-JUL-24

IM, TAE WOONG, MD^{Mt}

Provider ID: 100039015004

28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590

(951) 676-4193

Korean

Effective as of 01-JUN-04

JACKSON, ANITA, MD^{Ft}

Provider ID: 100060861005

44274 GEORGE CUSHMAN
CT STE 212
TEMECULA, CA 92592

(951) 694-4688

Tagalog

Effective as of 01-NOV-11

MADRID, RICHARD, MD^{Mt}

Provider ID: 100077741005

28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590

(951) 676-4193

Effective as of 01-OCT-05

MADRID, RICHARD, MD^{Mt}

Provider ID: 100077741014

28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590

(951) 676-4193

Effective as of 01-NOV-20

MAJEED, WASAN, MD^F

Provider ID: 100398263003

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

(951) 225-6400

Arabic

Effective as of 01-MAR-23

MCDONALD, ROBERT, MD^{Mt}

Provider ID: 100093825003

31493 RANCHO PUEBLO
RD STE 107
TEMECULA, CA 92592

(951) 303-3337

Effective as of 01-OCT-09

CI. Lista de proveedores de la red

Proveedores de atención primaria

MCDONALD, MARY, MD^F

Provider ID: 100051408003

31493 RANCHO PUEBLO RD STE 107
TEMECULA, CA 92592

(951) 303-3337

Effective as of 01-OCT-09

MILLER, BRANDON, DO^{M†}

Provider ID: 100148562007

28780 SINGLE OAK DR STE 160
TEMECULA, CA 92590

(951) 676-4193

Effective as of 01-OCT-11

MILLER, BRANDON, DO^{M†}

Provider ID: 100148562008

31720 TEMECULA PKWY
TEMECULA, CA 92592

(951) 676-4193

Effective as of 01-OCT-11

NWOSU, MICHAEL, MD^M

Provider ID: 100367685005

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

(951) 225-6400

Effective as of 01-AUG-22

POSTE, ALETHEA, MD^F

Provider ID: 100418802002

28780 SINGLE OAK DR STE 160
TEMECULA, CA 92590

(951) 676-4193

Italian, Spanish

Teleservice

Effective as of 01-JAN-24

RAHMAN, MAISARA, MD^{F†}

Provider ID: 100083398023

31720 TEMECULA PKWY
TEMECULA, CA 92592

(951) 676-4193

Arabic

Effective as of 01-NOV-20

RAHMAN, MAISARA, MD^{F†}

Provider ID: 100083398012

31150 TEMECULA PKWY STE 200
TEMECULA, CA 92592

(951) 676-4193

Arabic

Effective as of 01-AUG-16

SCHULTZ, JAMES, MD^{M†}

Provider ID: 100030577018

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

(951) 225-6400

Farsi, Greek, Spanish

Effective as of 01-AUG-20

SIMMONS, PAMELA, MD^{F†}

Provider ID: 100057995006

28780 SINGLE OAK DR STE 160
TEMECULA, CA 92590

(951) 676-4193

Effective as of 01-JUL-17

SKEOCH, GORDON, MD^M

Provider ID: 100101810002

27555 YNEZ RD STE 340
TEMECULA, CA 92591

(951) 694-3535

Effective as of 01-SEP-09

VINCENT, WILLIAM, MD^{M†}

Provider ID: 100320230007

31720 TEMECULA PKWY STE 100
TEMECULA, CA 92592

(951) 225-6838

Effective as of 01-MAY-21

WISE, DOUGLAS, DO^{M††}

Provider ID: 100023557005

40285 WINCHESTER RD
STE 103

TEMECULA, CA 92591

(951) 296-5844

Effective as of 01-NOV-22

ZEBARJADI, OMID, DO^M

Provider ID: 100379100008

27699 JEFFERSON AVE STE 305
TEMECULA, CA 92590

(951) 503-8730

Farsi, Persian, Spanish
Teleservice

Effective as of 01-AUG-23

ZEBRACK, DAVID, DO^{M†}

Provider ID: 100064903006

40285 WINCHESTER RD
STE 103
TEMECULA, CA 92591

(951) 296-5844

Spanish

Effective as of 01-SEP-04

ZEBRACK, DAVID, DO^{M†}

Provider ID: 100064903010

40285 WINCHESTER RD
STE 103
TEMECULA, CA 92591

(951) 296-5844

Spanish

Effective as of 01-NOV-22

ZURITA, DANIELA, MD^{F†}

Provider ID: 100396617008

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

(951) 216-2200

Spanish

Effective as of 01-DEC-22

INTERNAL MEDICINE

BASCH, MICHAEL, MD^{M†}

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

Provider ID: 100011399007
 41593 WINCHESTER RD
 STE 101
 TEMECULA, CA 92590
 (951) 719-1111
 Arabic, Spanish
 Effective as of 01-SEP-09

BLOSSER, NICHELE, DO^F
 Provider ID: 100411369003
 28780 SINGLE OAK DR STE
 160
 TEMECULA, CA 92590
 (951) 676-4193
 Effective as of 01-NOV-23

GISI, SYLVIA, MD^F
 Provider ID: 100100126002
 31493 RANCHO PUEBLO
 RD STE 206
 TEMECULA, CA 92592
 (951) 303-6158
 Spanish
 Teleservice
 Effective as of 01-AUG-19

GOMER, JEREMY, MD^{M†}
 Provider ID: 100379005002
 27403 YNEZ RD STE 108
 TEMECULA, CA 92591
 (951) 750-7888
 Effective as of 01-NOV-21

KIM, IRENE, DO^F
 Provider ID: 100380710003
 28780 SINGLE OAK DR STE
 160
 TEMECULA, CA 92590
 (951) 676-4193
 Effective as of 01-JAN-22

HERMAN, SAM, MD^M
 Provider ID: 100414181005
 31951 DOVE CANYON DR
 TRABUCO CANYON, CA

92679
 (949) 557-0890
 Effective as of 01-SEP-23

FAMILY PRACTICE

SCHULTZ, JAMES, MD^M
 Provider ID: 100030577024
 28477 LIZARD ROCKS RD
 VALLEY CENTER, CA 92082
 (760) 742-9919
 Farsi, Greek, Spanish
 Effective as of 01-MAR-23

SCHULTZ, JAMES, MD^M
 Provider ID: 100030577029
 28477 LIZARD ROCKS RD
 VALLEY CENTER, CA 92082
 (760) 742-9919
 Farsi, Greek, Spanish
 Effective as of 01-JAN-24

FQHC

**NEIGHBORHOOD
 HEALTHCARE,**
 Provider ID: PG0024990061
 28477 LIZARD ROCKS RD
 VALLEY CENTER, CA 92082
 (760) 742-9919
 Teleservice
 Effective as of 01-FEB-24

FAMILY PRACTICE

CASTREJON, JOSEPH, MD^{M*}
 Provider ID: 100097250007
 2023 W VISTA WAY STE K
 VISTA, CA 92083
 (760) 806-1406
 Spanish
 Effective as of 01-SEP-21

CLARK, MA BELEN, MD^{F†}
 Provider ID: 100015309003

1954 VIA CTR STE B
 VISTA, CA 92081
 (760) 529-9700
 Tagalog
 Effective as of 01-DEC-15

**ESPINOSA-SILVA, YAMINAH,
 DO^{F*}**
 Provider ID: 100358800015
 134 GRAPEVINE RD
 VISTA, CA 92083
 (760) 631-5000
 Spanish
 Effective as of 01-JAN-24

**ESPINOSA-SILVA, YAMINAH,
 DO^{F*}**
 Provider ID: 100358800014
 1000 VALE TERRACE DR
 VISTA, CA 92084
 (760) 631-5000
 Spanish
 Effective as of 01-JAN-24

FERBER, JEFFREY, MD^{M††}
 Provider ID: 100092669014
 1926 VIA CTR
 VISTA, CA 92081
 (760) 940-7000
 Effective as of 01-SEP-21

HURD, MELISSA, MD^{F†}
 Provider ID: 100054491003
 161 THUNDER DR STE 103
 VISTA, CA 92083
 (760) 758-1988
 Spanish
 Effective as of 01-JUL-13

LEONARD, LISA, MD^{F†}
 Provider ID: 100278907004
 1000 VALE TERRACE DR
 VISTA, CA 92084
 (760) 631-5000
 French, Spanish

CI. Lista de proveedores de la red

Proveedores de atención primaria

Effective as of 01-OCT-21

NOVAK, LOREN, DO^{M†}

Provider ID: 100093766013

1926 VIA CENTRE DRIVE
SUITE A
VISTA, CA 92081

(760) 940-7000

Spanish

Effective as of 01-SEP-21

ONG, DONALD, MD^{M†}

Provider ID: 100033027006

1000 VALE TERRACE DR
VISTA, CA 92084

(760) 631-5000

Filipino, Spanish, Tagalog

Effective as of 01-JAN-24

POP, SIMONA, MD^{F†}

Provider ID: 100021772013

145 THUNDER DR
VISTA, CA 92083

(760) 941-9002

Romanian

Effective as of 01-NOV-23

TRAN, DAO, DO^M

Provider ID: 100325638009

1000 VALE TERRACE DR
VISTA, CA 92084

(760) 631-5000

Vietnamese

Effective as of 01-MAR-20

TRAN, DAO, DO^M

Provider ID: 100325638014

134 GRAPEVINE RD
VISTA, CA 92083

(760) 631-5000

Vietnamese

Effective as of 01-JAN-24

TRAN, DAO, DO^M

Provider ID: 100325638002

134 GRAPEVINE RD
VISTA, CA 92083

(760) 631-5000

Vietnamese

Effective as of 01-JUL-19

TRAN, DAO, DO^M

Provider ID: 100325638010

134 GRAPEVINE RD
VISTA, CA 92083

(760) 631-5000

Vietnamese

Effective as of 01-MAR-20

FQHC

VCC DURIAN, †

Provider ID: PG0083886011

105 DURIAN ST STE A
VISTA, CA 92083

(844) 308-5003

Effective as of 01-JUL-22

VISTA COMMUNITY CLINIC GRAPEVINE,

Provider ID: PG0085050004

134 GRAPEVINE RD
VISTA, CA 92083

(760) 631-5000

Teleservice

Effective as of 01-JUL-22

GENERAL PRACTICE

OLIVA, CARLOS, MD^{M†}

Provider ID: 100102198008

969 S SANTA FE AVE STE A
VISTA, CA 92083

(760) 941-7050

Spanish

Effective as of 01-SEP-22

OLIVA, CARLOS, MD^{M†}

Provider ID: 100102198003

969 S SANTA FE AVE STE A

VISTA, CA 92083

(760) 941-7050

Spanish

Effective as of 01-DEC-17

ONG, DONALD, MD^{M†}

Provider ID: 100033027005

1000 VALE TERRACE DR
VISTA, CA 92084

(760) 631-5000

Filipino, Spanish, Tagalog

Effective as of 01-MAR-20

ONG, DONALD, MD^{M†}

Provider ID: 100033027003

1000 VALE TERRACE DR
VISTA, CA 92084

(760) 631-5000

Filipino, Spanish, Tagalog

Effective as of 01-DEC-10

SMITH, GREGORY, MD^{M*}

Provider ID: 100062596003

161 THUNDER DR STE 207
VISTA, CA 92083

(760) 598-8410

Effective as of 01-DEC-06

INTERNAL MEDICINE

BOQUIN, ENRIQUE, MD^M

Provider ID: 100062570003

1000 VALE TERRACE DR
VISTA, CA 92084

(760) 631-5000

Spanish

Effective as of 01-DEC-07

BOQUIN, ENRIQUE, MD^M

Provider ID: 100062570005

1000 VALE TERRACE DR
VISTA, CA 92084

(760) 631-5000

Spanish

Effective as of 01-NOV-20

C1. Lista de proveedores de la red

Proveedores de atención primaria

BOQUIN, ENRIQUE, MD^M

Provider ID: 100062570008
📍 1000 VALE TERRACE DR
VISTA, CA 92084
☎ (760) 631-5000
🗣 Spanish
Effective as of 01-JAN-24

BRAR, KARANBIR, MD^{M†}

Provider ID: 100305037016
📍 1926 VIA CTR STE A
VISTA, CA 92081
☎ (760) 940-7000
Effective as of 01-SEP-21

CLANCY, TARA, DO^{F†}

Provider ID: 100265397003
📍 2375 S MELROSE DR
VISTA, CA 92081
☎ (760) 305-1900
Effective as of 01-JUL-16

CLANCY, JOHN, DO^{M†}

Provider ID: 100215810013
📍 2375 S MELROSE DR
VISTA, CA 92081
☎ (760) 305-1900
Effective as of 01-SEP-21

DAO, MARC, MD^M

Provider ID: 100307890016
📍 1000 VALE TERRACE DR
VISTA, CA 92084
☎ (760) 631-5000
🗣 French, Vietnamese
Effective as of 01-JAN-24

DAO, MARC, MD^M

Provider ID: 100307890014
📍 1000 VALE TERRACE DR
VISTA, CA 92084
☎ (760) 631-5000
🗣 French, Vietnamese
Effective as of 01-JUN-23

DAO, MARC, MD^M

Provider ID: 100307890010
📍 1000 VALE TERRACE DR
VISTA, CA 92084
☎ (760) 631-5000
🗣 French, Vietnamese
Effective as of 01-FEB-23

HALPERIN, JASON, MD^M

Provider ID: 100400241004
📍 134 GRAPEVINE RD
VISTA, CA 92083
☎ (760) 631-5000
Effective as of 01-JAN-24

KOBAYASHI, GARY, MD^{M†}

Provider ID: 100090343008
📍 145 THUNDER DR STE 1
VISTA, CA 92083
☎ (760) 941-9002
Effective as of 01-SEP-21

LI, XIANGLI, MD^{F†}

Provider ID: 100239749009
📍 1926 VIA CTR STE A
VISTA, CA 92081
☎ (760) 940-7000
🗣 Chinese
Effective as of 01-SEP-21

MOASIS, KAREEM, MD^M

Provider ID: 100379398004
📍 145 THUNDER DR
VISTA, CA 92083
☎ (760) 941-9002
🗣 Arabic
Effective as of 01-JAN-24

NGUYEN, ETHAN, MD^M

Provider ID: 100362686005
📍 145 THUNDER DR
VISTA, CA 92083
☎ (760) 941-9002
🗣 Vietnamese
Effective as of 01-AUG-22

RHIANNON, JULIA, MD^F

Provider ID: 100382647006
📍 1000 VALE TERRACE DR
VISTA, CA 92084
☎ (760) 631-5000
Effective as of 01-SEP-22

RHIANNON, JULIA, MD^F

Provider ID: 100382647009
📍 1000 VALE TERRACE DR
VISTA, CA 92084
☎ (760) 631-5000
Effective as of 01-JAN-24

RHIANNON, JULIA, MD^F

Provider ID: 100382647002
📍 1000 VALE TERRACE DR
VISTA, CA 92084
☎ (760) 631-5000
Effective as of 01-JAN-22

RHIANNON, JULIA, MD^F

Provider ID: 100382647007
📍 105 DURIAN ST STE A
VISTA, CA 92083
☎ (760) 631-5000
Effective as of 01-SEP-22

RHIANNON, JULIA, MD^F

Provider ID: 100382647008
📍 105 DURIAN ST STE B
VISTA, CA 92083
☎ (760) 631-5000
Effective as of 01-SEP-22

RHIANNON, JULIA, MD^F



Provider ID: 100382647010
📍 105 DURIAN ST STE B
VISTA, CA 92083
☎ (760) 631-5000
Effective as of 01-JAN-24


RUTMAN, MICHAEL, DO^{M†}

Provider ID: 100024612023

CI. Lista de proveedores de la red



Proveedores de atención primaria

 2355 S MELROSE DR
VISTA, CA 92081
 (760) 598-0088
Effective as of 01-JAN-21

 (951) 698-8821
Effective as of 01-JAN-22




RUTMAN, MICHAEL, DO^{M†}

Provider ID: 100024612005

 2355 S MELROSE DR
VISTA, CA 92081
 (760) 598-0088
Effective as of 01-OCT-00




SHABANIAN, LEILA, MD^F

Provider ID: 100032179027

 1000 VALE TERRACE DR
VISTA, CA 92084
 (760) 631-5000
 Farsi, French, Persian
Effective as of 01-JUL-24

SHALI, REYZAN, MD^{F†}



Provider ID: 100113968008

 1926 VIA CTR STE A
VISTA, CA 92081
 (760) 940-7000
 Arabic, Hebrew
Effective as of 01-SEP-21

FAMILY PRACTICE

BONNICI, MARCELLA, MD^{F*}


Provider ID: 100072106002

 36320 INLAND VALLEY DR
STE 201
WILDOMAR, CA 92595
 (951) 816-3233
Effective as of 01-OCT-16

INTERNAL MEDICINE

PATEL, REENABEN, MD^F

Provider ID: 100380064004

 36243 INLAND VALLEY DR
STE 160
WILDOMAR, CA 92595

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

CERTIFIED NURSE PRACTITIONER

WONG, KRISTLE, NP

Provider ID: N/A

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

DERMATOLOGY

LANDER, JEFFREY, MD†

Provider ID: N/A

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

LANDER, JEFFREY, MD†

Provider ID: N/A

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

DEVELOPMENTAL

BEHAVIORAL PEDIATRICS

FELDMAN, GARY, MD†

Provider ID: N/A

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

ENDOCRINOLOGY

METABOLISM DIABETES

NADEAU, DANIEL, MD

Provider ID: N/A

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

NADEAU, DANIEL, MD

Provider ID: N/A

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

ROBERTSON, ASHA, MD

Provider ID: N/A

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

ROBERTSON, ASHA, MD

Provider ID: N/A

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

FAMILY PRACTICE

TUNG, CHESTER, DO

Provider ID: N/A

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

HEMATOLOGY / ONCOLOGY

IYER, LAXMI, MD†

Provider ID: N/A

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

IYER, LAXMI, MD†

Provider ID: N/A

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

IYER, LAXMI, MD†

Provider ID: N/A

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

IYER, LAXMI, MD†

Provider ID: N/A

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

IYER, LAXMI, MD†

Provider ID: N/A

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

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

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

INFECTIOUS DISEASE

BAILEY, CHARLES, MD†

Provider ID: N/A

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

BAILEY, CHARLES, MD†

Provider ID: N/A

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

NEUROLOGY

BIXBY, MINDY, DO

Provider ID: N/A

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

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

BIXBY, MINDY, DO

Provider ID: N/A

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

BIXBY, MINDY, DO

Provider ID: N/A

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

BIXBY, MINDY, DO

Provider ID: N/A

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

BIXBY, MINDY, DO

Provider ID: N/A

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

BIXBY, MINDY, DO

Provider ID: N/A

☐ 26671 ALISO CREEK RD STE 203
ALISO VIEJO, CA 92656
Teleservice

Effective as of 01-FEB-23
LUDEMA, THOMAS, MD†
Provider ID: N/A

☐ 15 MAREBLU STE 250
ALISO VIEJO, CA 92656
Effective as of 01-OCT-18

LUDEMA, THOMAS, MD†

Provider ID: N/A

☐ 15 MAREBLU STE 250
ALISO VIEJO, CA 92656
Effective as of 01-OCT-18

MARTINEZ, KENNETH, MD

Provider ID: N/A

☐ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-NOV-14

MARTINEZ, KENNETH, MD

Provider ID: N/A

☐ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A

☐ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A

☐ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

MARTINEZ, KENNETH, MD

Provider ID: N/A

☐ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JAN-17

SALEHI, HAMID, MD†

Provider ID: N/A

☐ 26895 ALISO CREEK RD STE B302
ALISO VIEJO, CA 92656
Effective as of 01-JAN-18

OPTOMETRIST

NGUYEN, LETHUY, OD†

Provider ID: N/A

☐ 27001 MOULTON PKWY STE A100
ALISO VIEJO, CA 92656
Effective as of 01-JAN-18

PEDIATRICS

FELDMAN, GARY, MD†

Provider ID: N/A

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

FELDMAN, GARY, MD†

Provider ID: N/A

☐ 11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-NOV-18

YANNI, ELIZABETH, MD†

Provider ID: N/A

☐ 26671 ALISO CREEK RD STE 200
ALISO VIEJO, CA 92656*
Effective as of 01-JAN-21

PHYSICIANS ASSISTANT

GREEN, TRAVIS, PA

Provider ID: N/A

☐ 26671 ALISO CREEK RD STE 101
ALISO VIEJO, CA 92656*
Effective as of 01-MAY-23

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

PODIATRIST

ENG, STEVE, DPM†

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JUL-21

ENG, STEVE, DPM†

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JUL-21

ENG, STEVE, DPM†

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JUL-21

ENG, STEVE, DPM†

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

ENG, STEVE, DPM†

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

HEHE, KYLE, DPM

Provider ID: N/A

15 MAREBLU STE 240
ALISO VIEJO, CA 92656
Effective as of 01-AUG-23

HEHE, KYLE, DPM

Provider ID: N/A

15 MAREBLU STE 240
ALISO VIEJO, CA 92656
Effective as of 01-AUG-23

PSYCHIATRY

MARTINEZ, KENNETH, MD

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JAN-17

MARTINEZ, KENNETH, MD

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

MARTINEZ, KENNETH, MD

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-NOV-14

MARTINEZ, KENNETH, MD

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JAN-17

MARTINEZ, KENNETH, MD

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

MARTINEZ, KENNETH, MD

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-NOV-14

PULMONARY DISEASES

GALKO, BARBARA, MD

Provider ID: N/A

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

SHAHINIAN, GEORGE, MD

Provider ID: N/A

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

SHAHINIAN, GEORGE, MD

Provider ID: N/A

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

SHAHINIAN, GEORGE, MD

Provider ID: N/A

11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-MAR-24

SHAHINIAN, GEORGE, MD

Provider ID: N/A


11 MAREBLU STE 200

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

ALISO VIEJO, CA 92656
Effective as of 01-MAR-24

SHAHINIAN, GEORGE, MD


Provider ID: N/A

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

SURGERY GENERAL


RUSSO, MICHAEL, MD†

Provider ID: N/A

 11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-APR-21


RUSSO, MICHAEL, MD†

Provider ID: N/A

 11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-MAY-21

RUSSO, MICHAEL, MD†

Provider ID: N/A


 11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-MAY-21

SURGERY

NEUROLOGICAL


MEHTA, VIKRAM, MD

Provider ID: N/A

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

MEHTA, VIKRAM, MD

Provider ID: N/A


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

CERTIFIED NURSE

PRACTITIONER

SANDERS, JESSICA, NP†

Provider ID: N/A

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901


Teleservice

Effective as of 01-NOV-22

CHIROPRACTOR

KELCHNER, MATTHEW, DC†


Provider ID: N/A

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Effective as of 01-JAN-21

PHILLIPS, KATHERINE, DC

Provider ID: N/A

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Effective as of 01-FEB-24

FAMILY PRACTICE

VANHOLLEBEKE, RACHEL, MD

Provider ID: N/A


 1620 ALPINE BLVD
ALPINE, CA 91901

Effective as of 01-JUN-23

INTERNAL MEDICINE

VANHOLLEBEKE, RACHEL, MD


Provider ID: N/A

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901*

Effective as of 01-JUL-24

VANHOLLEBEKE, RACHEL, MD

Provider ID: N/A

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Effective as of 01-JUL-24

LICENSED CLINICAL

SOCIAL WORKER

KHALEEL, AMMAR, LCSW

Provider ID: N/A


 1620 ALPINE BLVD
ALPINE, CA 91901

Effective as of 01-NOV-22

OPHTHALMOLOGY

BINDER, NICHOLAS, MD†


Provider ID: N/A

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†


Provider ID: N/A

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Effective as of 01-JAN-21

CHANG, TOM, MD†


Provider ID: N/A

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Effective as of 01-SEP-22

PATEL, SARJAN, MD†


Provider ID: N/A

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Effective as of 01-SEP-22

PATEL, GITANE, MD†

Provider ID: N/A


 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Effective as of 01-SEP-22

PATEL, GITANE, MD†


Provider ID: N/A

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

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-MAR-18


PATEL, GITANE, MD[†]

Provider ID: N/A

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-JAN-21

PATEL, GITANE, MD[†]


Provider ID: N/A

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-AUG-20

OPTOMETRIST


AOTO, KIM, OD[†]

Provider ID: N/A

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-SEP-22


DYER, SHARON, OD[†]

Provider ID: N/A

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-SEP-22


DYER, SHARON, OD[†]

Provider ID: N/A

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-JAN-21

MARR, RYAN, OD

Provider ID: N/A

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-DEC-22

MARR, RYAN, OD


Provider ID: N/A

 1620 ALPINE BLVD STE 117

ALPINE, CA 91901
Effective as of 01-JUL-24

ZVANUT, DONALD, OD


Provider ID: N/A

 1620 ALPINE BLVD
STE 117
ALPINE, CA 91901
Effective as of 01-AUG-24

PSYCHOLOGIST


FRITZ, JENNIFER, PhD[†]

Provider ID: N/A

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Effective as of 01-DEC-22


FRITZ, JENNIFER, PhD[†]

Provider ID: N/A

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Effective as of 01-DEC-22


SMITH, STEPHANIE, PhD[†]

Provider ID: N/A

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Teleservice
Effective as of 01-AUG-22


SMITH, STEPHANIE, PhD[†]

Provider ID: N/A

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Teleservice
Effective as of 01-AUG-22


TORRES, RANDALL, PSYD

Provider ID: N/A

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Effective as of 01-FEB-24

TORRES, RANDALL, PSYD


Provider ID: N/A

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Effective as of 01-FEB-24

OPTOMETRIST

HOLMSTROM, STEVEN, OD[†]


Provider ID: N/A

 31722 RAILROAD CANYON
RD
CANYON LAKE, CA 92587
Effective as of 01-JUL-23

**ANESTHESIOLOGY PAIN
MANAGEMENT**


MADHAV, SANDIP, MD[†]

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JAN-20


MADHAV, SANDIP, MD[†]

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JAN-21

PRASAD, RUPA, MD[†]

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-NOV-21

PRASAD, RUPA, MD[†]

Provider ID: N/A

 6010 HIDDEN VALLEY RD

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

STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-NOV-23

AUDIOLOGIST

SERENO, EMILY, AuD

Provider ID: N/A
☑ 2390 FARADAY AVE
CARLSBAD, CA 92008
Teleservice
Effective as of 01-MAY-24

SILVERSTEIN, KAYLI, AuD

Provider ID: N/A
☑ 2390 FARADAY AVE
CARLSBAD, CA 92008
Teleservice
Effective as of 01-APR-24

CERTIFIED NURSE PRACTITIONER

BINAVI, HOWNAZ, NP†

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-SEP-22

BISHOP, LESLIE, NP†

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JAN-21

BISHOP, LESLIE, NP†

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice
Effective as of 01-JAN-21

HALPERN, DAVID, NP†

Provider ID: N/A
☑ 1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009
Effective as of 01-JAN-21

HOOPER, BONNIE, NP†

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JAN-21

HOOPER, BONNIE, NP†

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JAN-21

POLIZZI, BRITTANY, NP†

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JAN-22

POLIZZI, BRITTANY, NP†

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-SEP-22

RICE, ELIZABETH, NP

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-MAR-24

SOLIC, DIANE, NP

Provider ID: N/A
☑ 1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009
Teleservice
Effective as of 01-OCT-22

SYMANSKI, ELIZABETH, NP†

Provider ID: N/A
☑ 1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009
Teleservice
Effective as of 01-AUG-22

CHIROPRACTOR

BERRY, MICHAEL, DC

Provider ID: N/A
☑ 6986 EL CAMINO REAL STE
F
CARLSBAD, CA 92009
Effective as of 01-APR-15

MILLER, JAMES, DC

Provider ID: N/A
☑ 6986 EL CAMINO REAL STE
F
CARLSBAD, CA 92009
Effective as of 01-JUL-17

CLINICAL NEUROPSYCHOLOGIST


ALASANTRO, LORI, PhD†

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

ALASANTRO, LORI, PhD†


Provider ID: N/A

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

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-18


ALASANTRO, LORI, PhD†

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

KAUP, ALLISON, PhD†


Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JUN-24

DERMATOLOGY


ANGRA, KUNAL, MD†

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JUL-21


BUSCH, HEIDI, MD†

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Teleservice
Effective as of 01-MAR-23


BUSCH, HEIDI, MD†

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Teleservice
Effective as of 01-OCT-22


RILEY, JESSICA, DO†

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JAN-21


RILEY, JESSICA, DO†

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JAN-21


RILEY, JESSICA, DO†

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-NOV-23


RILEY, JESSICA, DO†

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JAN-24


ZUBAIR, RAHEEL, MD

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JUN-24


ZUBAIR, RAHEEL, MD

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JAN-24

ZUBAIR, RAHEEL, MD


Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 120

CARLSBAD, CA 92011
Effective as of 01-MAR-24

ZUBAIR, RAHEEL, MD


Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-NOV-23

FAMILY PRACTICE


CHAVEZ SANTOS, MARIA, MD

Provider ID: N/A

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
Effective as of 01-JUN-24

MADHAV, KINJAL, MD†


Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JAN-24

**HEARING AID DEALER /
SUPPLIER**


DAVIS, KELLE, MA†

Provider ID: N/A

 1820 MARRON RD STE 102
CARLSBAD, CA 92008
Effective as of 01-SEP-22

DAVIS, KELLE, MA†

Provider ID: N/A

 1820 MARRON RD
CARLSBAD, CA 92008
Effective as of 01-JAN-21

GALLAGHER, JEFFERY, MA

Provider ID: N/A

 2390 FARADAY AVE

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

CARLSBAD, CA 92008
Teleservice
Effective as of 01-AUG-24

NEPHROLOGY

SAVANI, AMAN, MD

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-AUG-23

NEUROLOGY

BAKER, DAVID, DO

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JAN-24

BAKER, DAVID, DO

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JUN-24

BAKER, DAVID, DO

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-DEC-23

CHOUDRY, BILAL, MD†

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011
Effective as of 01-JAN-21

CHOUDRY, BILAL, MD†

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

CHOUDRY, BILAL, MD†

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

CHOUDRY, BILAL, MD†

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

DELANEY, MICHAEL, MD†

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JAN-21

DELANEY, MICHAEL, MD†

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-NOV-22

DELANEY, MICHAEL, MD†

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice
Effective as of 01-SEP-21

DROKER, BRIAN, MD

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-MAR-24

DROKER, BRIAN, MD

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-DEC-23

DROKER, BRIAN, MD

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011*
Teleservice
Effective as of 01-SEP-24

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-FEB-22

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-NOV-21

FARNSWORTH, WILLIAM, MD†

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

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-NOV-21

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JUN-24

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-SEP-21

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-FEB-16

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-FEB-16

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-SEP-22

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

HALL, JACOB, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-FEB-21

HALL, JACOB, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-24

HO, GILBERT, MD

Provider ID: N/A

5814 VAN ALLEN WAY STE
209
CARLSBAD, CA 92008

Effective as of 01-JAN-21

LANE, RICHARD, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-SEP-22

LANE, RICHARD, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

LANE, RICHARD, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-DEC-23

LANE, RICHARD, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-APR-24

LUHAR, RIYA, DO

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-AUG-23

LUHAR, RIYA, DO

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JAN-23

LUHAR, RIYA, DO

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JAN-23

NIELSEN, AMY, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

NIELSEN, AMY, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

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

Effective as of 01-FEB-16

NIELSEN, AMY, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-16

NIELSEN, AMY, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-SEP-21

NIELSEN, AMY, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-MAR-21

OH, IRENE, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

OH, IRENE, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-FEB-16

OH, IRENE, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

OH, IRENE, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-SEP-22

OMURO, ARTHUR, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-SEP-22

OMURO, ARTHUR, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-NOV-23

PADUGA, REMIA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-24

PADUGA, REMIA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-FEB-16

QUESNELL, TARA, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-24

QUESNELL, TARA, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Effective as of 01-NOV-23

QUESNELL, TARA, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-SEP-21

SADOFF, MARK, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-FEB-16

SADOFF, MARK, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-FEB-16

SADOFF, MARK, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

SADOFF, MARK, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

SAVANI, AMAN, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-NOV-23

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

SAVANI, AMAN, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JUL-24

SAVANI, AMAN, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JUN-24

SCHIM, JACK, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

SCHIM, JACK, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

SCHIM, JACK, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-FEB-16

WANG, CHUNYANG, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-FEB-16

WANG, CHUNYANG, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-FEB-16

WANG, ANCHI, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-FEB-16

WANG, ANCHI, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-FEB-16

WANG, ANCHI, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

WANG, CHUNYANG, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

WANG, ANCHI, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

WANG, CHUNYANG, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD

STE 200

CARLSBAD, CA 92011

Effective as of 01-JAN-24

WANG, ANCHI, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-SEP-21

WRIGHT, BRENTON, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-AUG-23

YOSHII-CONTRERAS, JUNE, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-23

NEUROPHYSIOLOGY CLINICAL

PADUGA, REMIA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-NOV-23

OTOLARYNGOLOGY

ABDOU, RAMI, MD†

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008

Effective as of 01-AUG-22

CALZADA, AUDREY, MD†

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

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008
Effective as of 01-OCT-22

CHANG, EDWARD, MD

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008
Effective as of 01-MAR-24

DATE, AMIT, MD

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008
Teleservice
Effective as of 01-MAY-23

DONALDSON, CHADWICK, MD†

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008
Teleservice
Effective as of 01-JAN-21

DONALDSON, CHADWICK, MD†

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008
Teleservice
Effective as of 01-JAN-21

GOLDSZTEIN, HERNAN, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 210
CARLSBAD, CA 92011
Effective as of 01-FEB-18

PAUL, SUPRITI, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD

STE 210
CARLSBAD, CA 92011
Effective as of 01-FEB-22

SALGADO, MOSES, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 210
CARLSBAD, CA 92011
Effective as of 01-FEB-18

TIAN, QING, MD†

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008
Teleservice
Effective as of 01-JAN-21

TIAN, QING, MD†

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008
Teleservice
Effective as of 01-NOV-21

PHYSICAL MEDICINE / REHABILITATION

CURRY, JASON, MD†

Provider ID: N/A

6121 PASEO DEL NORTE
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-SEP-21

MADHAV, SANDIP, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JAN-21

TAHAEI, SEYED, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 110
CARLSBAD, CA 92011
Teleservice
Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

DE VERA, SARAH, PA

Provider ID: N/A

2659 GATEWAY RD STE 106
CARLSBAD, CA 92009
Teleservice
Effective as of 01-APR-24

DRILLING, KATHERINE, PA

Provider ID: N/A

1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009
Effective as of 01-MAR-23

DU, SARAH, PA

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008
Teleservice
Effective as of 01-APR-24

FANNIN, HANA AH, PA

Provider ID: N/A

2659 GATEWAY RD STE 106
CARLSBAD, CA 92009
Effective as of 01-JAN-23

GONZALEZ, NICOLETTE, PA

Provider ID: N/A

1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009
Teleservice
Effective as of 01-JUN-24

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

HASHAM, SOPHIA, PA

Provider ID: N/A

☐ 2659 GATEWAY RD STE 106
CARLSBAD, CA 92009

Teleservice

Effective as of 01-JUN-24

HERMANSON, KATHLEEN, PA†

Provider ID: N/A

☐ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-SEP-22

HERMANSON, KATHLEEN, PA†

Provider ID: N/A

☐ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

HUANG, STEPHANIE, PA†

Provider ID: N/A

☐ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

HUANG, STEPHANIE, PA†

Provider ID: N/A

☐ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-OCT-22

INOCELDA, ANDREW, PA†

Provider ID: N/A

☐ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-SEP-22

INOCELDA, ANDREW, PA†

Provider ID: N/A

☐ 6010 HIDDEN VALLEY RD

STE 200

CARLSBAD, CA 92011

Effective as of 01-JAN-21

JOHNSON, RYAN, PA

Provider ID: N/A

☐ 6121 PASEO DEL NORTE
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JUN-24

MEGALI, NICOLE, PA

Provider ID: N/A

☐ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JAN-24

MEGALI, NICOLE, PA

Provider ID: N/A

☐ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-APR-24

MORENO, SYDNIE, PA

Provider ID: N/A

☐ 1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009

Effective as of 01-APR-24

POGGI, SARA, PA

Provider ID: N/A

☐ 2390 FARADAY AVE
CARLSBAD, CA 92008

Teleservice

Effective as of 01-APR-24

POLLINGTON, CHRISTOPHER, PA

Provider ID: N/A

☐ 6121 PASEO DEL NORTE
CARLSBAD, CA 92011

Teleservice

Effective as of 01-OCT-23

RAHIM, ARIANNA, PA

Provider ID: N/A

☐ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-OCT-23

PSYCHIATRY

CAI, SHEILA, MD†

Provider ID: N/A

☐ 6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011

Effective as of 01-OCT-23

CAI, SHEILA, MD†

Provider ID: N/A

☐ 6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011

Effective as of 01-OCT-23

CAI, SHEILA, MD†

Provider ID: N/A

☐ 6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011

Effective as of 01-OCT-23

CAI, SHEILA, MD†

Provider ID: N/A

☐ 6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011

Effective as of 01-OCT-23

PAULITSCH-BUCKINGHAM, ANDREA, MD†

Provider ID: N/A

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

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

PAULITSCH-BUCKINGHAM, ANDREA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

PAULITSCH-BUCKINGHAM, ANDREA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

PAULITSCH-BUCKINGHAM, ANDREA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

PSYCHIATRY CHILD

CAI, SHEILA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

CAI, SHEILA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

CAI, SHEILA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

CAI, SHEILA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

PSYCHOLOGIST

KAUP, ALLISON, PhD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-24

KAUP, ALLISON, PhD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-NOV-23

KAUP, ALLISON, PhD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-24

KAUP, ALLISON, PhD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-NOV-23

NOEL, NANCY, PhD

Provider ID: N/A

6768 PASEO DEL VIS
CARLSBAD, CA 92009
Effective as of 01-FEB-23

NOEL, NANCY, PhD

Provider ID: N/A

6768 PASEO DEL VIS
CARLSBAD, CA 92009
Effective as of 01-FEB-23

NOEL, NANCY, PhD

Provider ID: N/A

6768 PASEO DEL VIS
CARLSBAD, CA 92009
Effective as of 01-FEB-23

NOEL, NANCY, PhD

Provider ID: N/A

6768 PASEO DEL VIS
CARLSBAD, CA 92009
Effective as of 01-FEB-23

ROSEN, JAY, PhD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

ROSEN, JAY, PhD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

ROSEN, JAY, PhD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

ROSEN, JAY, PhD†

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

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

REGISTERED PHYSICAL THERAPIST

AMBROSE, CHRISTOPHER, PT

Provider ID: N/A

3070 MADISON ST
CARLSBAD, CA 92008
Effective as of 01-JAN-21

DOULL, MATTHEW, PT

Provider ID: N/A

6121 PASEO DEL NORTE
CARLSBAD, CA 92011
Teleservice

Effective as of 01-JUN-23

GARBER, MARC, PT

Provider ID: N/A

6121 PASEO DEL NORTE
CARLSBAD, CA 92011
Teleservice

Effective as of 01-OCT-21

MCGEE, JACQUELINE, PT

Provider ID: N/A

3070 MADISON ST
CARLSBAD, CA 92008
Effective as of 01-JAN-21

TAMAYO, SYDNIE, PT

Provider ID: N/A

6121 PASEO DEL NORTE
STE 200
CARLSBAD, CA 92011
Teleservice

Effective as of 01-OCT-23

SLEEP MEDICINE

MADHAV, KINJAL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JAN-21

MADHAV, KINJAL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-OCT-19

SURGERY

NEUROLOGICAL

MURTHY, NIKHIL, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JUL-23

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

DURAN, ANTONIO, MD

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-JUL-23

HOAGLAND, PETER, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205

CHULA VISTA, CA 91914
Effective as of 01-JAN-21

JASKI, BRIAN, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Teleservice

Effective as of 01-JAN-21

ALLERGY IMMUNOLOGY

SHARMA, KUSUM, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-JUN-22

SHARMA, KUSUM, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

ANESTHESIOLOGY

GLASSER, MARGA, MD†

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-OCT-21

GLASSER, MARGA, MD†

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-SEP-21

GLASSER, MARGA, MD†

Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914

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

Effective as of 01-SEP-21

MACCHIO, GREGORY, MD†

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-JUL-22

ROMERO, KENNETH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 206
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

VERDOLIN, MICHAEL, MD

Provider ID: N/A

2452 FENTON ST STE 205
CHULA VISTA, CA 91914
Effective as of 01-JAN-21

ANESTHESIOLOGY

CRITICAL CARE MEDICINE

MACCHIO, GREGORY, MD†

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-SEP-22

MACCHIO, GREGORY, MD†

Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Effective as of 01-SEP-22

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY, MD

Provider ID: N/A

344 F ST STE 203
CHULA VISTA, CA 91910
Effective as of 01-APR-24

DAIRO, BRANDON, MD†

Provider ID: N/A

340 4TH AVE STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-22

GLASSER, MARGA, MD†

Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Effective as of 01-JAN-22

LEE, INSUN, MD†

Provider ID: N/A

344 F ST STE 203
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-APR-24

MACCHIO, GREGORY, MD†

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-DEC-18

NAVARRO, ROSA, MD†

Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Effective as of 01-AUG-17

NAVARRO, ROSA, MD†

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-JUL-22

NAVARRO, ROSA, MD†

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-JAN-14

NAVARRO, ROSA, MD†

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-SEP-22

NAVARRO, ROSA, MD†

Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Effective as of 01-SEP-22

NAVARRO, ROSA, MD†

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-SEP-15

ROMERO, KENNETH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 103
CHULA VISTA, CA 91911
Effective as of 01-JUN-19

VERDOLIN, MICHAEL, MD

Provider ID: N/A

2452 FENTON ST STE 205
CHULA VISTA, CA 91914
Effective as of 01-MAR-22

AUDIOLOGIST

JESPERSEN, RHONDA, AuD

Provider ID: N/A

310 3RD AVE STE B21
CHULA VISTA, CA 91910
Effective as of 01-AUG-24

SERENO, EMILY, AuD

Provider ID: N/A

577 THIRD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-24

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

CARDIAC

ELECTROPHYSIOLOGY

ATHILL, CHARLES, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205

CHULA VISTA, CA 91914

Effective as of 01-JAN-21

BERMAN, BRETT, MD†

Provider ID: N/A

321 E ST STE A

CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-16

DAWOOD, FARAH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207

CHULA VISTA, CA 91911

Effective as of 01-DEC-20

LERNER, JONATHAN, MD

Provider ID: N/A

865 THIRD AVE
STE 133

CHULA VISTA, CA 91911

Effective as of 01-JUL-23

LERNER, JONATHAN, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911

Effective as of 01-JUL-23

PUGH, MATTHEW, DO†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 205

CHULA VISTA, CA 91911

Teleservice

Effective as of 01-NOV-21

PUGH, MATTHEW, DO†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 205

CHULA VISTA, CA 91911

Teleservice

Effective as of 01-SEP-21

SHAH, ABHISHEK, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911

Effective as of 01-JAN-23

SHAH, ABHISHEK, MD

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911

Effective as of 01-JAN-23

CARDIOVASCULAR DISEASE

ABELHAD, NADIA, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911

Effective as of 01-JAN-24

AIZIN, VITALI, MD†

Provider ID: N/A

321 E ST STE A

CHULA VISTA, CA 91910

Effective as of 01-MAR-21

AIZIN, VITALI, MD†

Provider ID: N/A

321 E ST STE A

CHULA VISTA, CA 91910

Effective as of 01-JUN-16

AIZIN, VITALI, MD†

Provider ID: N/A

321 E ST STE A

CHULA VISTA, CA 91910

Effective as of 01-JAN-21

BERMAN, BRETT, MD†

Provider ID: N/A

321 E ST STE A

CHULA VISTA, CA 91910

Teleservice

Effective as of 01-FEB-21

CARLSON, STEVEN, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911

Teleservice

Effective as of 01-SEP-22

CARLSON, STEVEN, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911

Teleservice

Effective as of 01-APR-21

CARLSON, STEVEN, MD†

Provider ID: N/A

751 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911

Effective as of 01-JAN-21

CEPIN, DANIEL, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205

CHULA VISTA, CA 91914

Effective as of 01-FEB-21

COX, JUSTIN, MD†

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

Provider ID: N/A

890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-SEP-21

COX, JUSTIN, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-MAY-24

DAWOOD, FARAH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT STE 207
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

DAWOOD, FARAH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT STE 207
CHULA VISTA, CA 91911

Effective as of 01-AUG-21

DO, HULBERT, MD

Provider ID: N/A

765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911

Effective as of 01-OCT-23

DO, HULBERT, MD

Provider ID: N/A

865 THIRD AVE STE 133
CHULA VISTA, CA 91911

Effective as of 01-OCT-23

FERNANDEZ, GENARO, MD†

Provider ID: N/A

752 MEDICAL CENTER CT STE 207
CHULA VISTA, CA 91911
Effective as of 01-AUG-21

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

HOURANI, RAYAN, MD

Provider ID: N/A

890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-FEB-23

KAFRI, HASSAN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-AUG-22

KHAN, HASHIM, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914

Effective as of 01-APR-21

KHARAZI, ALEXANDRA, MD†

Provider ID: N/A

345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

KIM, JAMES, MD†

Provider ID: N/A

754 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUN-21

KIM, JAMES, MD†

Provider ID: N/A

754 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUN-23

LY, NANCY, MD†

Provider ID: N/A

754 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911

Effective as of 01-JUN-23

LY, NANCY, MD†

Provider ID: N/A

754 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911

Effective as of 01-JUN-21

LY, NANCY, MD†

Provider ID: N/A

754 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911

Effective as of 01-NOV-23

MEHTA, HIRSCH, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914

Effective as of 01-JAN-21

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

MONDRAGON, GUSTAVO, MD

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

Provider ID: N/A

855 THIRD AVE
STE 2230
CHULA VISTA, CA 91911

Effective as of 01-OCT-23

MONDRAGON, GUSTAVO, MD

Provider ID: N/A

855 THIRD AVE
STE 2230
CHULA VISTA, CA 91911

Effective as of 01-FEB-24

MONDRAGON, GUSTAVO, MD†

Provider ID: N/A

480 4TH AVE STE 500
CHULA VISTA, CA 91910

Effective as of 01-NOV-20

NAGHI, JESSE, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911

Effective as of 01-AUG-21

NARAYANAN, MEENA, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-APR-21

NARAYANAN, MEENA, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

NISHIMURA-KAMINSKI,

MARIN, MD

Provider ID: N/A

890 EASTLAKE PKWY STE
205

CHULA VISTA, CA 91914

Teleservice

Effective as of 01-MAR-23

OMRAN, JAD, MD

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-FEB-23

OVIEDO-LINARES, RAUL, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Effective as of 01-JUN-21

OVIEDO-LINARES, RAUL, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Effective as of 01-JUN-23

PARIKH, MILIND, DO†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

PARIKH, MILIND, DO†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

PARIZO, JUSTIN, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-SEP-21

PONCE, SONIA, MD†

Provider ID: N/A

480 4TH AVE STE 401
CHULA VISTA, CA 91910

Effective as of 01-AUG-20

PONCE, SONIA, MD†

Provider ID: N/A

340 4TH AVE STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-APR-21

PONCE, SONIA, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

PONCE, SONIA, MD†

Provider ID: N/A

340 4TH AVE STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-21

PONCE, SONIA, MD†

Provider ID: N/A

340 4TH AVE STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-24

ROUGH, STEVEN, MD

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-AUG-23

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

SARSAM, LUAY, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

SHAH, KULIN, MD†

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SHAH, KULIN, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

SHARF, ALBERT, MD

Provider ID: N/A

1310 3RD AVE STE B4
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SHEREV, DIMITRI, MD

Provider ID: N/A

340 FOURTH AVE
STE 4
CHULA VISTA, CA 91910
Effective as of 01-SEP-23

SHEREV, DIMITRI, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-AUG-21

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JUN-21

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911
Effective as of 01-JAN-23

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JUN-23

YAU, STEPHEN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-22

YAU, STEPHEN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-23

ZAVARO, SUHAIL, MD

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-FEB-23

CERTIFIED

ACUPUNCTURIST

LAM, KHANH, LAC†

Provider ID: N/A

340 4TH AVE STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-21

WILCOX, WENONAH, LAC†

Provider ID: N/A

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

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

CERTIFIED NURSE PRACTITIONER

BRAYTENBAH, MELANIE, NP†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JAN-21

BRAYTENBAH, MELANIE, NP†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-SEP-22

BURKE, ALICIA, NP

Provider ID: N/A

765 3RD AVE STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-DEC-22

CARRION GELABERT, ANA, NPF

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Effective as of 01-NOV-23

CORREA, CARINA, NP

Provider ID: N/A

299 J ST
CHULA VISTA, CA 91910

Effective as of 01-AUG-22

IBARRA, MARTHA, NP

Provider ID: N/A

855 THIRD AVE
STE 2220
CHULA VISTA, CA 91911

Effective as of 01-JUL-24

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-AUG-21

KANTAS, PARIS, NP†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-AUG-22

KELLER, YESENIA, NP

Provider ID: N/A

340 FOURTH AVE
STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUL-23

KELLER, YESENIA, NP

Provider ID: N/A

340 FOURTH AVE
STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-FEB-24

MAGANDA, JESSICA, NP

Provider ID: N/A

340 FOURTH AVE
STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-APR-24

MAGANDA, JESSICA, NP

Provider ID: N/A

340 FOURTH AVE
STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAY-24

OLESCO, JENNIFER, NP†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911

Effective as of 01-NOV-22

PANTOJA, DANICA-ELLA, NP

Provider ID: N/A

340 FOURTH AVE
STE 9
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-24

RADMAN, MIRKA, NP†

Provider ID: N/A

1111 BROADWAY STE 305
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-AUG-24

ROSS, CRYSTAL, NP†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-AUG-24

ROSS, CRYSTAL, NP†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAY-21

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

SHAKYA, KELLY, NPF

Provider ID: N/A

752 MEDICAL CENTER CT
STE 200
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUN-24

SHAW, MARILYNN, NP

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914

Effective as of 01-MAR-23

SICKLES, MAGGIE, NP

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-DEC-21

SPAULDING, ENJOLI, NP†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

TOMICICH, STEPHANIE, NP

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Effective as of 01-JAN-24

VAZQUEZ-ERLBECK, MARTHA, NP

Provider ID: N/A

880 THIRD AVE
STE A
CHULA VISTA, CA 91911

Effective as of 01-MAY-24

YALDO, ATHMAR, NP†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-DEC-21

CERTIFIED REGISTERED NURSE MIDWIFE

MARTINEZ, NANCY, CRNM

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

CHIROPRACTOR

WENDEL, TREVOR, DC

Provider ID: N/A

535 H ST
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

DERMATOLOGY

ANGRA, KUNAL, MD†

Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-DEC-22

BARNARD, CHRISTOPHER, MD

Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914

Effective as of 01-MAR-24

MCKESEY, JACQUELINE, MD

Provider ID: N/A

256 LANDIS AVE FL 3
CHULA VISTA, CA 91910

Effective as of 01-FEB-23

RULLAN, JENNIFER, MD†

Provider ID: N/A

256 LANDIS AVE STE 300
CHULA VISTA, CA 91910

Effective as of 01-MAR-14

RULLAN, PETER, MD†

Provider ID: N/A

256 LANDIS AVE STE 300
CHULA VISTA, CA 91910

Effective as of 01-SEP-15

STEIN, ALEXANDER, MD†

Provider ID: N/A

340 4TH AVE STE 14
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

STEIN, ALEXANDER, MD†

Provider ID: N/A

340 4TH AVE STE 14
CHULA VISTA, CA 91910

Effective as of 01-NOV-23

STEIN, ALEXANDER, MD†

Provider ID: N/A

340 4TH AVE STE 14
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

TOMPKINS, STACY, MD†

Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-DEC-22

TOMPKINS, STACY, MD†

Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-DEC-22

TOMPKINS, STACY, MD†

Provider ID: N/A

2300 BOSWELL RD STE 130

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

CHULA VISTA, CA 91914
Teleservice
Effective as of 01-AUG-22

TOMPKINS, STACY, MD†
Provider ID: N/A
📍 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-NOV-23

ZALESKI-LARSEN, LISA, DO
Provider ID: N/A
📍 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-NOV-23

ZALESKI-LARSEN, LISA, DO
Provider ID: N/A
📍 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-MAY-23

ZALESKI-LARSEN, LISA, DO
Provider ID: N/A
📍 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-JAN-24

EMERGENCY MEDICINE

AZAM, ARSALAN, MD
Provider ID: N/A
📍 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-FEB-24

BRODAK, DANIKA, MD
Provider ID: N/A
📍 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-FEB-24
BROWN, MITCHELL, MD
Provider ID: N/A
📍 333 H ST
STE 2080
CHULA VISTA, CA 91910
Effective as of 01-AUG-24

CORTES, JAMES, MD
Provider ID: N/A
📍 333 H ST
STE 2080
CHULA VISTA, CA 91910
Effective as of 01-AUG-24

DILLMAN, ARIANA, MD†
Provider ID: N/A
📍 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

DILLMAN, ARIANA, MD†
Provider ID: N/A
📍 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

EINSTEIN, ERIC, MD†
Provider ID: N/A
📍 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

EINSTEIN, ERIC, MD†
Provider ID: N/A
📍 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

FAIQ, NADIA, MD
Provider ID: N/A
📍 333 H ST
STE 2080
CHULA VISTA, CA 91910

Effective as of 01-AUG-24
FRENCH, TONIANNE, MD†
Provider ID: N/A
📍 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

FRENCH, TONIANNE, MD†
Provider ID: N/A
📍 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

GALASSO, MADISON, MD†
Provider ID: N/A
📍 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

GALASSO, MADISON, MD†
Provider ID: N/A
📍 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

GRIESINGER, MICHAEL, MD†
Provider ID: N/A
📍 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

GRIESINGER, MICHAEL, MD†
Provider ID: N/A
📍 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

HARE, MARC, MD†
Provider ID: N/A
📍 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24

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

HARE, MARC, MD†

Provider ID: N/A

1111 BROADWAY STE 305
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-APR-23

HARRELL-BRUDER, BEVERLY, MD†

Provider ID: N/A

333 H ST STE 280
CHULA VISTA, CA 91910

Effective as of 01-MAY-24

HARRELL-BRUDER, BEVERLY, MD†

Provider ID: N/A

333 H ST STE 280
CHULA VISTA, CA 91910

Effective as of 01-FEB-21

JOURDAIN, VICTOR, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-FEB-21

JOURDAIN, VICTOR, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

MARMON, JULIE, MD

Provider ID: N/A

333 H ST
STE 2080
CHULA VISTA, CA 91910

Effective as of 01-AUG-24

MCMILLAN, MONICA, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

NARDI, SEAN, DO†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-DEC-21

PORTILLO, TANIA, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

QUENZER, FAITH, DO†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

QUENZER, FAITH, DO†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

REARDON, JACQUELINE, DO†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

REARDON, JACQUELINE, DO†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

ROXAS, ROGER, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

ROXAS, ROGER, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

SBIROLI, EMILY, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-AUG-21

SBIROLI, EMILY, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

TOVAR, JUAN, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

TRESENITTER, MEGAN, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-AUG-21

TRESENITTER, MEGAN, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

WHITLEY, NICHOLAS, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910*

Effective as of 01-AUG-18

YAU, STEPHEN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910

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

Teleservice

Effective as of 01-APR-23

ENDOCRINOLOGY

METABOLISM DIABETES

ARGOUD, GEORGES, MD†

Provider ID: N/A

340 4TH AVE STE 7A
CHULA VISTA, CA 91910

Effective as of 01-JUN-19

ARGOUD, GEORGES, MD†

Provider ID: N/A

340 4TH AVE STE 7A
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

ARGOUD, GEORGES, MD†

Provider ID: N/A

340 4TH AVE STE 7A
CHULA VISTA, CA 91910

Effective as of 01-SEP-20

ARGOUD, GEORGES, MD†

Provider ID: N/A

340 4TH AVE STE 7A
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

ARGOUD, GEORGES, MD†

Provider ID: N/A

340 4TH AVE STE 7A
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

ARGOUD, GEORGES, MD†

Provider ID: N/A

340 4TH AVE STE 7A
CHULA VISTA, CA 91910*

Effective as of 01-JAN-21

CARRILLO, MARITZA, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUL-22

CARRILLO, MARITZA, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-22

ROGERS, MEGAN, MD†

Provider ID: N/A

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

Teleservice

Effective as of 01-JUL-22

ROGERS, MEGAN, MD†

Provider ID: N/A

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

Teleservice

Effective as of 01-JUL-22

ROGERS, MEGAN, MD†

Provider ID: N/A

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

Teleservice

Effective as of 01-AUG-22

VINCENT, LAUREN, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

VINCENT, LAUREN, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

FAMILY PRACTICE

CONTAG, ALEC, MD

Provider ID: N/A

678 THIRD AVE
CHULA VISTA, CA 91910

Effective as of 01-JUN-24

DILLON, MAYRA, MD

Provider ID: N/A

880 THIRD AVE
A

CHULA VISTA, CA 91911

Effective as of 01-JUL-24

LOZANO, JUAN CARLOS, MD

Provider ID: N/A

1637 THIRD AVE STE
B-F-H-I

CHULA VISTA, CA 91911*

Effective as of 01-JUN-24

RODRIGUEZ, NATALIE, MD

Provider ID: N/A

480 PALOMAR ST

CHULA VISTA, CA 91911*

Effective as of 01-NOV-23

ROJAS, SARAH, MD

Provider ID: N/A

678 THIRD AVE
CHULA VISTA, CA 91910

Effective as of 01-JUL-24

SHAFT, ALEXANDER, MD†

Provider ID: N/A

303 H ST STE 103

CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-22

SHAFT, ALEXANDER, MD†

Provider ID: N/A

303 H ST STE 103

CHULA VISTA, CA 91910

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

Teleservice

Effective as of 01-FEB-23

GASTROENTEROLOGY

ALAYO, ERICK, MD†

Provider ID: N/A

📍 400 E ST
CHULA VISTA, CA 91910

Effective as of 01-OCT-21

ALAYO, ERICK, MD†

Provider ID: N/A

📍 400 E ST
CHULA VISTA, CA 91910

Effective as of 01-OCT-21

ALAYO, ERICK, MD†

Provider ID: N/A

📍 400 E ST
CHULA VISTA, CA 91910

Effective as of 01-OCT-21

BAIG, NABIL, DO†

Provider ID: N/A

📍 303 H ST STE 103
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-OCT-22

DESTA, TADDESE, MD

Provider ID: N/A

📍 296 H ST STE 301
CHULA VISTA, CA 91910

Effective as of 01-JAN-23

DUQUE, JOHN, MD†

Provider ID: N/A

📍 480 4TH AVE STE 316
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

DUQUE, JOHN, MD†

Provider ID: N/A

📍 480 4TH AVE STE 316

CHULA VISTA, CA 91910

Effective as of 01-JAN-21

DUQUE, JOHN, MD†

Provider ID: N/A

📍 480 4TH AVE STE 316
CHULA VISTA, CA 91910

Effective as of 01-JAN-14

DUQUE, JOHN, MD†

Provider ID: N/A

📍 480 4TH AVE STE 316
CHULA VISTA, CA 91910

Effective as of 01-SEP-15

HASSANEIN, TAREK, MD†

Provider ID: N/A

📍 303 H ST STE 103
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUL-21

HASSANEIN, TAREK, MD†

Provider ID: N/A

📍 303 H ST STE 103
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-22

HASSANEIN, TAREK, MD†

Provider ID: N/A

📍 256 LANDIS AVE STE 204
CHULA VISTA, CA 91910

Effective as of 01-SEP-15

HASSANEIN, TAREK, MD†

Provider ID: N/A

📍 256 LANDIS AVE STE 202
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

HASSANEIN, TAREK, MD†

Provider ID: N/A

📍 256 LANDIS AVE STE 202
CHULA VISTA, CA 91910

Effective as of 01-MAR-18

HASSANEIN, TAREK, MD†

Provider ID: N/A

📍 303 H ST STE 103
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAY-21

HASSANEIN, TAREK, MD†

Provider ID: N/A

📍 1323 3RD AVE
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

KORN, ERROL, MD

Provider ID: N/A

📍 769 MEDICAL CENTER CT
STE 303

CHULA VISTA, CA 91911

Effective as of 01-MAY-23

KORN, ERROL, MD

Provider ID: N/A

📍 769 MEDICAL CENTER CT
STE 303

CHULA VISTA, CA 91911

Effective as of 01-JUL-23

NOVO, MEGAN, MD

Provider ID: N/A

📍 296 H ST STE 301
CHULA VISTA, CA 91910

Effective as of 01-AUG-24

SWEET, PATRICK, MD†

Provider ID: N/A

📍 353 CHURCH AVE STE A
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAY-22

THOMAS, CARLTON, MD†

Provider ID: N/A


📍 296 H ST

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

CHULA VISTA, CA 91910
Effective as of 01-APR-21


WIENER, GREGORY, MD†

Provider ID: N/A

 353 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-JAN-14


WIENER, GREGORY, MD†

Provider ID: N/A

 353 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


WIENER, GREGORY, MD†

Provider ID: N/A

 353 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-JUL-22


WIENER, GREGORY, MD†

Provider ID: N/A

 353 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-SEP-22


WIENER, GREGORY, MD†

Provider ID: N/A

 353 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-AUG-20

WIENER, GREGORY, MD†

Provider ID: N/A

 353 CHURCH AVE STE A
CHULA VISTA, CA 91910*
Effective as of 01-SEP-15

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE, MA†


Provider ID: N/A

 310 3RD AVE STE B21/C11

CHULA VISTA, CA 91910
Effective as of 01-JAN-21


ANDERSON, ELAINE, MA†

Provider ID: N/A

 310 3RD AVE STE C11
CHULA VISTA, CA 91910
Effective as of 01-SEP-22


DAVIS, KELLE, MA†

Provider ID: N/A

 310 3RD AVE STE C11
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

GALLAGHER, JEFFERY, MA


Provider ID: N/A

 577 THIRD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-24

HEMATOLOGY / ONCOLOGY


ANDREY, JEFFREY, MD†

Provider ID: N/A

 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-SEP-22


BASERI, BABAK, MD†

Provider ID: N/A

 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-JUL-22


BASERI, BABAK, MD†

Provider ID: N/A

 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-MAY-24


BASERI, BABAK, MD†

Provider ID: N/A

 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-DEC-23


BASERI, BABAK, MD†

Provider ID: N/A

 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-FEB-24


ITURBE-ALESSIO, IGNACIO, MD†

Provider ID: N/A

 855 3RD AVE STE 3330
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-FEB-22


JOHNSON, KENNETH, MD†

Provider ID: N/A

 769 MEDICAL CENTER CT
STE 202
CHULA VISTA, CA 91911
Effective as of 01-MAY-15


MOOLANI, RAMESH, MD†

Provider ID: N/A

 855 3RD AVE STE 3330
CHULA VISTA, CA 91911
Effective as of 01-FEB-22


MOOLANI, RAMESH, MD†

Provider ID: N/A

 855 3RD AVE STE 3330
CHULA VISTA, CA 91911
Effective as of 01-APR-23

NORTON, MARILYN, MD†

Provider ID: N/A

 769 MEDICAL CENTER CT
STE 202
CHULA VISTA, CA 91911
Effective as of 01-FEB-22

NORTON, MARILYN, MD†

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

Provider ID: N/A

769 MEDICAL CENTER CT
STE 202
CHULA VISTA, CA 91911
Effective as of 01-MAY-15

QUIROZ, ELISA, MD†

Provider ID: N/A
678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-OCT-21

SAUNDERS, PHILLIP, DO†

Provider ID: N/A
450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A
450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A
450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-MAY-22

INTERNAL MEDICINE

BALDERAS-MAGALLANES, RODOLFO, MD

Provider ID: N/A
678 THIRD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-APR-24

CHITKARA, PUJA, MD†

Provider ID: N/A
765 MEDICAL CENTER CT

STE 216
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

JAIN, SUPRABHA, MD

Provider ID: N/A
765 3RD AVE STE 10
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-OCT-22

LIRA, JOSE, MD†

Provider ID: N/A
841 KUHN DR STE 200
CHULA VISTA, CA 91914
Effective as of 01-NOV-23

LIRA, JOSE, MD†

Provider ID: N/A
841 KUHN DR STE 200
CHULA VISTA, CA 91914
Effective as of 01-JAN-24

LIU, ANDREW, MD

Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-SEP-23

MEYER, JILL, MD†

Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-MAY-24

MEYER, JILL, MD†

Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-MAY-24

MEYER, JILL, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

MOOLANI, UJJALA, MD†

Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

MOOLANI, UJJALA, MD

Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-MAY-23

NARAYANAN, MEENA, MD†

Provider ID: N/A
765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911*
Effective as of 01-JAN-21

NARULA, ARVIN, MD†

Provider ID: N/A
890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Effective as of 01-JAN-21

OLIVER, DEANNA, MD†

Provider ID: N/A
303 H ST STE 103
CHULA VISTA, CA 91910
Effective as of 01-MAY-21

OLIVER, DEANNA, MD†

Provider ID: N/A
303 H ST STE 103
CHULA VISTA, CA 91910*
Effective as of 01-OCT-22

PATEL, AMAR, MD†

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

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-NOV-23

PONCE, SONIA, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

REDDY, SMITHA, MD†

Provider ID: N/A

272 CHURCH AVE STE 1
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Effective as of 01-OCT-21

INTERVENTIONAL CARDIOLOGY

AIZIN, VITALI, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910

Effective as of 01-FEB-16

BARVALIA, MIHIR, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207

CHULA VISTA, CA 91911

Effective as of 01-NOV-22

BERMAN, BRETT, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-21

BERMAN, BRETT, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-16

BERMAN, BRETT, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-SEP-22

CEPIN, DANIEL, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205

CHULA VISTA, CA 91914

Effective as of 01-DEC-22

FERNANDEZ, GENARO, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207

CHULA VISTA, CA 91911

Effective as of 01-MAR-23

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205

CHULA VISTA, CA 91914

Effective as of 01-JAN-21

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205

CHULA VISTA, CA 91914

Effective as of 01-JUN-21

JOHN, ALAN, MD

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911

Effective as of 01-MAY-23

JOHN, ALAN, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911

Effective as of 01-MAY-23

KAFRI, HASSAN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910

Effective as of 01-AUG-20

KAFRI, HASSAN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910

Effective as of 01-APR-21

KAFRI, HASSAN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

KAFRI, HASSAN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

LY, NANCY, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911

Effective as of 01-JUN-24

MOHAMEDALI, BURHAN, MD†

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

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

MONDRAGON, GUSTAVO, MD†

Provider ID: N/A

480 4TH AVE STE 500
CHULA VISTA, CA 91910*
Effective as of 01-JAN-21

NAGHI, JESSE, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

OVIEDO-LINARES, RAUL, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-FEB-24

OVIEDO-LINARES, RAUL, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-OCT-23

PONCE, SONIA, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

PONCE, SONIA, MD†

Provider ID: N/A

340 4TH AVE STE 11
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

PONCE, SONIA, MD†

Provider ID: N/A

340 4TH AVE STE 11
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-21

ROUGH, STEVEN, MD

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JAN-24

ROUGH, STEVEN, MD

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-OCT-23

ROUGH, STEVEN, MD

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-NOV-23

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-DEC-22

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-DEC-22

SHAH, KULIN, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-APR-23

SHEREV, DIMITRI, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-OCT-19

SHEREV, DIMITRI, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SHETABI, KAMBIZ, MD

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-APR-24

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211

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

CHULA VISTA, CA 91911
Effective as of 01-APR-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-APR-23

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

750 MEDICAL CENTER CT
STE 3
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

MARRIAGE FAMILY THERAPIST

CAMARGO, SANDRA, MFT

Provider ID: N/A

880 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-APR-24

CASTELLANOS, GRACIELA, MFT†

Provider ID: N/A

1061 TIERRA DEL REY STE
305
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-21

CASTELLANOS, GRACIELA, MFT†

Provider ID: N/A

1061 TIERRA DEL REY STE
303

CHULA VISTA, CA 91910

Teleservice

Effective as of 01-DEC-21

CASTELLANOS, GRACIELA, MFT†

Provider ID: N/A

1061 TIERRA DEL REY STE
304

CHULA VISTA, CA 91910

Teleservice

Effective as of 01-DEC-21

SHIELDS, SEBASTIAN, MFT

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUN-23

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Effective as of 01-MAY-23

FERNANDEZ, RODRIGO, MD†

Provider ID: N/A

450 4TH AVE STE 201
CHULA VISTA, CA 91910

Effective as of 01-MAY-21

HOREISH, ADAM, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

HOREISH, ADAM, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Effective as of 01-AUG-15

HOREISH, ADAM, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

HOREISH, ADAM, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

HOREISH, ADAM, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Effective as of 01-JUL-15

KAYAL, ANAS, MD†

Provider ID: N/A

296 H ST STE 304
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-SEP-22

KHAING, KATHY, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

KHAING, KATHY, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

KHAING, KATHY, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

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

Effective as of 01-JUL-22

KHAING, KATHY, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-APR-19

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A

340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-SEP-20

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-15

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

LOZADA-PASTORIO,

ELIZABETH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-NOV-16

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

MEYER, JILL, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

MEYER, JILL, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

MEYER, JILL, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-AUG-14

MEYER, JILL, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-SEP-20

MEYER, JILL, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

MEYER, JILL, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

MEYER, JILL, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

MOOLANI, UJJALA, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-NOV-22

MOOLANI, UJJALA, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

MOOLANI, UJJALA, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-FEB-23

PATEL, AMAR, MD†

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

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-24

PATEL, AMAR, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-FEB-20

PATEL, AMAR, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

PHAM, JENNIFER, MD

Provider ID: N/A

340 FOURTH AVE
STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAY-24

PHAM, JENNIFER, MD

Provider ID: N/A

340 FOURTH AVE
STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-23

PHAM, JENNIFER, MD

Provider ID: N/A

340 FOURTH AVE
STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-24

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

SOLTERO, RICARDO, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-APR-17

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

VIDEEN, JOHN, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-SEP-20

VIDEEN, JOHN, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

VIDEEN, JOHN, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

VIDEEN, JOHN, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

VIDEEN, JOHN, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

VIDEEN, JOHN, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

YUAN, HENRY, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

NEUROLOGY

BINDAL, ANKUR, MD†

Provider ID: N/A

765 3RD AVE STE 100
CHULA VISTA, CA 91910

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

Teleservice

Effective as of 01-SEP-22

FARHIDVASH, FARIBA, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-JUL-24

FARHIDVASH, FARIBA, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-AUG-22

FARHIDVASH, FARIBA, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-DEC-22

GRATIANNE, ROBERTO, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-JAN-22

GRATIANNE, ROBERTO, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-MAY-22

GUPTA, MONIKA, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-JUL-24

GUPTA, MONIKA, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-JUN-22

GUPTA, MONIKA, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

HOSSEINZADEHMALEKI, ANA, MD

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-24

HOSSEINZADEHMALEKI, ANA, MD

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-24

HUISA-GARATE, BRANKO, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-MAR-24

HUISA-GARATE, BRANKO, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

HUISA-GARATE, BRANKO, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-FEB-21

MAREK, MAKSYM, MD

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-FEB-24

MAREK, MAKSYM, MD

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAY-24

MAREK, MAKSYM, MD

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-24

MAREK, MAKSYM, MD

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-OCT-23

MAREK, MAKSYM, MD

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAY-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Teleservice

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

Effective as of 01-MAY-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A

📍 450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A

📍 450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-AUG-23

MOHAMMAD, AHMAD SHAH, MD†

Provider ID: N/A

📍 750 MEDICAL CENTER CT
STE 6
CHULA VISTA, CA 91911

Effective as of 01-JAN-21

MOHAMMAD, AHMAD SHAH, MD†

Provider ID: N/A

📍 750 MEDICAL CENTER CT
STE 6
CHULA VISTA, CA 91911

Effective as of 01-JAN-21

OLENSKI, KLARI, DO†

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-MAY-24

OLENSKI, KLARI, DO†

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-JUN-22

PHAM, ALISE, DO

Provider ID: N/A

📍 450 FOURTH AVE STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUN-24

PHAM, ALISE, DO

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-AUG-24

PHAM, JENNIFER, MD

Provider ID: N/A

📍 340 FOURTH AVE
STE 4
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-24

SILVER, BRENT, MD†

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-NOV-22

SILVER, BRENT, MD†

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-DEC-22

SORIA LOPEZ, JOSE, MD†

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-SEP-21

SORIA LOPEZ, JOSE, MD†

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-MAR-21

NEUROLOGY CHILD

OLENSKI, KLARI, DO†

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-MAY-22

OBSTETRICS / GYNECOLOGY

ANGUIANO, FRANCISCO, MD†

Provider ID: N/A

📍 765 MEDICAL CENTER CT
STE 209
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

ATIGA, SCHUBERT, MD†

Provider ID: N/A

📍 752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

ATIGA, SCHUBERT, MD†

Provider ID: N/A

📍 752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

ATIGA, SCHUBERT, MD†

Provider ID: N/A

📍 752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911

Effective as of 01-AUG-20

ATIGA, SCHUBERT, MD†

Provider ID: N/A

📍 752 MEDICAL CENTER CT
STE 106

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

CHULA VISTA, CA 91911
Effective as of 01-JUL-22

CHAC, RICK, MD†

Provider ID: N/A

660 OLD TELEGRAPH
CANYON RD
CHULA VISTA, CA 91910
Effective as of 01-SEP-16

CHAC, RICK, MD†

Provider ID: N/A

660 OLD TELEGRAPH
CANYON RD
CHULA VISTA, CA 91910
Effective as of 01-SEP-20

CHAC, RICK, MD†

Provider ID: N/A

660 OLD TELEGRAPH
CANYON RD
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

CHAC, RICK, MD†

Provider ID: N/A

660 OLD TELEGRAPH
CANYON RD
CHULA VISTA, CA 91910
Effective as of 01-AUG-20

MENDEZ, DIEGO, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-21

SHORT, ABIADE, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-22

OCCUPATIONAL THERAPIST

CUA, NICOLE, OT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-MAR-24

CUA, NICOLE, OT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-APR-24

HUGHES, ELISA, OT†

Provider ID: N/A

880 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUN-22

LOPEZ, ALYSSA-NICOLE, OT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-OCT-23

LOPEZ, ALYSSA-NICOLE, OT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-DEC-23

MORRIS, SHEILA, OT†

Provider ID: N/A

1020 TIERRA DEL REY STE
A-1
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

PORTER, EILEEN, OT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910

Effective as of 01-AUG-23

PORTER, EILEEN, OT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-JAN-22

OPHTHALMOLOGY

ABDALLAH, WALID, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-APR-24

BRYANT, DUANE, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

BRYANT, DUANE, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

BRYANT, DUANE, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUN-19

BRYANT, DUANE, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-OCT-19

CARRABY, ARNETT, MD†

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

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

CARRABY, ARNETT, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

CARRABY, ARNETT, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-AUG-20

COCKERHAM, KIMBERLY, MD

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Effective as of 01-DEC-23

DELENGOCKY, TAYSON, DO†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

DELENGOCKY, TAYSON, DO†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

GOLDMAN, DAVID, MD

Provider ID: N/A

311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-24

GOMEZ, JESSICA, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911

Effective as of 01-JUN-24

MANI, MAJID, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

MANI, MAJID, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

MANI, NASRIN, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-AUG-24

MASLIN, JESSICA, MD

Provider ID: N/A

480 FOURTH AVE
STE 201
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

MASLIN, JESSICA, MD

Provider ID: N/A

480 FOURTH AVE
STE 201
CHULA VISTA, CA 91910
Effective as of 01-JUL-23

MASLIN, JESSICA, MD

Provider ID: N/A

311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-FEB-23

MASLIN, JESSICA, MD

Provider ID: N/A

311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-FEB-23

MASLIN, JESSICA, MD

Provider ID: N/A

311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-FEB-23

MCDONNELL, EMMA, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-APR-23

MCDONNELL, EMMA, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

PAPASTERGIOU, GEORGIOS, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

PAPASTERGIOU, GEORGIOS, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

PAPASTERGIOU, GEORGIOS, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

PEAIRS, JAMES, MD†

Provider ID: N/A

835 3RD AVE STE A

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

CHULA VISTA, CA 91911
Effective as of 01-AUG-20

PEAIRS, JAMES, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

PONS, MAURICIO, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

PONS, MAURICIO, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-AUG-22

PONS, MAURICIO, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

PONS, MAURICIO, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

RAJSBAUM, MARTIN, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

RAJSBAUM, MARTIN, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SASSANI, PATRICK, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SASSANI, PATRICK, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-MAR-23

SASSANI, PATRICK, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-APR-24

SCHER, BARRY, MD

Provider ID: N/A

311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-23

SCHER, BARRY, MD†

Provider ID: N/A

480 4TH AVE STE 201
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

SCHER, BARRY, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SCHER, BARRY, MD†

Provider ID: N/A

480 4TH AVE STE 201
CHULA VISTA, CA 91910
Effective as of 01-MAR-19

SKAF, AYHAM, MD†

Provider ID: N/A

835 3RD AVE STE A

CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SKAF, AYHAM, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

SKAF, AYHAM, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

SKAF, AYHAM, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

STAINER, GREGORY, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Effective as of 01-JUL-20

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

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

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Effective as of 01-NOV-20

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

OPTOMETRIST

CHAIN, PEI CHI, OD

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Effective as of 01-APR-23

EL-MOGHRABI, ROULA, OD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

EL-MOGHRABI, NANCY, OD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

KOO, ANITA, OD

Provider ID: N/A

835 THIRD AVE
STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

KOO, ANITA, OD

Provider ID: N/A

835 THIRD AVE
STE A
CHULA VISTA, CA 91911
Effective as of 01-FEB-24

KOO, ANITA, OD

Provider ID: N/A

835 THIRD AVE
STE A
CHULA VISTA, CA 91911
Effective as of 01-JUN-24

KOO, ANITA, OD

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-MAY-24

KOO, ANITA, OD

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-FEB-24

MASCARENO, EFRAIN, OD†

Provider ID: N/A

440 4TH AVE STE 9
CHULA VISTA, CA 91910*
Effective as of 01-SEP-22

MASCARENO, EFRAIN, OD†

Provider ID: N/A

440 4TH AVE STE 9
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

MASCARENO, EFRAIN, OD†

Provider ID: N/A

2260 OTAY LAKES RD STE
111
CHULA VISTA, CA 91915
Effective as of 01-JAN-21

MASCARENO, EFRAIN, OD†

Provider ID: N/A

2260 OTAY LAKES RD STE
111
CHULA VISTA, CA 91915*
Effective as of 01-SEP-22

NGUYEN, THU, OD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

NGUYEN, THU, OD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SCOVILL, ALEXANDRA, OD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SCOVILL, ALEXANDRA, OD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Effective as of 01-APR-23

OTOLARYNGOLOGY

ABDOU, RAMI, MD†

Provider ID: N/A

577 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-AUG-22

BANTHIA, VISHAL, MD†

Provider ID: N/A

577 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-22

BANTHIA, VISHAL, MD†

Provider ID: N/A

577 3RD AVE
CHULA VISTA, CA 91910
Teleservice

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

Effective as of 01-AUG-21

BANTHIA, VISHAL, MD†

Provider ID: N/A

📍 577 3RD AVE
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-SEP-21

CALZADA, AUDREY, MD†

Provider ID: N/A

📍 577 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-OCT-22

CHANG, EDWARD, MD

Provider ID: N/A

📍 577 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JUN-24

CHANG, EDWARD, MD

Provider ID: N/A

📍 577 THIRD AVE,
CHULA VISTA, CA 91910

Effective as of 01-MAR-24

JIMENEZ, CARLOS, MD†

Provider ID: N/A

📍 321 E ST STE A
CHULA VISTA, CA 91910

Effective as of 01-OCT-20

JIMENEZ, CARLOS, MD†

Provider ID: N/A

📍 321 E ST STE A
CHULA VISTA, CA 91910

Effective as of 01-OCT-20

MEHTA, RITVIK, MD†

Provider ID: N/A

📍 577 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

MOSHTAGHI, OMID, MD

Provider ID: N/A

📍 2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913

Effective as of 01-JUL-24

MOSHTAGHI, OMID, MD

Provider ID: N/A

📍 2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913

Effective as of 01-JUL-24

MOSHTAGHI, OMID, MD

Provider ID: N/A

📍 765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911

Effective as of 01-JAN-24

PATSIAS, ALEXIS, MD†

Provider ID: N/A

📍 765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-APR-21

PATSIAS, ALEXIS, MD†

Provider ID: N/A

📍 765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-MAY-21

PATSIAS, ALEXIS, MD

Provider ID: N/A

📍 2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913

Effective as of 01-JUN-24

PATSIAS, ALEXIS, MD†

Provider ID: N/A

📍 765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-SEP-22

RASUL, LAILA, MD

Provider ID: N/A

📍 321 E ST STE A
CHULA VISTA, CA 91910

Effective as of 01-AUG-24

SAEZ, NEIL, MD

Provider ID: N/A

📍 2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913

Effective as of 01-NOV-23

SAEZ, NEIL, MD

Provider ID: N/A

📍 2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913

Effective as of 01-FEB-24

SAEZ, NEIL, MD

Provider ID: N/A

📍 2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913

Effective as of 01-JUL-24

SAEZ, NEIL, MD

Provider ID: N/A

📍 2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913

Effective as of 01-JUL-24

SAEZ, NEIL, MD

Provider ID: N/A

📍 765 MEDICAL CENTER CT
STE 210

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

CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 210

CHULA VISTA, CA 91911
Teleservice

Effective as of 01-AUG-20

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 210

CHULA VISTA, CA 91911
Teleservice

Effective as of 01-JUL-22

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 210

CHULA VISTA, CA 91911
Teleservice

Effective as of 01-JAN-21

WOO, LINDA, MD†

Provider ID: N/A

435 H ST
CHULA VISTA, CA 91910

Effective as of 01-AUG-21

WOO, LINDA, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910

Effective as of 01-FEB-18

WOO, LINDA, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910

Effective as of 01-AUG-20

WOO, LINDA, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

WOO, LINDA, MD†

Provider ID: N/A

321 E ST
CHULA VISTA, CA 91910

Effective as of 01-MAR-18

WOO, LINDA, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

PEDIATRICS

PIANSAY, MARIACORAZON, MD

Provider ID: N/A

1637 3RD AVE STE H-1
CHULA VISTA, CA 91911

Effective as of 01-MAY-23

PIANSAY, MARIACORAZON, MD

Provider ID: N/A

1637 3RD AVE STE B-F
CHULA VISTA, CA 91911

Effective as of 01-MAY-23

ROWHANI, NAGHMEH, MD

Provider ID: N/A

280 E ST
CHULA VISTA, CA 91910

Effective as of 01-FEB-24

TIZNADO, ERNESTO, MD†

Provider ID: N/A

1635 3RD AVE STE L
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

PHYS MED/ REHAB PAIN MEDICINE

KATZEN, SETH, DO

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910

Effective as of 01-MAY-23

KATZEN, SETH, DO

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910

Effective as of 01-MAR-24

KO LODGE, GAVIN, DO

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914

Effective as of 01-JUN-23

RICHARDSON, HENRY, MD†

Provider ID: N/A

340 4TH AVE STE 19
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

PHYSICAL MEDICINE / REHABILITATION

BULLOCK, ANDREW, DO†

Provider ID: N/A

344 F ST STE 100
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

BULLOCK, ANDREW, DO†

Provider ID: N/A

344 F ST STE 100
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

BULLOCK, ANDREW, DO†

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

Provider ID: N/A

344 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

KATZEN, SETH, DO

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

KOLODGE, GAVIN, DO

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-SEP-23

TAHAEI, SEYED, MD†

Provider ID: N/A

340 4TH AVE STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

BEITTER, KEERSTIN, PA†

Provider ID: N/A

340 4TH AVE STE 19
CHULA VISTA, CA 91910
Effective as of 01-MAR-22

BEITTER, KEERSTIN, PA

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-JUL-24

BURILA, FAITH, PA

Provider ID: N/A

299 J ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUN-24

CHAN, ALONSO, PA†

Provider ID: N/A

299 J ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

DU, SARAH, PA

Provider ID: N/A

577 THIRD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-APR-24

GUTH, CARA, PA†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-21

GUTH, CARA, PA†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-24

INDA, PRISCILLA, PA†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

INDA, PRISCILLA, PA†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

INDA, PRISCILLA, PA†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

INDA, PRISCILLA, PA†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

INDA, PRISCILLA, PA†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

INDA, PRISCILLA, PA

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-MAY-23

KOLODGE, KAITLEN, PA

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-AUG-23

KOLODGE, KAITLEN, PA

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-DEC-21

LEE, MYUNGHEE, PA

Provider ID: N/A

340 FOURTH AVE
STE 7A
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-23

LENIHAN, MICHAEL, PA

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-DEC-21

MACASADIA, MARITES, PA

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

Provider ID: N/A

752 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Effective as of 01-SEP-20

MARISCAL, MIGUEL, PA

Provider ID: N/A

855 THIRD AVE
STE 2200
CHULA VISTA, CA 91911
Effective as of 01-JUL-24

MARTINEZ-MURGUIA, IRENE, PA

Provider ID: N/A

855 THIRD AVE
STE 2220
CHULA VISTA, CA 91911
Effective as of 01-JUL-24

MENDEZ, JESUS, PA†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

MOREO, HUNTER, PA

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUL-24

NGUYEN, THUY-VY, PA†

Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-NOV-23

NGUYEN, THUY-VY, PA†

Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-AUG-22

ORTEGA-ENDAHL, DAVID, PA

Provider ID: N/A

2648 MAIN ST STE A
CHULA VISTA, CA 91911
Effective as of 01-OCT-21

PEDROZA, JENNIFER, PA†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911
Effective as of 01-AUG-20

POGGI, SARA, PA

Provider ID: N/A

577 THIRD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-APR-24

PYLE, ALEXANDRA, PA

Provider ID: N/A

480 FOURTH AVE
STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

ROBICHAUD, FAITH, PA

Provider ID: N/A

299 J ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-23

ROBINSON, JENELLE, PA

Provider ID: N/A

340 FOURTH AVE
STE 7A
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

SCHAUT, ELIZABETH, PA

Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-AUG-24

SHAH, SHEENA, PA

Provider ID: N/A

765 3RD AVE STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

STIFF, TYLER, PA

Provider ID: N/A

296 H ST STE 203
CHULA VISTA, CA 91910
Effective as of 01-APR-24

TAYLOR, RYAN, PA

Provider ID: N/A

480 FOURTH AVE
STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

THOMAS, KIMBERLY, PA

Provider ID: N/A

678 THIRD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-24

TODD, RACHEL, PA

Provider ID: N/A

299 J ST
CHULA VISTA, CA 91910
Effective as of 01-JUN-23

VARGAS, CHRISTOPHER, PA†

Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Effective as of 01-SEP-22

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

VARGAS, CHRISTOPHER, PA

Provider ID: N/A

📍 2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-JAN-23

VARGAS, CHRISTOPHER, PA†

Provider ID: N/A

📍 2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Effective as of 01-JAN-23

WHITE, KYLE, PA

Provider ID: N/A

📍 765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

WILAND, WINONA, PA

Provider ID: N/A

📍 577 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUN-23

WINTER, JENNIFER, PA

Provider ID: N/A

📍 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-JUL-24

WRIGHT, DEREK, PA

Provider ID: N/A

📍 340 FOURTH AVE
STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-23

WRIGHT, DEREK, PA

Provider ID: N/A

📍 340 FOURTH AVE
STE 19

CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUL-23

WRIGHT, DEREK, PA

Provider ID: N/A

📍 340 FOURTH AVE
STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-23

PODIATRIST

BANKS, JAMINELLI, DPM†

Provider ID: N/A

📍 855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

CAINE, SAMUEL, DPM

Provider ID: N/A

📍 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-APR-24

CAINE, SAMUEL, DPM

Provider ID: N/A

📍 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-24

CAINE, SAMUEL, DPM

Provider ID: N/A

📍 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-23

CHU, ANDREW, DPM†

Provider ID: N/A

📍 855 3RD AVE STE 1100

CHULA VISTA, CA 91911

Effective as of 01-SEP-22

CHU, ANDREW, DPM†

Provider ID: N/A

📍 855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-JUN-24

COLLINS, MICHAEL, DPM†

Provider ID: N/A

📍 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

COLLINS, MICHAEL, DPM†

Provider ID: N/A

📍 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

COLLINS, MICHAEL, DPM†

Provider ID: N/A

📍 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

COLLINS, MICHAEL, DPM†

Provider ID: N/A

📍 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-APR-23

DAVIDSON III, JOHN, DPM†

Provider ID: N/A

📍 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

DAVIDSON III, JOHN, DPM†

Provider ID: N/A

📍 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice

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

Effective as of 01-DEC-23

DAVIDSON III, JOHN, DPM†

Provider ID: N/A

📍 345 F ST STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-AUG-18

DAVIDSON III, JOHN, DPM†

Provider ID: N/A

📍 345 F ST STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-21

DAVIDSON III, JOHN, DPM†

Provider ID: N/A

📍 345 F ST STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-21

DAVIDSON III, JOHN, DPM†

Provider ID: N/A

📍 345 F ST STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-22

HAN, KYOUNG, DPM

Provider ID: N/A

📍 855 3RD AVE STE 1100
CHULA VISTA, CA 91911

Effective as of 01-JAN-22

KRIGER, STEPHEN, DPM†

Provider ID: N/A

📍 345 F ST STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-22

MANCHEL, BRUCE, DPM†

Provider ID: N/A

📍 678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

MAZZA, DAVID, DPM†

Provider ID: N/A

📍 276 CHURCH AVE STE A
CHULA VISTA, CA 91910

Effective as of 01-SEP-15

MAZZA, DAVID, DPM†

Provider ID: N/A

📍 276 CHURCH AVE STE A
CHULA VISTA, CA 91910

Effective as of 01-JAN-14

MAZZA, DAVID, DPM†

Provider ID: N/A

📍 276 CHURCH AVE STE A
CHULA VISTA, CA 91910

Effective as of 01-DEC-22

MORGAN, CRAIG, DPM†

Provider ID: N/A

📍 276 CHURCH AVE STE A
CHULA VISTA, CA 91910*

Effective as of 01-DEC-17

NGUYEN, HAN, DPM

Provider ID: N/A

📍 345 F ST STE 100
CHULA VISTA, CA 91910

Effective as of 01-JAN-24

NGUYEN, HAN, DPM

Provider ID: N/A

📍 345 F ST STE 100
CHULA VISTA, CA 91910

Effective as of 01-JUN-23

NGUYEN, HAN, DPM

Provider ID: N/A

📍 345 F ST STE 100
CHULA VISTA, CA 91910

Effective as of 01-JUL-23

PUCCINELLI, ALAYNA, DPM†

Provider ID: N/A

📍 340 4TH AVE STE 6
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUL-22

PUCCINELLI, ALAYNA, DPM†

Provider ID: N/A

📍 340 4TH AVE STE 6
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-SEP-22

QUE, HOWIE, DPM

Provider ID: N/A

📍 750 MEDICAL CENTER CT
STE 6
CHULA VISTA, CA 91911

Effective as of 01-JUN-23

READ, TRENTON, DPM

Provider ID: N/A

📍 855 3RD AVE STE 1100
CHULA VISTA, CA 91911

Effective as of 01-APR-23

SMITH, COLLIN, DPM†

Provider ID: N/A

📍 855 3RD AVE STE 1100
CHULA VISTA, CA 91911

Effective as of 01-JUN-21

SMITH, COLLIN, DPM†

Provider ID: N/A

📍 855 3RD AVE STE 1100
CHULA VISTA, CA 91911

Effective as of 01-JUN-24

SMITH, COLLIN, DPM†

Provider ID: N/A

📍 855 3RD AVE STE 1100
CHULA VISTA, CA 91911

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

Effective as of 01-SEP-22

SOUVOROVA, JULIA, DPM†

Provider ID: N/A

336 OXFORD ST STE 104
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-MAR-24

SOUVOROVA, JULIA, DPM†

Provider ID: N/A

336 OXFORD ST STE 104
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-MAY-24

TOUMA, ELIE, DPM

Provider ID: N/A

1111 BROADWAY STE 305
CHULA VISTA, CA 91911

Effective as of 01-APR-23

TSAI, GRACE, DPM

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910

Effective as of 01-SEP-23

TSAI, GRACE, DPM

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910

Effective as of 01-APR-23

TSAI, GRACE, DPM

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910

Effective as of 01-DEC-23

TSAI, GRACE, DPM

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910

Effective as of 01-FEB-23

XU, DIXON, DPM†

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-21

XU, DIXON, DPM†

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-DEC-23

XU, DIXON, DPM†

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAY-21

XU, DIXON, DPM†

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-24

XU, DIXON, DPM†

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-NOV-20

XU, DIXON, DPM†

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-SEP-22

XU, DIXON, DPM†

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-SEP-22

PSYCHIATRY

BINDAL, ANKUR, MD†

Provider ID: N/A

765 3RD AVE STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-SEP-22

BINDAL, ANKUR, MD†

Provider ID: N/A

765 3RD AVE STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUL-22

BINDAL, ANKUR, MD†

Provider ID: N/A

765 3RD AVE STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUL-22

BINDAL, ANKUR, MD†

Provider ID: N/A

765 3RD AVE STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUL-22

BINDAL, ANKUR, MD†

Provider ID: N/A

765 3RD AVE STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUL-22

BINDAL, ANKUR, MD†

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

Provider ID: N/A

765 3RD AVE STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-SEP-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

2300 BOSWELL RD STE 225
CHULA VISTA, CA 91914

Effective as of 01-AUG-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

2300 BOSWELL RD STE 225
CHULA VISTA, CA 91914

Effective as of 01-AUG-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUN-22

MARTINEZ, STEPHANIE, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

MARTINEZ, STEPHANIE, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

MCGEHRIN, KEVIN, MD

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-AUG-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-AUG-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-24

MISHRA, GAURAV, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

MISHRA, GAURAV, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

NICHOLS, ALPHONSO, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUL-22

PHAM, ALISE, DO

Provider ID: N/A

450 FOURTH AVE STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUN-24

PHAM, ALISE, DO

Provider ID: N/A

450 FOURTH AVE STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUN-24

TROYER, EMILY, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-22

TROYER, EMILY, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-22

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

PSYCHIATRY CHILD

KARIPPOT, ANOOP, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JAN-23

KARIPPOT, ANOOP, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JAN-23

KARIPPOT, ANOOP, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUN-22

MISHRA, GAURAV, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

MISHRA, GAURAV, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

NICHOLS, ALPHONSO, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUL-22

***PSYCHIATRY SLEEP
MEDICINE***

KARIPPOT, ANOOP, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JAN-23

PSYCHOLOGIST

BAYLON, ALDO, PSYD

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-22

BAYLON, ALDO, PSYD

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-22

CELAYA, PATRICIA, PhD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-AUG-22

CELAYA, PATRICIA, PhD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-AUG-22

GALLO, LINDA, PhD

Provider ID: N/A

780 BAY BLVD STE 200
CHULA VISTA, CA 91910

Effective as of 01-APR-23

GALLO, LINDA, PhD

Provider ID: N/A

780 BAY BLVD STE 200
CHULA VISTA, CA 91910

Effective as of 01-APR-23

GOULD, HILARY, PhD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

GOULD, HILARY, PhD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

MAPLES, RANDI, PSYD†

Provider ID: N/A

765 3RD AVE STE 100
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

MAPLES, RANDI, PSYD†

Provider ID: N/A

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

765 3RD AVE STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

**PATTERSON-HYATT,
KIMBERLY, PSYD[†]**
Provider ID: N/A

1061 TIERRA DEL REY STE
303
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

**PATTERSON-HYATT,
KIMBERLY, PSYD[†]**
Provider ID: N/A

1061 TIERRA DEL REY STE
304
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

**PATTERSON-HYATT,
KIMBERLY, PSYD[†]**
Provider ID: N/A

1061 TIERRA DEL REY STE
305
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

**PATTERSON-HYATT,
KIMBERLY, PSYD[†]**
Provider ID: N/A

1061 TIERRA DEL REY STE
304
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

**PATTERSON-HYATT,
KIMBERLY, PSYD[†]**
Provider ID: N/A

1061 TIERRA DEL REY STE
303
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

PATTERSON-HYATT,

KIMBERLY, PSYD[†]
Provider ID: N/A

1061 TIERRA DEL REY STE
305
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

**WIJAYARATNE, IMANIE,
PSYD[†]**
Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

**WIJAYARATNE, IMANIE,
PSYD[†]**
Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

PULMONARY DISEASES

LIRA, JOSE, MD[†]
Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914
Effective as of 01-FEB-21

LIRA, JOSE, MD[†]
Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914
Effective as of 01-JAN-14

LIRA, JOSE, MD[†]
Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914
Effective as of 01-SEP-22

LOZANO, MARTHA, MD[†]
Provider ID: N/A

841 KUHN DR STE 200

CHULA VISTA, CA 91914
Effective as of 01-SEP-22

LOZANO, MARTHA, MD[†]
Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914
Effective as of 01-JAN-14

LOZANO, MARTHA, MD[†]
Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914
Effective as of 01-MAR-21

LOZANO, MARTHA, MD[†]
Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914
Effective as of 01-SEP-15

PENA ROMERO, CESAR, MD[†]
Provider ID: N/A

227 CHURCH AVE
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

PENA ROMERO, CESAR, MD[†]
Provider ID: N/A

227 CHURCH AVE
CHULA VISTA, CA 91910
Effective as of 01-OCT-19

SANCHEZ, LUIS, MD[†]
Provider ID: N/A

227 CHURCH AVE
CHULA VISTA, CA 91910*
Effective as of 01-JAN-14

SANCHEZ, LUIS, MD[†]
Provider ID: N/A

227 CHURCH AVE
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

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

RADIATION ONCOLOGY

BRUGGEMAN, ANDREW, MD

Provider ID: N/A

769 MEDICAL CENTER CT
STE 100
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

CARMONA, RUBEN, MD

Provider ID: N/A

769 MEDICAL CENTER CT
STE 100
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

CARMONA, RUBEN, MD

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

COLEMAN, LORI, MD†

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

**HATTANGADI-GLUTH, JONA,
MD†**

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-21

JABBARI, SIAVASH, MD†

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Effective as of 01-OCT-22

MANSY, GINA, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-APR-21

MELL, LOREN, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-21

PEJAVAR, SUNANDA, MD†

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

RAHN, DOUGLAS, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-APR-21

RASH, DOMINIQUE, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-21

ROSE, BRENT, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-21

STRAKA, CHRISTOPHER, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice

Effective as of 01-DEC-21

UHL, BARRY, MD†

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JAN-21

VOLPP, PAUL, MD†

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

WHITE, EVAN, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-APR-21

RADIOLOGY DIAGNOSTIC

FOSSUM, CROIX, MD

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Effective as of 01-MAY-24

YORK, JOHN, MD

Provider ID: N/A

865 3RD AVE STE 100
CHULA VISTA, CA 91911
Effective as of 01-JUN-23

YORK, JOHN, MD

Provider ID: N/A

865 3RD AVE STE 100
CHULA VISTA, CA 91911
Effective as of 01-DEC-23

***REGISTERED PHYSICAL
THERAPIST***

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

ALLOS, ALEXANDER, PT†

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

BURLAKOVSKY, NATHAN, PT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

CHENG, BRANDON, PT

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-FEB-24

DORSEY, KYLE, PT†

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-DEC-21

DORSEY, KYLE, PT†

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-SEP-22

FARRAR, COURTNEY, PT

Provider ID: N/A

340 FOURTH AVE
STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-24

FARRAR, COURTNEY, PT

Provider ID: N/A

340 FOURTH AVE
STE 19

CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-23

HERMAN, RACHEL, PT†

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-SEP-22

HERMAN, RACHEL, PT†

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-NOV-21

JAIN, ALEXANDRA, PT

Provider ID: N/A

880 THIRD AVE
STE A
CHULA VISTA, CA 91911
Effective as of 01-MAR-24

KARANDE, PRACHI, PT†

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-JAN-22

LONG, RYAN, PT

Provider ID: N/A

2417 FENTON ST STE A
CHULA VISTA, CA 91914*
Effective as of 01-JUL-22

LONG, RYAN, PT

Provider ID: N/A

320 BROADWAY STE 2
CHULA VISTA, CA 91910*
Effective as of 01-JUL-22

NGUYEN, TIA, PT

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-MAR-24

NOVENCIDO, ANDREW, PT†

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-SEP-22

PAPA, AMY, PT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

PAPA, AMY, PT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

PHILLIP, OMARI, PT†

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-DEC-21

POLIS, NICK, PT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-MAY-22

SPARKS, TODD, PT†

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-JAN-21

STAHL, KEVIN, PT

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

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-SEP-23

THOMAS, KAITLIN, PT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

RHEUMATOLOGY

AL NAHLAWI, BASMA, MD†

Provider ID: N/A

296 H ST STE 304
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

ASFAR, RAFID, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-MAY-24

CHITKARA, PUJA, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

CHITKARA, PUJA, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-MAR-16

CHITKARA, PUJA, MD†

Provider ID: N/A

765 MEDICAL CENTER CT

STE 216
CHULA VISTA, CA 91911
Effective as of 01-SEP-15

CHWA, JEFFREY, DO

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

HAMMETT, ERIN, DO†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

KHANNA, SURABHI, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUN-23

REDDY, DANA, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

REDDY, SMITHA, MD†

Provider ID: N/A

272 CHURCH AVE STE 1
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

REDDY, SMITHA, MD†

Provider ID: N/A

272 CHURCH AVE STE 1
CHULA VISTA, CA 91910
Effective as of 01-FEB-19

REDDY, SMITHA, MD†

Provider ID: N/A

272 CHURCH AVE STE 1
CHULA VISTA, CA 91910
Effective as of 01-JUL-24

SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS, SP

Provider ID: N/A

333 H ST STE 5000
CHULA VISTA, CA 91910
Effective as of 01-JUN-22

AROCHO-SALGADO, MIRELIS, SP

Provider ID: N/A

333 H ST STE 5000
CHULA VISTA, CA 91910
Effective as of 01-JUN-22

CALDERON MORALES, ASTRID, SP

Provider ID: N/A

333 H ST STE 5000
CHULA VISTA, CA 91910
Effective as of 01-APR-24

DURNAN, CASSANDRA, SP

Provider ID: N/A

333 H ST STE 5000
CHULA VISTA, CA 91910
Effective as of 01-JUL-24

SURGERY GENERAL

ARCOVEDO, RODOLFO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JUN-19

ARCOVEDO, RODOLFO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

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

Effective as of 01-JUN-19

ARCOVEDO, RODOLFO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-AUG-23

ARCOVEDO, RODOLFO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

ARCOVEDO, RODOLFO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

BARRERA, HUGO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

BARRERA, HUGO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

BARRERA, HUGO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-19

BARRERA, HUGO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-SEP-14

CASILLAS BERUMEN, SERGIO,

MD

Provider ID: N/A

1111 BROADWAY STE 305
CHULA VISTA, CA 91911

Effective as of 01-JUL-24

CASILLAS BERUMEN, SERGIO, MD

Provider ID: N/A

1111 BROADWAY STE 305
CHULA VISTA, CA 91911

Effective as of 01-FEB-24

EWBANK, CLIFTON, MD†

Provider ID: N/A

786 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-NOV-22

EWBANK, CLIFTON, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-OCT-22

EWBANK, CLIFTON, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-NOV-22

EWBANK, CLIFTON, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-AUG-22

HSU, ANDREW, MD†

Provider ID: N/A

480 4TH AVE STE 404
CHULA VISTA, CA 91910

Effective as of 01-SEP-15

HSU, BRADFORD, MD†

Provider ID: N/A

480 4TH AVE STE 404
CHULA VISTA, CA 91910

Effective as of 01-JAN-14

HSU, BRADFORD, MD†

Provider ID: N/A

480 4TH AVE STE 404
CHULA VISTA, CA 91910

Effective as of 01-SEP-15

HSU, BRADFORD, MD†

Provider ID: N/A

480 4TH AVE STE 404
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

HSU, ANDREW, MD†

Provider ID: N/A

480 4TH AVE STE 404
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

HSU, ANDREW, MD†

Provider ID: N/A

480 4TH AVE STE 404
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

HSU, BRADFORD, MD

Provider ID: N/A

865 THIRD AVE
STE 112
CHULA VISTA, CA 91911

Effective as of 01-MAY-24

HUANG, MARK, MD†

Provider ID: N/A

345 F ST STE 200
CHULA VISTA, CA 91910

Effective as of 01-OCT-17

KHARAZI, ALEXANDRA, MD†

Provider ID: N/A

345 F ST STE 200
CHULA VISTA, CA 91910

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

Effective as of 01-MAY-23

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

📍 1111 BROADWAY STE 305
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-MAR-24

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

📍 1111 BROADWAY STE 305
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-AUG-24

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

📍 1111 BROADWAY STE 305
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-MAR-24

MORAL, JOHN, MD

Provider ID: N/A

📍 865 THIRD AVE
STE 112
CHULA VISTA, CA 91911

Effective as of 01-MAY-24

MORAL, JOHN, MD

Provider ID: N/A

📍 480 4TH AVE STE 404
CHULA VISTA, CA 91910

Effective as of 01-SEP-23

MORAL, JOHN, MD

Provider ID: N/A

📍 480 4TH AVE STE 404
CHULA VISTA, CA 91910

Effective as of 01-JUN-23

SPITZER, BLAKE, MD†

Provider ID: N/A

📍 786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

SPITZER, BLAKE, MD†

Provider ID: N/A

📍 786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-OCT-19

SPITZER, BLAKE, MD†

Provider ID: N/A

📍 786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-MAY-20

SPITZER, BLAKE, MD†

Provider ID: N/A

📍 786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-NOV-22

SUMMERS, STEPHEN, MD†

Provider ID: N/A

📍 786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-SEP-15

SUMMERS, STEPHEN, MD†

Provider ID: N/A

📍 786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

SUMMERS, STEPHEN, MD†

Provider ID: N/A

📍 786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JUN-21

SUMMERS, STEPHEN, MD†

Provider ID: N/A

📍 786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

TALEBZADEH, NOJAN, MD†

Provider ID: N/A

📍 246 F ST
CHULA VISTA, CA 91910

Effective as of 01-JAN-14

YANG, YIFAN, MD†

Provider ID: N/A

📍 786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

YANG, YIFAN, MD†

Provider ID: N/A

📍 786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

YANG, YIFAN, MD†

Provider ID: N/A

📍 786 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

YANG, YIFAN, MD†

Provider ID: N/A

📍 786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-19

YANG, YIFAN, MD†

Provider ID: N/A

📍 786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-SEP-15

YANG, YIFAN, MD†

Provider ID: N/A

📍 786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JUN-23

SURGERY GENERAL VASCULAR

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

CHAMMAS, JOSEPH, MD†

Provider ID: N/A

1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Effective as of 01-JUL-24

MORENO MARTINEZ, ENRIQUE, MD†

Provider ID: N/A

1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-AUG-24

SURGERY HAND

POMERANTZ, MICHAEL, MD†

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-DEC-21

SURGERY NEUROLOGICAL

WHITE, DANIEL, MD†

Provider ID: N/A

296 H ST STE 303
CHULA VISTA, CA 91910
Effective as of 01-MAR-23

WHITE, DANIEL, MD†

Provider ID: N/A

296 H ST STE 303
CHULA VISTA, CA 91910
Effective as of 01-OCT-21

WHITE, DANIEL, MD†

Provider ID: N/A

296 H ST STE 303
CHULA VISTA, CA 91910
Effective as of 01-SEP-23

SURGERY ORTHOPEDIC

ANDRY, JAMES, MD

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911*
Effective as of 01-MAR-24

ANDRY, JAMES, MD

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-MAR-24

BRERETON, DANIEL, DO†

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-DEC-21

DOWNING, KRISTOPHER, MD

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-MAR-24

DOWNING, KRISTOPHER, MD

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911*
Effective as of 01-MAR-24

DUTTON, PASCUAL, MD

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

296 H ST STE 203
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

EVES, WILLIAM, MD†

Provider ID: N/A

480 4TH AVE STE 307
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

EVES, WILLIAM, MD†

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

Provider ID: N/A

📄 480 4TH AVE STE 307
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

GROTTING, JOHN, MD

Provider ID: N/A

📄 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-JAN-24

GROTTING, JOHN, MD†

Provider ID: N/A

📄 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-AUG-23

GROTTING, JOHN, MD†

Provider ID: N/A

📄 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-NOV-21

GROTTING, JOHN, MD

Provider ID: N/A

📄 296 H ST STE 203
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

GROTTING, JOHN, MD†

Provider ID: N/A

📄 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

HOFMEISTER, ERIC, MD†

Provider ID: N/A

📄 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-NOV-21

HOFMEISTER, ERIC, MD†

Provider ID: N/A

📄 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-AUG-23

HOFMEISTER, ERIC, MD†

Provider ID: N/A

📄 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-FEB-18

KIMBALL, MICHAEL, MD†

Provider ID: N/A

📄 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

KLATMAN, SAMUEL, MD†

Provider ID: N/A

📄 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-NOV-21

KLATMAN, SAMUEL, MD†

Provider ID: N/A

📄 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-AUG-23

KOLODGE, GAVIN, DO

Provider ID: N/A

📄 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-AUG-23

KUSNEZOV, NICHOLAS, MD

Provider ID: N/A

📄 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-APR-24

MCKNIGHT, BRADEN, MD

Provider ID: N/A

📄 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-APR-24

POMERANTZ, MICHAEL, MD†

Provider ID: N/A

📄 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-FEB-18

RICKARDS, ENASS, MD

Provider ID: N/A

📄 480 FOURTH AVE
STE 501
CHULA VISTA, CA 91910
Effective as of 01-FEB-24

ROSENFELD, ALAN, MD†

Provider ID: N/A

📄 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

ROSENFELD, ALAN, MD†

Provider ID: N/A

📄 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

ROSENFELD, ALAN, MD†

Provider ID: N/A

📄 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-APR-23

ROSENFELD, ALAN, MD†


Provider ID: N/A

📄 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-AUG-23


ROSENFELD, ALAN, MD†

Provider ID: N/A


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

 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-NOV-09


ROSENFELD, ALAN, MD†
Provider ID: N/A

 480 4TH AVE STE 501
CHULA VISTA, CA 91910*
Effective as of 01-FEB-07

TAYYAB, NEIL, MD†
Provider ID: N/A

 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-AUG-23


TAYYAB, NEIL, MD†
Provider ID: N/A

 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


TAYYAB, NEIL, MD†
Provider ID: N/A

 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


TAYYAB, NEIL, MD†
Provider ID: N/A

 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

TAYYAB, NEIL, MD†
Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

YOUNGBLOOD, SCOT, MD
Provider ID: N/A


 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-NOV-23

YOUNGBLOOD, SCOT, MD
Provider ID: N/A


 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-OCT-23

SURGERY THORACIC


HUANG, MARK, MD†
Provider ID: N/A

 345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-SEP-17


HUANG, MARK, MD†
Provider ID: N/A

 345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

MUMTAZ, SEEMAL, MD†
Provider ID: N/A


 345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

MUMTAZ, SEEMAL, MD†
Provider ID: N/A

 345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-SEP-17

SURGICAL ONCOLOGY


QUIROZ, ELISA, MD†
Provider ID: N/A

 678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22


UROLOGY

COHEN, EDWARD, MD


Provider ID: N/A

 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24


DICKS, BRIAN, MD
Provider ID: N/A

 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24


GRIMALDI, JOHN, DO†
Provider ID: N/A

 450 4TH AVE STE 312
CHULA VISTA, CA 91910
Effective as of 01-SEP-15


GRIMALDI, JOHN, DO†
Provider ID: N/A

 450 4TH AVE STE 312
CHULA VISTA, CA 91910*
Effective as of 01-JAN-14


JUMA, SAAD, MD
Provider ID: N/A

 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

KEILLER, DANNY, MD
Provider ID: N/A

 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

NEUSTEIN, PAUL, MD
Provider ID: N/A

 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

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

NEUSTEIN, PAUL, MD

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

NGUYEN, HUNG, MD

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

PE, MARK-RALLY, MD

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

ROBERTS, JAMES, MD

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JUN-24

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-SEP-21

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-NOV-22

SEVILLA, CLAUDIA, MD†

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-NOV-21

SEVILLA, CLAUDIA, MD†

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-OCT-21

VAPNEK, EVAN, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

VAPNEK, EVAN, MD

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

CERTIFIED NURSE

PRACTITIONER

NAVA, PETER, NP

Provider ID: N/A

517 N HORNE ST
CMP PENDLETON, CA
92054

Effective as of 01-JAN-24

NAVA, PETER, NP

Provider ID: N/A

818 PIER VIEW WAY
CMP PENDLETON, CA
92054

Effective as of 01-JAN-24

EMERGENCY MEDICINE

EL SAID, KHALED, MD†

Provider ID: N/A

11882 DE PALMA RD STE
2F-1
CORONA, CA 92883

Teleservice

Effective as of 01-MAR-24

INFECTIOUS DISEASE

RESTREPO, DALILAH, MD†

Provider ID: N/A

3334 E COAST HWY PMB
655
CORONA DEL MAR, CA
92625

Effective as of 01-AUG-22

CARDIOVASCULAR DISEASE

MAI, TUAN, MD†

Provider ID: N/A

230 PROSPECT PL STE 250
CORONADO, CA 92118

Effective as of 01-NOV-22

CERTIFIED NURSE PRACTITIONER

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

DWYER, ERIN, NP

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-FEB-24

GOSHEN, KIRSTEN, NP†

Provider ID: N/A

230 PROSPECT PL STE 340
CORONADO, CA 92118
Effective as of 01-DEC-22

TOMICICH, STEPHANIE, NP

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-FEB-24

FAMILY PRACTICE

SHAFT, ALEXANDER, MD†

Provider ID: N/A

131 ORANGE AVE STE 101
CORONADO, CA 92118
Teleservice
Effective as of 01-FEB-23

SHAFT, ALEXANDER, MD†

Provider ID: N/A

131 ORANGE AVE STE 101
CORONADO, CA 92118
Teleservice
Effective as of 01-MAR-22

GASTROENTEROLOGY

BAIG, NABIL, DO†

Provider ID: N/A

131 ORANGE AVE STE 101B
CORONADO, CA 92118
Teleservice
Effective as of 01-OCT-22

HEARING AID DEALER /

SUPPLIER

DAVIS, KELLE, MA†

Provider ID: N/A

801 ORANGE AVE
CORONADO, CA 92118
Effective as of 01-SEP-22

INTERNAL MEDICINE

BORTZ, DAVID, MD†

Provider ID: N/A

230 PROSPECT PL STE 340
CORONADO, CA 92118*
Effective as of 01-DEC-22

DAVIS, JASON, MD†

Provider ID: N/A

230 PROSPECT PL STE
340B
CORONADO, CA 92118
Effective as of 01-JAN-24

OLIVER, DEANNA, MD†

Provider ID: N/A

131 ORANGE AVE STE 101
CORONADO, CA 92118
Effective as of 01-MAR-21

OLIVER, DEANNA, MD†

Provider ID: N/A

131 ORANGE AVE STE 101
CORONADO, CA 92118
Effective as of 01-APR-21

NEPHROLOGY

DAVIS, JASON, MD†

Provider ID: N/A

230 PROSPECT PL STE
340B
CORONADO, CA 92118
Effective as of 01-MAR-16

DAVIS, JASON, MD†

Provider ID: N/A

230 PROSPECT PL STE
340B
CORONADO, CA 92118
Effective as of 01-JUL-22

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI, MD†

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-21

SEFA-BOAKYE, KOFI, MD†

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JUL-14

SURGERY GENERAL

BHOYRUL, SUNIL, MD†

Provider ID: N/A

230 PROSPECT PL STE 340
CORONADO, CA 92118
Effective as of 01-DEC-22

BORTZ, PASCAL, MD†

Provider ID: N/A

230 PROSPECT PL STE 340
CORONADO, CA 92118
Effective as of 01-DEC-22

MORELL, MICHAEL, MD

Provider ID: N/A

230 PROSPECT PL STE 340
CORONADO, CA 92118
Effective as of 01-DEC-23

SURGERY ORTHOPEDIC

ANDRY, JAMES, MD


Provider ID: N/A

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

 230 PROSPECT PL STE 230
CORONADO, CA 92118*
Effective as of 01-MAR-24


ANDRY, JAMES, MD

Provider ID: N/A

 230 PROSPECT PL STE 230
CORONADO, CA 92118
Effective as of 01-MAR-24


KUSNEZOV, NICHOLAS, MD

Provider ID: N/A

 230 PROSPECT PL STE 230
CORONADO, CA 92118
Teleservice
Effective as of 01-APR-24


MCKNIGHT, BRADEN, MD

Provider ID: N/A

 230 PROSPECT PL STE 230
CORONADO, CA 92118
Teleservice
Effective as of 01-APR-24


PALLIA, CHRISTOPHER, MD

Provider ID: N/A

 230 PROSPECT PL STE 230
CORONADO, CA 92118
Teleservice
Effective as of 01-APR-24

PALLIA, CHRISTOPHER, MD


Provider ID: N/A

 230 PROSPECT PL STE 230
CORONADO, CA 92118*
Teleservice
Effective as of 01-MAR-24

UROLOGY

BUTLER, PHILIP, MD


Provider ID: N/A

 230 PROSPECT PL STE 210
CORONADO, CA 92118

Effective as of 01-JAN-24


COHEN, EDWARD, MD

Provider ID: N/A

 230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-FEB-24


DATO, PAUL, MD

Provider ID: N/A

 230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24


DICKS, BRIAN, MD

Provider ID: N/A

 230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24


JUMA, SAAD, MD

Provider ID: N/A

 230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24


KEILLER, DANNY, MD

Provider ID: N/A

 230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24


NEUSTEIN, PAUL, MD

Provider ID: N/A

 230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24


NGUYEN, HUNG, MD

Provider ID: N/A

 230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24


PE, MARK-RALLY, MD

Provider ID: N/A

 230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24


ROBERTS, JAMES, MD†

Provider ID: N/A

 230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24


ROBERTS, JAMES, MD†

Provider ID: N/A

 230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-21


ROBERTS, JAMES, MD†

Provider ID: N/A

 230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-20


SALEM, CAROL, MD

Provider ID: N/A

 230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

VAPNEK, EVAN, MD


Provider ID: N/A

 230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

**CERTIFIED NURSE
PRACTITIONER**

PASICOLAN, MARI, NP

Provider ID: N/A

 24833 DEL PRADO
DANA POINT, CA 92629
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

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

Provider ID: N/A

☐ 24833 DEL PRADO
DANA POINT, CA 92629
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

☐ 24833 DEL PRADO
DANA POINT, CA 92629
Effective as of 01-DEC-22

MARRIAGE FAMILY THERAPIST

MOORE, CANDACE, MFT

Provider ID: N/A

☐ 23 TERRAZA DEL MAR
DANA POINT, CA 92629
Effective as of 01-JAN-22

MOORE, CANDACE, MFT

Provider ID: N/A

☐ 23 TERRAZA DEL MAR
DANA POINT, CA 92629
Effective as of 01-JAN-22

OPTOMETRIST

SPAETH, JOHN, OD

Provider ID: N/A

☐ 24040 CAMINO DEL AVION
STE G
DANA POINT, CA 92629
Effective as of 01-SEP-23

WANG, MATTHEW, OD

Provider ID: N/A

☐ 24692 DEL PRADO STE B
DANA POINT, CA 92629
Effective as of 01-OCT-23

WANG, MATTHEW, OD

Provider ID: N/A

☐ 24692 DEL PRADO STE B
DANA POINT, CA 92629

Effective as of 01-JAN-23

PSYCHOLOGIST

UNGER, ARLENE, PhD†

Provider ID: N/A

☐ 34145 PACIFIC COAST HWY
STE 821
DANA POINT, CA 92629
Effective as of 01-DEC-20

UNGER, ARLENE, PhD†

Provider ID: N/A

☐ 34145 PACIFIC COAST HWY
STE 821
DANA POINT, CA 92629
Effective as of 01-DEC-20

UNGER, ARLENE, PhD†

Provider ID: N/A

☐ 34145 PACIFIC COAST HWY
STE 821
DANA POINT, CA 92629
Effective as of 01-DEC-20

UNGER, ARLENE, PhD†

Provider ID: N/A

☐ 34145 PACIFIC COAST HWY
STE 821
DANA POINT, CA 92629
Effective as of 01-DEC-20

DERMATOLOGY

MARRIOTT, AGATA, MD

Provider ID: N/A

☐ 1349 CAMINO DEL MAR
STE D
DEL MAR, CA 92014
Effective as of 01-SEP-22

PHYSICIANS ASSISTANT

HANSEN, CHRISTINA, PA

Provider ID: N/A

☐ 12865 POINTE DEL MAR
WAY STE 200
DEL MAR, CA 92014

Teleservice

Effective as of 01-OCT-23

LEE, ISABEL, PA

Provider ID: N/A

☐ 1349 CAMINO DEL MAR
STE B
DEL MAR, CA 92014

Teleservice

Effective as of 01-DEC-23

SZABO, HAYLIE, PA

Provider ID: N/A

☐ 12865 POINTE DEL MAR
WAY STE 200
DEL MAR, CA 92014

Teleservice

Effective as of 01-OCT-22

PSYCHIATRY

COLOGNE, SCOTT, MD†

Provider ID: N/A

☐ 12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014

Effective as of 01-OCT-23

COLOGNE, SCOTT, MD†

Provider ID: N/A

☐ 12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014

Effective as of 01-OCT-23

COLOGNE, SCOTT, MD†

Provider ID: N/A

☐ 12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014

Effective as of 01-OCT-23

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

COLOGNE, SCOTT, MD†

Provider ID: N/A

📍 12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014
Effective as of 01-OCT-23

COLOGNE, SCOTT, MD†

Provider ID: N/A

📍 12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014
Effective as of 01-OCT-23

COLOGNE, SCOTT, MD†

Provider ID: N/A

📍 12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014
Effective as of 01-OCT-23

COLOGNE, SCOTT, MD†

Provider ID: N/A

📍 12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014
Effective as of 01-OCT-23

COLOGNE, SCOTT, MD†

Provider ID: N/A

📍 12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014
Effective as of 01-OCT-23

VIJAYASARATHI, KRISHNA, DO†

Provider ID: N/A

📍 12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

VIJAYASARATHI, KRISHNA, DO†

Provider ID: N/A

📍 12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

VIJAYASARATHI, KRISHNA, DO†

Provider ID: N/A

📍 12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

VIJAYASARATHI, KRISHNA, DO†

Provider ID: N/A

📍 12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

PSYCHOLOGIST

ROSENGARTEN, ARTHUR, PhD†

Provider ID: N/A

📍 12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

ROSENGARTEN, ARTHUR, PhD†

Provider ID: N/A

📍 12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

ROSENGARTEN, ARTHUR, PhD†

Provider ID: N/A

📍 12835 POINTE DEL MAR

WAY STE 1

DEL MAR, CA 92014
Effective as of 01-OCT-23

ROSENGARTEN, ARTHUR, PhD†

Provider ID: N/A

📍 12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

SURGERY ORTHOPEDIC

BROWN, RICHARD, MD†

Provider ID: N/A

📍 12865 POINTE DEL MAR
WAY STE 200
DEL MAR, CA 92014
Teleservice
Effective as of 01-JAN-22

MOHLENBROCK, WILLIAM, MD

Provider ID: N/A

📍 12865 POINTE DEL MAR
WAY STE 200
DEL MAR, CA 92014
Teleservice
Effective as of 01-JAN-22

THUNDER, RICHARD, MD†

Provider ID: N/A

📍 12865 POINTE DEL MAR
WAY STE 200
DEL MAR, CA 92014
Teleservice
Effective as of 01-JAN-22

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY, MD

Provider ID: N/A

📍 278 AVOCADO AVE

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

EL CAJON, CA 92020
Effective as of 01-JUL-24

COHEN, ZACHARY, MD†

Provider ID: N/A

📍 278 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-NOV-21

PRABHU, NAMRATHA, MD

Provider ID: N/A

📍 278 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-APR-24

AUDIOLOGIST

SHASKY, GARY, AuD†

Provider ID: N/A

📍 1767 E MAIN ST
EL CAJON, CA 92021
Effective as of 01-JAN-21

CARDIAC

ELECTROPHYSIOLOGY

LERNER, JONATHAN, MD

Provider ID: N/A

📍 1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-JUL-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

📍 1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-JAN-23

CARDIOVASCULAR DISEASE

ABELHAD, NADIA, MD

Provider ID: N/A

📍 1625 E MAIN ST STE 201

EL CAJON, CA 92021
Effective as of 01-JAN-24

BARVALIA, MIHIR, MD†

Provider ID: N/A

📍 1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020
Teleservice

Effective as of 01-AUG-21

BARVALIA, MIHIR, MD†

Provider ID: N/A

📍 1380 EL CAJON BLVD STE
212
EL CAJON, CA 92020
Effective as of 01-JAN-22

CARLSON, STEVEN, MD†

Provider ID: N/A

📍 1625 E MAIN ST STE 201
EL CAJON, CA 92021
Teleservice
Effective as of 01-APR-21

DO, HULBERT, MD

Provider ID: N/A

📍 1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-OCT-23

FERNANDEZ, GENARO, MD†

Provider ID: N/A

📍 1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020
Effective as of 01-AUG-21

HOURLANI, RAYAN, MD†

Provider ID: N/A

📍 300 S PIERCE ST STE 102
EL CAJON, CA 92020
Teleservice
Effective as of 01-JAN-21

KAFRI, HASSAN, MD†

Provider ID: N/A

📍 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Effective as of 01-JAN-21

KAFRI, HASSAN, MD†

Provider ID: N/A

📍 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Effective as of 01-AUG-20

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

📍 1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-SEP-22

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

📍 1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-SEP-22

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

📍 1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-APR-21

NAGHI, JESSE, MD†

Provider ID: N/A

📍 1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020
Effective as of 01-AUG-21

NARAYANAN, MEENA, MD†

Provider ID: N/A

📍 1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-APR-21

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

NARAYANAN, MEENA, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-SEP-22

NISHIMURA-KAMINSKI, MARIN, MD

Provider ID: N/A

300 S PIERCE ST STE 102
EL CAJON, CA 92020

Teleservice

Effective as of 01-MAR-23

OMRAN, JAD, MD†

Provider ID: N/A

300 S PIERCE ST STE 102
EL CAJON, CA 92020

Teleservice

Effective as of 01-JAN-21

PARIKH, MILIND, DO†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-SEP-22

PATEL, PRASHANT, MD

Provider ID: N/A

1679 E MAIN ST
EL CAJON, CA 92021

Effective as of 01-JUL-24

PONCE, SONIA, MD†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-SEP-22

SARSAM, LUAY, MD

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-JUL-23

SHAH, KULIN, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-JAN-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-SEP-22

SHARF, ALBERT, MD

Provider ID: N/A

1679 E MAIN ST
EL CAJON, CA 92021

Effective as of 01-JUN-24

SHARF, ALBERT, MD

Provider ID: N/A

1240 BROADWAY STE 210
EL CAJON, CA 92021

Teleservice

Effective as of 01-JAN-24

SHARF, ALBERT, MD

Provider ID: N/A

230 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JAN-24

SHEREV, DIMITRI, MD†

Provider ID: N/A

1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020

Effective as of 01-AUG-21

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-JAN-23

YAU, STEPHEN, MD†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Teleservice

Effective as of 01-MAR-23

YAU, STEPHEN, MD†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Teleservice

Effective as of 01-AUG-22

ZAVARO, SUHAIL, MD†

Provider ID: N/A

300 S PIERCE ST STE 102
EL CAJON, CA 92020

Teleservice

Effective as of 01-JAN-21

CERTIFIED

ACUPUNCTURIST

LOPEZ, MARIA, LAC

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-JUL-24

LOPEZ, MARIA, LAC

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-JUN-24

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

SLOAN, ERICA, LAC

Provider ID: N/A

☒ 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-MAR-24

CERTIFIED NURSE PRACTITIONER

BRANNEN, MANDY, NP†

Provider ID: N/A

☒ 215 W MADISON AVE
EL CAJON, CA 92020*
Effective as of 01-JAN-21

CARDENAS, MIRIAM, NPF

Provider ID: N/A

☒ 1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-OCT-23

CHUDACEK, JANET, NP†

Provider ID: N/A

☒ 215 W MADISON AVE
EL CAJON, CA 92020*
Teleservice
Effective as of 01-JAN-21

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

☒ 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Teleservice
Effective as of 01-AUG-21

LUCKETT, DE COURCY, NP†

Provider ID: N/A

☒ 1580 N 2ND ST
EL CAJON, CA 92021
Effective as of 01-JAN-21

MANRIQUEZ, LISETTE, NPF

Provider ID: N/A

☒ 875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-MAY-24

MURRAY, CARLA, NP

Provider ID: N/A

☒ 855 E MADISON AVE
EL CAJON, CA 92020*
Effective as of 01-FEB-24

PIRTLE, KEYSHONE, NP†

Provider ID: N/A

☒ 5442 SYCUAN RD
EL CAJON, CA 92019
Effective as of 01-SEP-21

REAL, MARIA, NP

Provider ID: N/A

☒ 1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-OCT-23

REDDY, PRIYA, NP

Provider ID: N/A

☒ 1032 BROADWAY
EL CAJON, CA 92021
Effective as of 01-NOV-22

RENZAS, JENNIFER, NP

Provider ID: N/A

☒ 1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-JUL-21

RENZAS, JENNIFER, NP

Provider ID: N/A

☒ 165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-JUL-21

SHAW, MARILYNN, NP

Provider ID: N/A

☒ 300 S PIERCE ST STE 102
EL CAJON, CA 92020
Effective as of 01-MAY-23

SIRLEAF, MASSANU, NP†

Provider ID: N/A

☒ 1351 BROADWAY
EL CAJON, CA 92021
Effective as of 01-JAN-21

WILLIAMS, BREAHA, NP

Provider ID: N/A

☒ 165 S 1ST ST
EL CAJON, CA 92019
Effective as of 01-DEC-21

WILLIAMS, SHANTRICE, NP

Provider ID: N/A

☒ 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-FEB-23

WILLIAMS, BREAHA, NP

Provider ID: N/A

☒ 1032 BROADWAY
EL CAJON, CA 92021
Effective as of 01-DEC-21

YALDO, ATHMAR, NP†

Provider ID: N/A

☒ 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Teleservice
Effective as of 01-DEC-21

CERTIFIED REGISTERED NURSE MIDWIFE

HAMMOND, HEATHER, CRNM†

Provider ID: N/A

☒ 855 E MADISON AVE
EL CAJON, CA 92020*

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

Effective as of 01-JAN-24

CHIROPRACTOR

DORADO, SUE, DC

Provider ID: N/A

📄 165 S 1ST ST
EL CAJON, CA 92019

Teleservice

Effective as of 01-OCT-23

DORADO, SUE, DC

Provider ID: N/A

📄 1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-OCT-23

FULKS, ZACKARY, DC

Provider ID: N/A

📄 855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-MAY-23

HALEY, STEVEN, DC

Provider ID: N/A

📄 1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-OCT-23

HALEY, STEVEN, DC

Provider ID: N/A

📄 165 S 1ST ST
EL CAJON, CA 92019

Teleservice

Effective as of 01-OCT-23

MANSOUR, RASHAD, DC

Provider ID: N/A

📄 855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-MAR-23

MCCOWN, BARRY, DC

Provider ID: N/A

📄 855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-MAY-23

ZECHA, RONALD, DC

Provider ID: N/A

📄 855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-JUL-22

DERMATOLOGY

BARRIO, VICTORIA, MD

Provider ID: N/A

📄 222 W MADISON AVE
EL CAJON, CA 92020

Effective as of 01-APR-24

BARRIO, VICTORIA, MD

Provider ID: N/A

📄 292 AVOCADO AVE
EL CAJON, CA 92020

Teleservice

Effective as of 01-MAR-24

BROGAN, JACQUELINE, MD†

Provider ID: N/A

📄 292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JUL-22

BROGAN, JACQUELINE, MD†

Provider ID: N/A

📄 292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-OCT-21

CELANO, NICHOLAS, MD†

Provider ID: N/A

📄 292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JAN-21

CELANO, NICHOLAS, MD†

Provider ID: N/A

📄 292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JAN-21

CELANO, NICHOLAS, MD†

Provider ID: N/A

📄 292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JUL-24

CELANO, NICHOLAS, MD

Provider ID: N/A

📄 222 W MADISON AVE
EL CAJON, CA 92020

Effective as of 01-APR-24

CHIANG, JENNIFER, MD

Provider ID: N/A

📄 222 W MADISON AVE
EL CAJON, CA 92020

Effective as of 01-APR-24

CHIANG, JENNIFER, MD

Provider ID: N/A

📄 222 W MADISON AVE
EL CAJON, CA 92020

Effective as of 01-APR-24

CHIANG, JENNIFER, MD†

Provider ID: N/A

📄 292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JAN-21

CHIANG, JENNIFER, MD†

Provider ID: N/A

📄 292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JAN-21

CHIANG, JENNIFER, MD†

Provider ID: N/A

📄 292 AVOCADO AVE
EL CAJON, CA 92020

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

Effective as of 01-MAR-18

GONZALEZ, JOSE, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Teleservice

Effective as of 01-MAY-23

GONZALEZ, JOSE, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Teleservice

Effective as of 01-AUG-22

GORDON, JUSTIN, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-APR-22

GORDON, JUSTIN, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-AUG-22

HANSEN, DOYLE, MD†

Provider ID: N/A

1679 E MAIN ST STE 208
EL CAJON, CA 92021†

Effective as of 01-JAN-14

KASSAB, GHADA, MD

Provider ID: N/A

624 EL CAJON BLVD
EL CAJON, CA 92020

Effective as of 01-MAR-23

KASSAB, GHADA, MD

Provider ID: N/A

624 EL CAJON BLVD
EL CAJON, CA 92020

Effective as of 01-JUL-23

LIN, SHINKO, MD

Provider ID: N/A

222 W MADISON AVE
EL CAJON, CA 92020

Effective as of 01-APR-24

LIN, SHINKO, MD

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Teleservice

Effective as of 01-MAR-24

LIN, SHINKO, MD

Provider ID: N/A

222 W MADISON AVE
EL CAJON, CA 92020

Effective as of 01-APR-24

SATEESH, BROOKE, MD

Provider ID: N/A

222 W MADISON AVE
EL CAJON, CA 92020

Effective as of 01-APR-24

SATEESH, BROOKE, MD

Provider ID: N/A

222 W MADISON AVE
EL CAJON, CA 92020

Effective as of 01-APR-24

SATEESH, BROOKE, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JAN-21

SATEESH, BROOKE, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-MAR-16

TYAGI, ABHILASHA, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-APR-22

TYAGI, ABHILASHA, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-AUG-22

TYAGI, ABHILASHA, MD

Provider ID: N/A

222 W MADISON AVE
EL CAJON, CA 92020

Effective as of 01-APR-24

UEBELHOER, NATHAN, DO

Provider ID: N/A

222 W MADISON AVE
EL CAJON, CA 92020

Effective as of 01-APR-24

UEBELHOER, NATHAN, DO†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-FEB-22

EMERGENCY MEDICINE

YAU, STEPHEN, MD†

Provider ID: N/A

328 HIGHLAND AVE STE
200

EL CAJON, CA 92020

Teleservice

Effective as of 01-APR-23

FAMILY PRACTICE

GHAFARI, DAUOD, MD

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020

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

Effective as of 01-JUL-24

PATEL, RAKESH, MD

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-AUG-24

SHAFT, ALEXANDER, MD†

Provider ID: N/A

📍 463 N MAGNOLIA AVE
EL CAJON, CA 92020
Teleservice

Effective as of 01-FEB-23

SHAFT, ALEXANDER, MD†

Provider ID: N/A

📍 463 N MAGNOLIA AVE
EL CAJON, CA 92020
Teleservice

Effective as of 01-OCT-21

THIERMANN, PAIGE, MD

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-MAY-24

GASTROENTEROLOGY

CUBAS, IVAN, MD†

Provider ID: N/A

📍 2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JUL-18

DESTA, TADDESE, MD†

Provider ID: N/A

📍 2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JUL-18

DESTA, TADDESE, MD†

Provider ID: N/A

📍 2732 NAVAJO RD STE 200

EL CAJON, CA 92020

Effective as of 01-APR-24

HASSANEIN, TAREK, MD†

Provider ID: N/A

📍 463 N MAGNOLIA AVE
EL CAJON, CA 92020
Teleservice

Effective as of 01-SEP-22

HASSANEIN, TAREK, MD†

Provider ID: N/A

📍 463 N MAGNOLIA AVE
EL CAJON, CA 92020
Teleservice

Effective as of 01-MAR-18

HASSANEIN, TAREK, MD†

Provider ID: N/A

📍 463 N MAGNOLIA AVE STE
A
EL CAJON, CA 92020

Effective as of 01-DEC-20

HASSANEIN, TAREK, MD†

Provider ID: N/A

📍 463 N MAGNOLIA AVE
EL CAJON, CA 92020
Teleservice

Effective as of 01-FEB-21

NOVO, MEGAN, MD

Provider ID: N/A

📍 2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-MAY-23

NOVO, MEGAN, MD

Provider ID: N/A

📍 2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JAN-23

SCHAEFFER, CYNTHIA, MD†

Provider ID: N/A

📍 2732 NAVAJO RD STE 200

EL CAJON, CA 92020

Effective as of 01-JUL-18

SHAFFER, KATHERINE, MD†

Provider ID: N/A

📍 2732 NAVAJO RD STE 201
EL CAJON, CA 92020
Effective as of 01-JAN-21

THOMAS, CARLTON, MD†

Provider ID: N/A

📍 2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JUL-18

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE, MA†

Provider ID: N/A

📍 1767 E MAIN ST
EL CAJON, CA 92021
Effective as of 01-SEP-22

DANDURAND, JOHN, MA†

Provider ID: N/A

📍 1767 E MAIN ST
EL CAJON, CA 92021
Teleservice

Effective as of 01-JAN-21

DAVIS, KELLE, MA†

Provider ID: N/A

📍 1767 E MAIN ST
EL CAJON, CA 92021
Effective as of 01-JAN-21

DAVIS, KELLE, MA†

Provider ID: N/A

📍 1767 E MAIN ST
EL CAJON, CA 92021
Effective as of 01-SEP-22

INTERNAL MEDICINE

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

AWDISHO, ALAN, DO†

Provider ID: N/A

☒ 875 EL CAJON BLVD
EL CAJON, CA 92020

Teleservice

Effective as of 01-SEP-22

MAY, LOUIS, MD†

Provider ID: N/A

☒ 875 EL CAJON BLVD
EL CAJON, CA 92020

Effective as of 01-DEC-22

MICHAEL, RAMI, MD†

Provider ID: N/A

☒ 875 EL CAJON BLVD
EL CAJON, CA 92020

Teleservice

Effective as of 01-NOV-22

OLIVER, DEANNA, MD†

Provider ID: N/A

☒ 463 N MAGNOLIA AVE
EL CAJON, CA 92020*

Effective as of 01-OCT-22

OLIVER, DEANNA, MD†

Provider ID: N/A

☒ 463 N MAGNOLIA AVE
EL CAJON, CA 92020

Effective as of 01-MAR-21

INTERVENTIONAL CARDIOLOGY

BARVALIA, MIHIR, MD†

Provider ID: N/A

☒ 1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020

Teleservice

Effective as of 01-JAN-24

BARVALIA, MIHIR, MD†

Provider ID: N/A

☒ 1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020

Teleservice

Effective as of 01-NOV-22

JOHN, ALAN, MD

Provider ID: N/A

☒ 1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-MAY-23

KAFRI, HASSAN, MD†

Provider ID: N/A

☒ 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-SEP-22

KAFRI, HASSAN, MD†

Provider ID: N/A

☒ 875 EL CAJON BLVD
EL CAJON, CA 92020

Effective as of 01-JUL-22

KAFRI, HASSAN, MD†

Provider ID: N/A

☒ 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-JAN-21

KAFRI, HASSAN, MD†

Provider ID: N/A

☒ 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-JAN-19

NAGHI, JESSE, MD†

Provider ID: N/A

☒ 1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020

Effective as of 01-JAN-24

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

☒ 1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-DEC-22

SHAH, KULIN, MD†

Provider ID: N/A

☒ 1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-APR-23

SHEREV, DIMITRI, MD

Provider ID: N/A

☒ 1380 EL CAJON BLVD
EL CAJON, CA 92020

Effective as of 01-JAN-24

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

☒ 1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-APR-23

LICENSED CLINICAL SOCIAL WORKER

FRAGOSO, DOMINIQUE, LCSW

Provider ID: N/A

☒ 215 W MADISON AVE
EL CAJON, CA 92020*

Effective as of 01-JAN-24

MANUEL, FRANCESCA, LCSW

Provider ID: N/A

☒ 215 W MADISON AVE
EL CAJON, CA 92020

Effective as of 01-FEB-23

TAYAG, DYLAN, LCSW†

Provider ID: N/A

☒ 875 EL CAJON BLVD
EL CAJON, CA 92020

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

Effective as of 01-SEP-22

TAYLOR, MISTY, LCSW

Provider ID: N/A

📍 5442 SYCUAN RD
EL CAJON, CA 92019
Effective as of 01-FEB-24

WELSH, BRITT, LCSW†

Provider ID: N/A

📍 875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-FEB-21

MARRIAGE FAMILY THERAPIST

ARNOLD, REBECCA, MFT

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JUN-24

ARNOLD, REBECCA, MFT

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-FEB-24

ESTAVILLO, SAUL, MFT

Provider ID: N/A

📍 875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-AUG-23

OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER, MD

Provider ID: N/A

📍 165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-OCT-23

AL-MSHHDANI, AYSER, MD

Provider ID: N/A

📍 1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-OCT-23

BULLOCH, EDGAR, MD†

Provider ID: N/A

📍 133 W MAIN ST STE 100
EL CAJON, CA 92020
Effective as of 01-JUN-22

DAVIS, TRACIE, MD

Provider ID: N/A

📍 165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-OCT-23

DAVIS, TRACIE, MD

Provider ID: N/A

📍 1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-OCT-23

FOLCH TORRES-AGUIAR, BEATRIZ, MD†

Provider ID: N/A

📍 1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-AUG-22

FOLCH TORRES-AGUIAR, BEATRIZ, MD†

Provider ID: N/A

📍 165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-AUG-22

GELLENS, ANDREW, MD†

Provider ID: N/A

📍 165 S 1ST ST
EL CAJON, CA 92019
Teleservice

Effective as of 01-NOV-21

GELLENS, ANDREW, MD†

Provider ID: N/A

📍 1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-NOV-21

MELLENDEZ BERRIOS, IARA, MD

Provider ID: N/A

📍 181 REA AVE
EL CAJON, CA 92020
Teleservice
Effective as of 01-AUG-24

TAJРАН, DEENA, MD†

Provider ID: N/A

📍 291 E LEXINGTON AVE STE
AC
EL CAJON, CA 92020
Effective as of 01-JAN-21

OPHTHALMOLOGY

ABDALLAH, WALID, MD

Provider ID: N/A

📍 231 W MAIN ST
EL CAJON, CA 92020
Effective as of 01-FEB-24

BINDER, NICHOLAS, MD


Provider ID: N/A

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-FEB-24

BINDER, NICHOLAS, MD


Provider ID: N/A

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

 300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-DEC-23


BINDER, NICHOLAS, MD

Provider ID: N/A

 300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-NOV-23

BINDER, NICHOLAS, MD

Provider ID: N/A

 450 FLETCHER PKWY STE
112
EL CAJON, CA 92020
Effective as of 01-NOV-23


BOECKMANN, JESSICA, MD†

Provider ID: N/A

 450 FLETCHER PKWY
EL CAJON, CA 92020
Effective as of 01-JAN-21


HSU, CHRISTOPHER, MD

Provider ID: N/A

 450 FLETCHER PKWY STE
112
EL CAJON, CA 92020
Effective as of 01-NOV-23


HSU, CHRISTOPHER, MD†

Provider ID: N/A

 225 W MADISON AVE STE 1
EL CAJON, CA 92020
Effective as of 01-SEP-22

MANI, NASRIN, MD†

Provider ID: N/A

 875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-AUG-24

MCDONNELL, EMMA, MD†


Provider ID: N/A

 231 W MAIN ST

EL CAJON, CA 92020
Effective as of 01-NOV-22


PATEL, GITANE, MD

Provider ID: N/A

 450 FLETCHER PKWY STE
112
EL CAJON, CA 92020
Effective as of 01-NOV-23


PATEL, SARJAN, MD†

Provider ID: N/A

 450 FLETCHER PKWY STE
112
EL CAJON, CA 92020
Effective as of 01-DEC-23


PATEL, GITANE, MD

Provider ID: N/A

 300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-DEC-23


PATEL, SARJAN, MD

Provider ID: N/A

 300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-DEC-23


PATEL, SARJAN, MD

Provider ID: N/A

 300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-JAN-24

PATEL, GITANE, MD

Provider ID: N/A

 300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-JAN-24

PONS, MAURICIO, MD†


Provider ID: N/A

 875 EL CAJON BLVD
EL CAJON, CA 92020

Effective as of 01-JUL-22


PONS, MAURICIO, MD†

Provider ID: N/A

 231 W MAIN ST
EL CAJON, CA 92020
Effective as of 01-AUG-22


PRABHU, SUJATA, MD

Provider ID: N/A

 450 FLETCHER PKWY STE
112
EL CAJON, CA 92020
Effective as of 01-NOV-23


SKAF, AYHAM, MD†

Provider ID: N/A

 875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-JUL-22


ZHAO, TAILUN, MD

Provider ID: N/A

 300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-JAN-24


ZHAO, TAILUN, MD

Provider ID: N/A

 450 FLETCHER PKWY STE
112
EL CAJON, CA 92020
Effective as of 01-NOV-23


ZHAO, TAILUN, MD

Provider ID: N/A

 300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-NOV-23

ZHAO, TAILUN, MD

Provider ID: N/A

 450 FLETCHER PKWY STE
112
EL CAJON, CA 92020

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

Effective as of 01-MAY-24

OPTOMETRIST

AOTO, KIM, OD†

Provider ID: N/A

450 FLETCHER PKWY STE 112
EL CAJON, CA 92020

Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A

450 FLETCHER PKWY STE 112
EL CAJON, CA 92020

Effective as of 01-DEC-23

DYER, SHARON, OD†

Provider ID: N/A

225 W MADISON AVE STE 1
EL CAJON, CA 92020

Effective as of 01-SEP-22

HAN, SUL KI, OD†

Provider ID: N/A

450 FLETCHER PKWY STE 112
EL CAJON, CA 92020

Effective as of 01-DEC-23

KHALIL, VADY, OD†

Provider ID: N/A

450 FLETCHER PKWY STE 112
EL CAJON, CA 92020

Effective as of 01-DEC-23

KHALIL, VADY, OD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-DEC-23

KOO, ANITA, OD

Provider ID: N/A

231 W MAIN ST
EL CAJON, CA 92020

Effective as of 01-FEB-24

KOO, ANITA, OD

Provider ID: N/A

231 W MAIN ST
EL CAJON, CA 92020

Effective as of 01-JAN-24

KOO, ANITA, OD

Provider ID: N/A

231 W MAIN ST
EL CAJON, CA 92020

Effective as of 01-JUN-24

ZVANUT, DONALD, OD†

Provider ID: N/A

225 W MADISON AVE STE 1
EL CAJON, CA 92020

Effective as of 01-SEP-22

ZVANUT, DONALD, OD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-DEC-23

PHYSICIANS ASSISTANT

ALYAS, ALISIA, PA

Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-JUN-21

ALYAS, ALISIA, PA

Provider ID: N/A

165 S 1ST ST
EL CAJON, CA 92019

Teleservice

Effective as of 01-JUN-21

HABBOUSH, RANA, PA

Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-OCT-23

INDA, PRISCILLA, PA†

Provider ID: N/A

328 HIGHLAND AVE STE 200
EL CAJON, CA 92020

Effective as of 01-JAN-21

INDA, PRISCILLA, PA†

Provider ID: N/A

328 HIGHLAND AVE STE 200
EL CAJON, CA 92020

Effective as of 01-JAN-21

INDA, PRISCILLA, PA†

Provider ID: N/A

328 HIGHLAND AVE STE 200
EL CAJON, CA 92020

Effective as of 01-JAN-21

MERCER, KELLY, PA†

Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-APR-21

MERCER, KELLY, PA†

Provider ID: N/A

165 S 1ST ST
EL CAJON, CA 92019

Teleservice

Effective as of 01-APR-21

ROSENBLATT, SHERILYN, PA

Provider ID: N/A

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

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-JUN-23

RYAN, TYLER, PA†

Provider ID: N/A

463 N MAGNOLIA AVE STE
B
EL CAJON, CA 92020
Effective as of 01-DEC-22

PSYCHIATRY

KURZ, TROY, MD†

Provider ID: N/A

133 W MAIN ST STE 100
EL CAJON, CA 92020
Effective as of 01-OCT-22

KURZ, TROY, MD†

Provider ID: N/A

133 W MAIN ST STE 100
EL CAJON, CA 92020
Effective as of 01-OCT-22

MATIALEU, LEOPOLDINE, MD

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-DEC-22

MATIALEU, LEOPOLDINE, MD

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-DEC-22

MATIALEU, LEOPOLDINE, MD

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-DEC-22

MATIALEU, LEOPOLDINE, MD

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-DEC-22

POSTLETHWAITE, ALEJANDRA, MD†

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020*
Effective as of 01-JAN-24

POSTLETHWAITE, ALEJANDRA, MD†

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020*
Effective as of 01-JAN-24

SADDA, REEM, MD

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-MAR-24

SADDA, REEM, MD

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-MAR-24

PSYCHOLOGIST

ARAIZA, ERNESTINA, PSYD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-AUG-21

ARAIZA, ERNESTINA, PSYD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-AUG-21

RADIOLOGY DIAGNOSTIC

MOSHFEGH, AMIEL, MD†

Provider ID: N/A

463 N MAGNOLIA AVE STE
B
EL CAJON, CA 92020
Effective as of 01-SEP-22

REGISTERED PHYSICAL THERAPIST

DASCENZO, EMILY, PT†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Teleservice
Effective as of 01-JUL-22

LONG, RYAN, PT

Provider ID: N/A

181 JAMACHA RD
EL CAJON, CA 92019*
Effective as of 01-JUL-22

SURGERY ORTHOPEDIC

NOURI, LABEED, MD

Provider ID: N/A

330 S MAGNOLIA AVE STE
302
EL CAJON, CA 92020
Effective as of 01-JAN-21

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE B301
ENCINITAS, CA 92024
Effective as of 01-DEC-20

CARDIAC

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

ELECTROPHYSIOLOGY

HAMZEI, ALI, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024

Effective as of 01-JAN-21

WHITWAM, WAYNE, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024

Effective as of 01-AUG-22

CARDIOVASCULAR DISEASE

AVALOS, ROY, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024

Effective as of 01-JAN-21

BACKMAN, JOHN, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024

Effective as of 01-JAN-21

BULIBEK, BATYRJAN, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024

Effective as of 01-JAN-21

CARTER, STEPHANIE, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
204
ENCINITAS, CA 92024

Teleservice

Effective as of 01-SEP-21

CARTER, STEPHANIE, MD†

Provider ID: N/A

354 SANTA FE DR
ENCINITAS, CA 92024

Effective as of 01-JUN-21

CARTER, STEPHANIE, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
204
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-21

HARRINGTON, JOHN, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
204
ENCINITAS, CA 92024

Effective as of 01-MAR-22

HARRINGTON, JOHN, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
204
ENCINITAS, CA 92024

Effective as of 01-MAR-22

JACOBY, RICHARD, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
204
ENCINITAS, CA 92024

Effective as of 01-JAN-21

KULHANEK, JAN, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024

Effective as of 01-JAN-21

MCGINTY, PATRICK, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024

Effective as of 01-JAN-21

MEHBOOB, SALMAN, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
204
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-21

RASCH, DAMIAN, DO†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024

Effective as of 01-JAN-21

SAB, SHIV, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-22

SAB, SHIV, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024

Teleservice

Effective as of 01-DEC-22

SHEREV, DIMITRI, MD

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Effective as of 01-SEP-23

CERTIFIED

ACUPUNCTURIST

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-FEB-24

GONZALEZ, ANDRES, LAC

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

Provider ID: N/A

📍 1130 2ND ST
ENCINITAS, CA 92024
Effective as of 01-MAY-23

JULIAN, FIDES, LAC

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-FEB-24

MURRAY, STEVEN, LAC†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-AUG-21

TANG-RITCHIE, LENG, LAC†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-21

YOO, HEATHER, LAC

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE C204
ENCINITAS, CA 92024
Effective as of 01-APR-24

CERTIFIED NURSE PRACTITIONER

BINAVI, HOWNAZ, NP†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-SEP-22

CARDINELL, ANNA, NP†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-AUG-22

CHAMBERS, KATRINA, NP

Provider ID: N/A

📍 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-23

DWYER, ERIN, NP

Provider ID: N/A

📍 320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-JAN-24

FAIQ, JAMILA, NP†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE D200
ENCINITAS, CA 92024
Effective as of 01-JAN-21

FAIQ, JAMILA, NP†

Provider ID: N/A

📍 326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice

Effective as of 01-NOV-22

HERR, COLLEEN, NP

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024
Effective as of 01-JAN-21

HOOPER, BONNIE, NP†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-JAN-21

HOOPER, BONNIE, NP†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-JAN-21

KORMANIK, PATRICIA, NP†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUL-21

LOWE, ASHLEY, NP

Provider ID: N/A

📍 320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Teleservice

Effective as of 01-JUL-23

LOWE, ASHLEY, NP

Provider ID: N/A

📍 320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Teleservice

Effective as of 01-MAY-24

MOONEY, PATRICIA, NP†

Provider ID: N/A

📍 326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice

Effective as of 01-JAN-24

MOONEY, PATRICIA, NP†

Provider ID: N/A

📍 326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice

Effective as of 01-MAY-21

MOORE, HEATHER, NP

Provider ID: N/A

📍 477 N EL CAMINO REAL

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

STE A100
ENCINITAS, CA 92024
Effective as of 01-APR-24

MORENO, KATHERINE, NP

Provider ID: N/A
700 GARDEN VIEW CT STE
204
ENCINITAS, CA 92024
Teleservice
Effective as of 01-DEC-23

MWAURA, WAIRIMU, NP†

Provider ID: N/A
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUN-21

MWAURA, WAIRIMU, NP†

Provider ID: N/A
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

MYERS, JESSE, NP

Provider ID: N/A
477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024
Effective as of 01-JAN-21

NIZHEBORSKY, OKSANA, NP†

Provider ID: N/A
320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

PACHOE, MADISON, NP

Provider ID: N/A
477 N EL CAMINO REAL
STE A200
ENCINITAS, CA 92024
Teleservice

Effective as of 01-DEC-21

POLIZZI, BRITTANY, NP†

Provider ID: N/A
477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-SEP-22

POLIZZI, BRITTANY, NP†

Provider ID: N/A
477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-JAN-22

POVOLI, LAUREN, NPF

Provider ID: N/A
477 N EL CAMINO REAL
STE A100
ENCINITAS, CA 92024
Effective as of 01-APR-24

SRILASAK, MICHELE, NP†

Provider ID: N/A
1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUL-21

STUBBE, AMANDA, NPF

Provider ID: N/A
477 N EL CAMINO REAL
STE A100
ENCINITAS, CA 92024
Effective as of 01-APR-24

SYMANSKI, ELIZABETH, NP†

Provider ID: N/A
477 N EL CAMINO REAL
STE A200
ENCINITAS, CA 92024
Effective as of 01-AUG-22

TOMICICH, STEPHANIE, NP†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-DEC-21

WALLA, MEGAN, NPF

Provider ID: N/A
477 N EL CAMINO REAL
STE A100
ENCINITAS, CA 92024
Effective as of 01-APR-24

WILLEY, MARTI, NP†

Provider ID: N/A
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUN-21

WILLEY, MARTI, NP†

Provider ID: N/A
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

WOODRUFF, WHITNEY, NP

Provider ID: N/A
700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-JAN-21

WOODRUFF, WHITNEY, NP

Provider ID: N/A
781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-MAR-23

WOODRUFF, WHITNEY, NP

Provider ID: N/A
781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024

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

Effective as of 01-MAR-23

YEO, ALEXANDRIA, NP

Provider ID: N/A

📍 1505 ENCINITAS BLVD
ENCINITAS, CA 92024

Effective as of 01-JUN-23

CERTIFIED REGISTERED NURSE ANESTHETIST

ASHMAN, RANDY, CRNA

Provider ID: N/A

📍 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUL-23

ESTABROOK, LARA, CRNA

Provider ID: N/A

📍 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Effective as of 01-JUL-23

ESTABROOK, LARA, CRNA

Provider ID: N/A

📍 320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-JUL-23

FITZPATRICK, APRIL, CRNA

Provider ID: N/A

📍 781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024

Effective as of 01-MAR-23

FITZPATRICK, APRIL, CRNA

Provider ID: N/A

📍 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Effective as of 01-MAR-23

KING, APRIL, CRNA†

Provider ID: N/A

📍 700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024

Effective as of 01-JAN-21

KING, APRIL, CRNA

Provider ID: N/A

📍 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Effective as of 01-MAR-23

KING, APRIL, CRNA

Provider ID: N/A

📍 781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024

Effective as of 01-MAR-23

LAZARUS, ELIZABETH, CRNA

Provider ID: N/A

📍 781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024

Effective as of 01-JUL-23

CERTIFIED REGISTERED NURSE MIDWIFE

CORRY, ANDREA, CRNM

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-SEP-23

ELY-KONOSKE, RACHEL, CRNM

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-23

CHIROPRACTOR

TRAINER, JASON, DC

Provider ID: N/A

📍 1130 2ND ST
ENCINITAS, CA 92024

Effective as of 01-MAR-24

DERMATOLOGY

ANGRA, KUNAL, MD†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUL-21

BRAUN, TARA, MD

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-24

BROUHA, BROOK, MD

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-NOV-23

BROUHA, BROOK, MD

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-JAN-24

GLADSJO, JULIE, MD†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

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

Effective as of 01-JAN-21

GLADSSJO, JULIE, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-SEP-22

GLADSSJO, JULIE, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-SEP-22

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

285 N EL CAMINO REAL
STE 117
ENCINITAS, CA 92024

Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

285 N EL CAMINO REAL
STE 117
ENCINITAS, CA 92024

Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

285 N EL CAMINO REAL
STE 117
ENCINITAS, CA 92024

Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

285 N EL CAMINO REAL
STE 117
ENCINITAS, CA 92024

Effective as of 01-JAN-24

HEMPERLY, STEPHEN, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Teleservice

Effective as of 01-NOV-23

HEMPERLY, STEPHEN, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-21

KRISHNA, SHEILA, MD

Provider ID: N/A

345 SAXONY RD STE 201
ENCINITAS, CA 92024

Effective as of 01-JUL-24

RILEY, JESSICA, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-SEP-22

RILEY, JESSICA, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-JAN-21

RILEY, JESSICA, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-AUG-20

TOMPKINS, STACY, MD

Provider ID: N/A

477 N EL CAMINO REAL

ENCINITAS, CA 92024

Effective as of 01-JUN-24

TOMPKINS, STACY, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024

Effective as of 01-MAY-19

ENDOCRINOLOGY

METABOLISM DIABETES

HUPFELD, CHRISTOPHER, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 100

ENCINITAS, CA 92024

Effective as of 01-MAR-21

SHAH, NANDI, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-JAN-24

FAMILY PRACTICE

ANDERSON, LINDSEY, DO†

Provider ID: N/A

1505 ENCINITAS BLVD
ENCINITAS, CA 92024

Effective as of 01-AUG-23

ESTRADA, JOHANNA, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE
220

ENCINITAS, CA 92024*


Effective as of 01-AUG-21

GASTROENTEROLOGY


ALHANKAWI, DHUHA, MD

Provider ID: N/A


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

 477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024
Effective as of 01-AUG-23


ALHANKAWI, DHUHA, MD
Provider ID: N/A

 477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024
Effective as of 01-APR-23


BORTNIKER, ETHAN, MD
Provider ID: N/A

 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-DEC-23


BORTNIKER, ETHAN, MD
Provider ID: N/A

 781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-JUN-23


BORTNIKER, ETHAN, MD
Provider ID: N/A

 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-JUN-23

BORTNIKER, ETHAN, MD
Provider ID: N/A

 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-MAR-24


BORTNIKER, ETHAN, MD
Provider ID: N/A

 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Effective as of 01-JUN-23

DILAURO, STEVEN, MD

Provider ID: N/A


 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-23

DILAURO, STEVEN, MD

Provider ID: N/A


 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-23

DILAURO, STEVEN, MD

Provider ID: N/A


 781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-23

DILAURO, STEVEN, MD

Provider ID: N/A


 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAY-24

DILAURO, STEVEN, MD

Provider ID: N/A


 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-OCT-23

DILAURO, STEVEN, MD

Provider ID: N/A


 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-24

GOLDKLANG, ROBERT, MD


Provider ID: N/A

 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Effective as of 01-JAN-24

GOLDKLANG, ROBERT, MD†


Provider ID: N/A

 700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024

Effective as of 01-JAN-21

GOLDKLANG, ROBERT, MD


Provider ID: N/A

 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Effective as of 01-MAY-24

GOLDKLANG, ROBERT, MD


Provider ID: N/A

 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Effective as of 01-OCT-23

GOLDKLANG, ROBERT, MD


Provider ID: N/A

 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Effective as of 01-MAR-23

GOLDKLANG, ROBERT, MD

Provider ID: N/A

 781 GARDEN VIEW CT STE
102

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

ENCINITAS, CA 92024
Effective as of 01-MAR-23

GOLDKLANG, ROBERT, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
102

ENCINITAS, CA 92024
Effective as of 01-APR-23

LAJOIE, ADRIANNE, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
102

ENCINITAS, CA 92024
Effective as of 01-MAR-23

LAJOIE, ADRIANNE, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024
Effective as of 01-MAR-23

LAJOIE, ADRIANNE, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024
Effective as of 01-JUN-23

LAJOIE, ADRIANNE, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024
Effective as of 01-OCT-23

LAJOIE, ADRIANNE, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
102

ENCINITAS, CA 92024
Effective as of 01-JAN-21

LAJOIE, ADRIANNE, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024
Effective as of 01-JAN-24

MADANI, BAHAR, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE A308

ENCINITAS, CA 92024
Effective as of 01-FEB-22

PATEL, JANKI, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024
Effective as of 01-FEB-24

PATEL, JANKI, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
102

ENCINITAS, CA 92024
Teleservice

Effective as of 01-JAN-21

PATEL, JANKI, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
102

ENCINITAS, CA 92024
Teleservice

Effective as of 01-JAN-21

PATEL, JANKI, MD

Provider ID: N/A

700 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024
Teleservice

Effective as of 01-JUN-23

PATEL, JANKI, MD

Provider ID: N/A

354 SANTA FE DR
ENCINITAS, CA 92024

Effective as of 01-FEB-24

PATEL, JANKI, MD

Provider ID: N/A

700 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024
Teleservice

Effective as of 01-MAR-23

PATEL, JANKI, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024
Effective as of 01-MAR-24

SINGH, MARVIN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024
Effective as of 01-JUN-23

SINGH, MARVIN, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
102

ENCINITAS, CA 92024
Effective as of 01-APR-18

GENERAL DENTISTRY

MEHROTRA, SACHI, DDS

Provider ID: N/A

4403 MANCHESTER AVE
STE 101

ENCINITAS, CA 92024
Effective as of 01-OCT-21

GYNECOLOGIC

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

ONCOLOGY

ESKANDER, RAMEZ, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUL-21

HEMATOLOGY / ONCOLOGY

BESSUDO, ALBERTO, MD†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-APR-21

BESSUDO, ALBERTO, MD†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-21

SULLIVAN, JESSICA, DO†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

HOSPICE AND PALLIATIVE MEDICINE

RUBENSIK, TAMARA, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 100
ENCINITAS, CA 92024
Effective as of 01-FEB-21

RUBENSIK, TAMARA, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUL-21

INTERNAL MEDICINE

BAUTISTA, JENNIFER, MD†

Provider ID: N/A

320 SANTA FE DR STE
107-C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

BAUTISTA, JENNIFER, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-DEC-20

DELANEY, CODY, DO†

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Teleservice
Effective as of 01-OCT-22

EISMAN, SCOTT, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-FEB-22

ELHOFY, ASHRAF, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Effective as of 01-JAN-21

ELLIS, ADAM, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE

220

ENCINITAS, CA 92024*
Effective as of 01-JAN-21

KHAYYAT, OMAR, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Effective as of 01-AUG-21

LIU, STEVEN, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Effective as of 01-JAN-21

LIU, ANDREW, MD

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Effective as of 01-SEP-23

MCMURRAY, SARAH, DO†

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Effective as of 01-JAN-21

MOOLANI, UJJALA, MD

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Effective as of 01-MAY-23

NARDI, MELISSA, DO†

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Effective as of 01-JAN-21

NELKIN, CORY, DO†

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

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*

Teleservice

Effective as of 01-OCT-21

NGUYEN, ANDY, DO[†]

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*

Effective as of 01-JAN-21

NGUYEN, ALEXIE, MD[†]

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024

Effective as of 01-JAN-21

PHAM, STEVEN, MD[†]

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*

Teleservice

Effective as of 01-NOV-21

RUMMANI, BENNY, DO[†]

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*

Effective as of 01-JUL-21

STEADMAN, MICHAEL, MD[†]

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*

Effective as of 01-JAN-21

TRAN, AMY, MD[†]

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*

Effective as of 01-JAN-21

TRAN, SHERI, MD[†]

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-APR-21

TRING, ELEANOR, DO[†]

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*

Effective as of 01-JUL-21

INTERNAL MEDICINE CRITICAL CARE MEDICINE

FUSSELL, KEVIN, MD[†]

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-JUL-21

PINO, ALEJANDRO, MD[†]

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-JUL-21

SHIN, STEPHANIE, MD[†]

Provider ID: N/A

320 SANTA FE DR STE
107-C
ENCINITAS, CA 92024

Effective as of 01-JAN-21

TRAN, SHERI, MD[†]

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024

Effective as of 01-JAN-21

ZHANG, MICHELLE, MD[†]

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAY-22

INTERVENTIONAL CARDIOLOGY

BHATIA, PRERANA, MD

Provider ID: N/A

477 N EL CAMINO REAL
ENCINITAS, CA 92024

Effective as of 01-AUG-23

JACOBY, RICHARD, MD[†]

Provider ID: N/A

700 GARDEN VIEW CT STE
204
ENCINITAS, CA 92024

Effective as of 01-SEP-21

MEHBOOB, SALMAN, MD[†]

Provider ID: N/A

700 GARDEN VIEW CT STE
204
ENCINITAS, CA 92024

Teleservice

Effective as of 01-SEP-21

WHITWAM, WAYNE, MD[†]

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024

Effective as of 01-NOV-20

LICENSED CLINICAL SOCIAL WORKER

REBELO, MARCIA, LCSW

Provider ID: N/A

187 CALLE MAGDALENA

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

STE 212
ENCINITAS, CA 92024
Effective as of 01-OCT-23

MEDICAL ONCOLOGY

FLORES, EDNA, MD†

Provider ID: N/A
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Effective as of 01-JAN-21

FRAKES, LAURIE, MD†

Provider ID: N/A
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-21

FRAKES, LAURIE, MD†

Provider ID: N/A
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

MCCLAY, EDWARD, MD†

Provider ID: N/A
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Effective as of 01-FEB-21

MCCLAY, EDWARD, MD†

Provider ID: N/A
477 N EL CAMINO REAL
STE D200
ENCINITAS, CA 92024
Effective as of 01-JAN-21

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A
320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Effective as of 01-MAY-23

LAKHERA, YOGITA, MD†

Provider ID: N/A
320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

LAKHERA, YOGITA, MD†

Provider ID: N/A
320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUL-22

LAKHERA, YOGITA, MD†

Provider ID: N/A
320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAR-17

LAKHERA, YOGITA, MD†

Provider ID: N/A
320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Teleservice
Effective as of 01-AUG-24

LAKHERA, YOGITA, MD†

Provider ID: N/A
320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-21

STEER, DYLAN, MD†

Provider ID: N/A
320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Effective as of 01-JAN-21

NEUROLOGY

BAKER, DAVID, DO

Provider ID: N/A
354 SANTA FE DR
ENCINITAS, CA 92024
Effective as of 01-JAN-24

SCHORR, EMILY, MD

Provider ID: N/A
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-MAR-24

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA, MD†

Provider ID: N/A
1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUL-21

DELCORE, LAURA, MD†

Provider ID: N/A
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A
781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024
Effective as of 01-SEP-22

DRIEBE, AMY, MD†

Provider ID: N/A
1505 ENCINITAS BLVD

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

ENCINITAS, CA 92024
Effective as of 01-SEP-22

HILL, KAITLYN, MD†

Provider ID: N/A
477 N EL CAMINO REAL
STE C208
ENCINITAS, CA 92024
Teleservice
Effective as of 01-SEP-21

HILL, KAITLYN, MD†

Provider ID: N/A
477 N EL CAMINO REAL
STE C208
ENCINITAS, CA 92024
Teleservice
Effective as of 01-APR-23

MACKAY, GILLIAN, MD

Provider ID: N/A
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

SPRING-ROBINSON, CHANDRA, DO

Provider ID: N/A
477 N EL CAMINO REAL
STE C208
ENCINITAS, CA 92024
Effective as of 01-JAN-23

OPHTHALMOLOGY

FISH, STEVEN, MD

Provider ID: N/A
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-APR-23

FISH, STEVEN, MD

Provider ID: N/A
320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Effective as of 01-APR-23

FISH, STEVEN, MD

Provider ID: N/A
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-APR-23

FISH, STEVEN, MD

Provider ID: N/A
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-APR-23

HUDSON, HENRY, MD†

Provider ID: N/A
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-APR-22

JOHNSTON, ERIC, MD

Provider ID: N/A
477 N EL CAMINO REAL
STE C208
ENCINITAS, CA 92024
Effective as of 01-MAY-21

MCGRAW, JOSEPH, MD†

Provider ID: N/A
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-NOV-21

SAMUEL, MICHAEL, MD†

Provider ID: N/A
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-MAR-21

SAMUEL, MICHAEL, MD†

Provider ID: N/A
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-FEB-21

VIECHNICKI, TARA, MD

Provider ID: N/A
477 N EL CAMINO REAL
STE C202
ENCINITAS, CA 92024
Effective as of 01-DEC-11

ZABANEH, ALEXANDER, MD†

Provider ID: N/A
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-JAN-21

ZHAO, TAILUN, MD

Provider ID: N/A
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-JAN-24

ZHAO, TAILUN, MD

Provider ID: N/A
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-JUL-23

ZHAO, TAILUN, MD

Provider ID: N/A
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-NOV-23

OPTOMETRIST

CAO-NGUYEN, TIEN, OD

Provider ID: N/A
477 N EL CAMINO REAL
STE C202
ENCINITAS, CA 92024
Effective as of 01-JUL-23

DEAN, MOENA, OD†

Provider ID: N/A
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-SEP-22

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

DEAN, MOENA, OD†

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Effective as of 01-JUL-21

MARR, RYAN, OD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Effective as of 01-JUL-24

MARR, RYAN, OD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Effective as of 01-MAY-24

MARR, RYAN, OD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Effective as of 01-DEC-22

SOLIS, KEVIN, OD

Provider ID: N/A

477 N EL CAMINO REAL
STE C202
ENCINITAS, CA 92024

Effective as of 01-JUN-23

TAN, CONNIE, OD

Provider ID: N/A

477 N EL CAMINO REAL
STE C202
ENCINITAS, CA 92024

Effective as of 01-JUN-21

ORAL MAXILLOFACIAL SURGEON

ELI, BRADLEY, DMD

Provider ID: N/A

4403 MANCHESTER AVE

STE 101

ENCINITAS, CA 92024

Teleservice

Effective as of 01-SEP-20

OTOLARYNGOLOGY

REUTHER, MARSHA, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024

Effective as of 01-JAN-21

PEDIATRICS

KOOROS, KOOROSH, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024

Effective as of 01-FEB-22

PHYSICIANS ASSISTANT

DAS, GOURAB, PA

Provider ID: N/A

477 N EL CAMINO REAL
STE A200
ENCINITAS, CA 92024

Effective as of 01-JAN-21

GILLAN, JAMES, PA†

Provider ID: N/A

320 SANTA FE DR STE
107-C
ENCINITAS, CA 92024

Effective as of 01-JAN-21

HIGGINS, JOSHUA, PA†

Provider ID: N/A

1505 ENCINITAS BLVD
ENCINITAS, CA 92024

Effective as of 01-JAN-22

JOHNSON, RYAN, PA

Provider ID: N/A

351 SANTA FE DR STE 100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-24

MORENO, SYDNIE, PA

Provider ID: N/A

477 N EL CAMINO REAL
STE A200
ENCINITAS, CA 92024

Effective as of 01-APR-24

PELIO, DARREN, PA†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-SEP-22

SMITH, ALLISON, PA

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-MAY-24

SMITH, ALLISON, PA

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-JUN-24

VANETSKY, GARY, PA†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-JAN-21

VANETSKY, GARY, PA†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308

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

ENCINITAS, CA 92024
Effective as of 01-JAN-21

PODIATRIST

BERENTER, JAY, DPM†

Provider ID: N/A

📍 501 N EL CAMINO REAL
STE 510
ENCINITAS, CA 92024
Effective as of 01-DEC-21

BERGER, COLBY, DPM

Provider ID: N/A

📍 501 N EL CAMINO REAL
STE 201
ENCINITAS, CA 92024
Effective as of 01-APR-23

BERGER, COLBY, DPM

Provider ID: N/A

📍 501 N EL CAMINO REAL
STE 201
ENCINITAS, CA 92024
Effective as of 01-JUN-23

DUSTIN, ADAM, DPM†

Provider ID: N/A

📍 326 ENCINITAS BLVD STE
100
ENCINITAS, CA 92024
Effective as of 01-FEB-21

GILLES, LOUIS, DPM

Provider ID: N/A

📍 320 SANTA FE DR STE 305
ENCINITAS, CA 92024
Effective as of 01-AUG-23

KREPS, CHRISTOPHER, DPM

Provider ID: N/A

📍 501 N EL CAMINO REAL
STE 201
ENCINITAS, CA 92024
Effective as of 01-JUN-23

KREPS, CHRISTOPHER, DPM

Provider ID: N/A

📍 501 N EL CAMINO REAL
STE 201
ENCINITAS, CA 92024
Effective as of 01-DEC-23

LIEBERMAN, RONALD, DPM

Provider ID: N/A

📍 501 N EL CAMINO REAL
STE 201
ENCINITAS, CA 92024
Effective as of 01-DEC-23

LIEBERMAN, RONALD, DPM

Provider ID: N/A

📍 501 N EL CAMINO REAL
STE 201
ENCINITAS, CA 92024
Effective as of 01-MAY-24

RUETENIK, BRAD, DPM

Provider ID: N/A

📍 501 N EL CAMINO REAL
STE 201
ENCINITAS, CA 92024
Effective as of 01-MAY-24

RUETENIK, BRAD, DPM

Provider ID: N/A

📍 501 N EL CAMINO REAL
STE 201
ENCINITAS, CA 92024
Effective as of 01-DEC-23

PSYCHOLOGIST

GOMEZ, JUANITA, PhD†

Provider ID: N/A

📍 1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Effective as of 01-AUG-22

GOMEZ, JUANITA, PhD†

Provider ID: N/A

📍 1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Effective as of 01-AUG-22

PULMONARY DISEASES

BAUTISTA, JENNIFER, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

EISMAN, SCOTT, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

EISMAN, SCOTT, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-NOV-20

FUSSELL, KEVIN, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-22

FUSSELL, KEVIN, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

GADRE, ABHISHEK, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

GADRE, ABHISHEK, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100

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

ENCINITAS, CA 92024
Effective as of 01-JUL-21

GADRE, ABHISHEK, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-22

HSING, ANDREW, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

HSING, ANDREW, MD†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

HSING, ANDREW, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-JAN-24

KABADI, ALISHA, MD

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

LIANG, NI-CHENG, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

LIANG, NI-CHENG, MD†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

LIANG, NI-CHENG, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-NOV-20

MAGANA, MARISA, MD†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

MAGANA, MARISA, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-APR-23

MAKANI, SAMIR, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-APR-23

MAKANI, SAMIR, MD†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

MAKANI, SAMIR, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-NOV-20

PINO, ALEJANDRO, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-22

PINO, ALEJANDRO, MD†

Provider ID: N/A

326 SANTA FE DR STE 100

ENCINITAS, CA 92024
Effective as of 01-MAY-24

SARNOFF, ROBERT, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

SARNOFF, ROBERT, MD†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

SARNOFF, ROBERT, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-APR-21

SHIN, STEPHANIE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-DEC-20

TRAN, SHERI, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

TRAN, SHERI, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-23

ZHANG, MICHELLE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAY-24

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

ZHANG, MICHELLE, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-APR-23

ZHANG, MICHELLE, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-24

ZHANG, MICHELLE, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-SEP-23

RADIATION ONCOLOGY

BEAR, JONATHAN, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-JUN-23

HATTANGADI-GLUTH, JONA, MD†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024

Effective as of 01-DEC-23

HORN, ADAM, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-JUN-23

MACEWAN, IAIN, MD†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024

Effective as of 01-DEC-23

MANSY, GINA, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-23

MAYADEV, JYOTI, MD†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024

Effective as of 01-DEC-23

MELL, LOREN, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-23

MURPHY, JAMES, MD†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024

Effective as of 01-DEC-23

RAHN, DOUGLAS, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-23

ROSE, BRENT, MD†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024

Effective as of 01-DEC-23

SANDHU, AJAY PAL, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-23

SEIBERT, TYLER, MD†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024

Effective as of 01-DEC-23

SHARABI, ANDREW, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-23

SIMPSON, DANIEL, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024

Effective as of 01-DEC-23

STRAKA, CHRISTOPHER, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-23

TYE, KAREN, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-JUN-23

WHITE, EVAN, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-23

YASHAR, CATHERYN, MD

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

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

REGISTERED DIETITIAN / NUTRITIONIST

SALCEDO, ALEXANDRA, RD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-JAN-24

REGISTERED PHYSICAL THERAPIST

DOULL, MATTHEW, PT

Provider ID: N/A

📍 351 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUN-23

TAMAYO, SYDNIE, PT

Provider ID: N/A

📍 351 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-OCT-23

SLEEP MEDICINE

MENN, STUART, MD

Provider ID: N/A

📍 4403 MANCHESTER AVE
STE 101
ENCINITAS, CA 92024
Effective as of 01-MAR-23

SURGERY COLON SURGERY

PARRY, LISA, MD†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-APR-21

SCHULTZEL, MATTHEW, DO†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024
Effective as of 01-JAN-21

SURGERY GENERAL

ARMANI, AVA, MD†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUL-21

BURGESS, DANIEL, DO†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUN-21

BURGESS, DANIEL, DO†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE C204
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUN-21

BURGESS, DANIEL, DO†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024
Teleservice
Effective as of 01-OCT-23

BURGESS, DANIEL, DO†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE C204
ENCINITAS, CA 92024
Teleservice
Effective as of 01-OCT-23

JACOBSEN, GARTH, MD†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-21

RAYAN, SUNIL, MD†

Provider ID: N/A

📍 320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Teleservice
Effective as of 01-AUG-15

SCHULTZEL, MATTHEW, DO†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE C204
ENCINITAS, CA 92024
Effective as of 01-JUL-20

TOOSIE, KATAYOUN, MD

Provider ID: N/A

📍 351 SANTA FE DR STE 250
ENCINITAS, CA 92024
Effective as of 01-JUL-24

WAKILY, HUSSNA, MD

Provider ID: N/A

📍 351 SANTA FE DR STE 250
ENCINITAS, CA 92024
Effective as of 01-JUL-24

SURGERY GENERAL VASCULAR

RAYAN, SUNIL, MD†

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

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-21

SURGERY ORTHOPEDIC

AFRA, ROBERT, MD†

Provider ID: N/A

317 N EL CAMINO REAL STE
405
ENCINITAS, CA 92024

Effective as of 01-JAN-16

BREMNER, LUKE, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Effective as of 01-MAR-23

BREMNER, LUKE, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Effective as of 01-DEC-19

CHAN, JUSTIN, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-AUG-20

CHAN, JUSTIN, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-23

GROTING, JOHN, MD

Provider ID: N/A

477 N EL CAMINO REAL

STE B301

ENCINITAS, CA 92024

Effective as of 01-NOV-23

HAJNIK, CHRISTOPHER, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-DEC-19

HAJNIK, CHRISTOPHER, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-23

HAMMEL, NATHAN, MD†

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-23

HAMMEL, NATHAN, MD†

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-DEC-19

KIM, PAUL, MD†

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Effective as of 01-SEP-22

MEINEKE, RYAN, MD†

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAY-22

MEINEKE, RYAN, MD†

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-23

RAISZADEH, RAMIN, MD†

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Effective as of 01-JAN-23

SCHULTZEL, MARK, MD†

Provider ID: N/A

519 ENCINITAS BLVD STE
106
ENCINITAS, CA 92024

Teleservice

Effective as of 01-OCT-22

SURGERY PLASTIC

CHAO, JAMES, MD†

Provider ID: N/A

499 N EL CAMINO REAL
STE C200
ENCINITAS, CA 92024

Effective as of 01-JUL-15

CHEN, STEVEN, MD†

Provider ID: N/A

499 N EL CAMINO REAL
STE C200
ENCINITAS, CA 92024

Effective as of 01-JUL-15

GOSMAN, AMANDA, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-NOV-21

GUPTA, ABHAY, MD

Provider ID: N/A

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

351 SANTA FE DR STE 250
 ENCINITAS, CA 92024
 Effective as of 01-MAY-23

GUPTA, ANSHU, MD

Provider ID: N/A

700 GARDEN VIEW CT STE
 208
 ENCINITAS, CA 92024
 Effective as of 01-MAY-23

UROLOGY

COHEN, EDWARD, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Effective as of 01-APR-16

COHEN, EDWARD, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Effective as of 01-JAN-21

COHEN, EDWARD, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Effective as of 01-JUL-22

COHEN, EDWARD, MD†

Provider ID: N/A

320 SANTA FE DR STE 305
 ENCINITAS, CA 92024
 Effective as of 01-SEP-21

COHEN, EDWARD, MD†

Provider ID: N/A

320 SANTA FE DR STE 305
 ENCINITAS, CA 92024
 Effective as of 01-SEP-22

DATO, PAUL, MD

Provider ID: N/A

320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Effective as of 01-JAN-24

DICKS, BRIAN, MD

Provider ID: N/A

320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Effective as of 01-JAN-24

KEILLER, DANNY, MD

Provider ID: N/A

320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Effective as of 01-FEB-24

NAITOH, JOHN, MD†

Provider ID: N/A

320 SANTA FE DR STE 305
 ENCINITAS, CA 92024
 Effective as of 01-SEP-22

NAITOH, JOHN, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Effective as of 01-NOV-21

NEUSTEIN, PAUL, MD

Provider ID: N/A

320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Effective as of 01-FEB-24

NGUYEN, HUNG, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Teleservice
 Effective as of 01-JAN-24

NGUYEN, HUNG, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
 ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-21

NGUYEN, HUNG, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Teleservice
 Effective as of 01-SEP-21

PE, MARK-RALLY, MD

Provider ID: N/A

320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Effective as of 01-FEB-24

ROBERTS, JAMES, MD

Provider ID: N/A

320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Effective as of 01-FEB-24

VAPNEK, EVAN, MD

Provider ID: N/A

320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Effective as of 01-JAN-24

ADDICTIVE MEDICINE

AGEZE, DANIEL, MD

Provider ID: N/A

550 W WASHINGTON AVE
 ESCONDIDO, CA 92025
 Effective as of 01-JUL-24

GILL, MANPREET, MD

Provider ID: N/A

425 N DATE ST

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

ESCONDIDO, CA 92025
Effective as of 01-JUN-24

ANESTHESIOLOGY

FARUQUE, TANIA, MD†

Provider ID: N/A

📍 255 N ELM ST STE 101
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

KHATIBI, NIKAN, DO†

Provider ID: N/A

📍 160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

KHATIBI, NIKAN, DO†

Provider ID: N/A

📍 160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY, MD

Provider ID: N/A

📍 637 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

COHEN, ZACHARY, MD

Provider ID: N/A

📍 940 E VALLEY PKWY STE K
ESCONDIDO, CA 92025
Effective as of 01-JAN-23

DAIRO, BRANDON, MD†

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-NOV-22

GUPTA, PRAGYA, MD

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
Effective as of 01-AUG-24

KHATIBI, NIKAN, DO†

Provider ID: N/A

📍 160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

KHATIBI, NIKAN, DO†

Provider ID: N/A

📍 160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

KHATIBI, NIKAN, DO†

Provider ID: N/A

📍 160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

KHATIBI, NIKAN, DO†

Provider ID: N/A

📍 160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

PRASAD, RUPA, MD†

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-NOV-23

ROBINSON, COLE, MD

Provider ID: N/A

📍 160 N DATE ST
ESCONDIDO, CA 92025
Teleservice

Effective as of 01-JUN-23

CARDIAC

ELECTROPHYSIOLOGY

LERNER, JONATHAN, MD

Provider ID: N/A

📍 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

SAWHNEY, NAVINDER, MD

Provider ID: N/A

📍 2130 CITRACADO PKWY
STE 320
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

SHAH, ABHISHEK, MD†

Provider ID: N/A

📍 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JAN-23

CARDIOVASCULAR DISEASE

ABELHAD, NADIA, MD

Provider ID: N/A

📍 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

CARLSON, STEVEN, MD†

Provider ID: N/A

📍 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAY-21

DO, HULBERT, MD

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

Provider ID: N/A

488 E VALLEY PKWY STE
107

ESCONDIDO, CA 92025

Effective as of 01-OCT-23

MALEK, MIKHAIL, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 220

ESCONDIDO, CA 92029

Effective as of 01-MAR-23

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

488 E VALLEY PKWY STE
107

ESCONDIDO, CA 92025

Effective as of 01-MAY-21

NARAYANAN, MEENA, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
107

ESCONDIDO, CA 92025

Effective as of 01-MAY-21

ORR, ROBERT, MD

Provider ID: N/A

225 E 2ND AVE

ESCONDIDO, CA 92025

Effective as of 01-AUG-24

PARIKH, MILIND, DO†

Provider ID: N/A

488 E VALLEY PKWY STE
107

ESCONDIDO, CA 92025

Effective as of 01-MAY-21

SARSAM, LUAY, MD

Provider ID: N/A

488 E VALLEY PKWY STE
107

ESCONDIDO, CA 92025

Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

488 E VALLEY PKWY STE
107

ESCONDIDO, CA 92025

Effective as of 01-JUL-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
107

ESCONDIDO, CA 92025

Effective as of 01-SEP-22

SHAH, KULIN, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
107

ESCONDIDO, CA 92025

Effective as of 01-JAN-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
107

ESCONDIDO, CA 92025

Effective as of 01-JAN-23

CERTIFIED

ACUPUNCTURIST

CHEN, SISI, LAC†

Provider ID: N/A

240 W MISSION AVE STE C
ESCONDIDO, CA 92025

Effective as of 01-JUL-21

KIM, MIN JOO, LAC†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-NOV-22

CERTIFIED NURSE PRACTITIONER

BISHOP, LESLIE, NP†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102

ESCONDIDO, CA 92029

Teleservice

Effective as of 01-MAR-21

CARNEY, AMY, NP

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-MAR-23

GARVIN, JOSEPH, NP†

Provider ID: N/A

2125 CITRACADO PKWY
STE 220

ESCONDIDO, CA 92029

Effective as of 01-JAN-22

KONYN, CATHERINE, NPF

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-APR-23

LEE, SHULAMI, NPF

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Effective as of 01-JUL-24

MANCHESTER, KAREN, NP

Provider ID: N/A

2130 CITRACADO PKWY
STE 220

ESCONDIDO, CA 92029

Effective as of 01-FEB-24

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

MANCHESTER, KAREN, NP

Provider ID: N/A

1955 CITRACADO PKWY
STE 302
ESCONDIDO, CA 92029
Effective as of 01-AUG-24

MEYERS, JUDITH, NP†

Provider ID: N/A

1955 CITRACADO PKWY
STE 300
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

MILLER, JEAN, NP

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

PHELAN, ELISHA, NP

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

RICE, ELIZABETH, NP

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

SPAULDING, ENJOLI, NP†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

CERTIFIED REGISTERED NURSE ANESTHETIST

BARBA, ARNEL, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

BROWN, SHENISE, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

FIEDLER, DEREK, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

HASE, KATHLEEN, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

ORTEGA, JOSEPH, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

SEILNACHT-BERNARD, KAREN, CRNA†

Provider ID: N/A

488 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

CERTIFIED REGISTERED NURSE MIDWIFE

ALLEN, ANNE, CRNM†

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

HAMMOND, HEATHER, CRNM

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

ONEILL, THERESE, CRNM†

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

ONEILL, THERESE, CRNM†

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

CHIROPRACTOR

BARTZ, PAUL, DC†

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

FONSECA, ROSANNA, DC

Provider ID: N/A

2065 S ESCONDIDO BLVD
STE 105
ESCONDIDO, CA 92025
Effective as of 01-MAY-21

KEYS, ANNA, DC

Provider ID: N/A

240 W MISSION AVE STE C
ESCONDIDO, CA 92025

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

Effective as of 01-JUN-21

PATEL, BRIJESH, DC

Provider ID: N/A

426 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-JUL-24

ZECHA, RONALD, DC

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025

Effective as of 01-JUL-22

ZECHA, RONALD, DC

Provider ID: N/A

488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025

Effective as of 01-AUG-22

ZECHA, RONALD, DC

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025

Effective as of 01-AUG-22

DERMATOLOGY

ARMSTRONG, PATRICK, MD

Provider ID: N/A

2125 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029

Effective as of 01-MAR-24

VENKAT, ARUN, MD†

Provider ID: N/A

488 E VALLEY PKWY
ESCONDIDO, CA 92025

Effective as of 01-OCT-13

EMERGENCY MEDICINE

HARE, MARC, MD

Provider ID: N/A

1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025

Effective as of 01-APR-23

ENDOCRINOLOGY METABOLISM DIABETES

BAILEY, TIMOTHY, MD

Provider ID: N/A

625 CITRACADO PKWY STE
108
ESCONDIDO, CA 92025

Effective as of 01-OCT-23

FAMILY PRACTICE

COBIAN, VANESSA, MD

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025*

Effective as of 01-FEB-24

PATEL, RAKESH, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025

Effective as of 01-AUG-24

PATEL, JITENBHAI, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025*

Effective as of 01-AUG-24

PATEL, RAKESH, MD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-AUG-24

PATEL, RAKESH, MD

Provider ID: N/A

426 N DATE ST

ESCONDIDO, CA 92025

Effective as of 01-AUG-24

PATEL, RAKESH, MD

Provider ID: N/A

488 E VALLEY PKWY STE
404

ESCONDIDO, CA 92025

Effective as of 01-AUG-24

PATEL, RAKESH, MD

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Effective as of 01-AUG-24

PATEL, JITENBHAI, MD

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025*

Effective as of 01-AUG-24

SCHULTZ, JAMES, MD

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Effective as of 01-AUG-24

SCHULTZ, JAMES, MD†

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025

Effective as of 01-AUG-24

SHAFT, ALEXANDER, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
313

ESCONDIDO, CA 92025

Teleservice

Effective as of 01-FEB-23

SHAFT, ALEXANDER, MD†

Provider ID: N/A

488 E VALLEY PKWY STE

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

313
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-22

GASTROENTEROLOGY

CHELMILLA, HARITHA, MD
Provider ID: N/A
488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025
Effective as of 01-OCT-20

CHELMILLA, HARITHA, MD
Provider ID: N/A
735 E OHIO AVE STE 204
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

CHELMILLA, HARITHA, MD
Provider ID: N/A
735 E OHIO AVE STE 204
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

GARA, NAVEEN, MD†
Provider ID: N/A
661 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

GARA, NAVEEN, MD†
Provider ID: N/A
935 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

HASSANEIN, TAREK, MD†
Provider ID: N/A
488 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

HASSANEIN, TAREK, MD†

Provider ID: N/A
488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-22

HASSANEIN, TAREK, MD†
Provider ID: N/A
488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAY-22

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE, MA†
Provider ID: N/A
330 W FELICITA AVE STE
A4
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

INTERNAL MEDICINE

CHEN, ANDREW, MD
Provider ID: N/A
2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

EDE, KEKOA, MD
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

EDE, KEKOA, MD
Provider ID: N/A
460 N ELM ST
ESCONDIDO, CA 92025

Effective as of 01-JUL-22

LIU, ANDREW, MD
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-SEP-23

LY, SOPHEAP, MD
Provider ID: N/A
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-NOV-23

OLIVER, DEANNA, MD†
Provider ID: N/A
488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025
Effective as of 01-MAR-22

PEARCE, DANIEL, DO
Provider ID: N/A
460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-OCT-23

INTERVENTIONAL CARDIOLOGY

BAYAT, HAMED, MD
Provider ID: N/A
2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

GILBERT, CHRISTOPHER, MD
Provider ID: N/A
2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

GORWIT, JEFFREY, MD

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

Provider ID: N/A

2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029*
Effective as of 01-MAR-23

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-DEC-22

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

SHAH, KULIN, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-APR-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-APR-23

VANICHSARN, CHRISTOPHER, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

LICENSED CLINICAL SOCIAL WORKER

BECERRA, GABRIEL, LCSW

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

CHRISTENSEN, PATTI, LCSW

Provider ID: N/A

1002 E GRAND AVE
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

GUZZO, RICHARD, LCSW

Provider ID: N/A

1002 E GRAND AVE
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

HARRIS, LAURA, LCSW

Provider ID: N/A

1002 E GRAND AVE
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

HARRIS, LAURA, LCSW

Provider ID: N/A

1002 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

MAGOS, DANIEL, LCSW

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

MARTINEZ, NORAYMA, LCSW†

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-NOV-22

ROBLEDO, DAMIAN, LCSW

Provider ID: N/A

425 N DATE ST

ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

ROBLEDO, DAMIAN, LCSW

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-APR-23

THOMAS, PAULA, LCSW

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

THOMAS, PAULA, LCSW

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-APR-23

MARRIAGE FAMILY THERAPIST

CABRERA, JOANNE, MFT

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-MAR-24

HOLLEMAN, KEVIN, DO

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-APR-23

HOLLEMAN, KEVIN, DO

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

PETROSIAN, MELISSA, MFT

Provider ID: N/A

425 N DATE ST

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

ESCONDIDO, CA 92025
Effective as of 01-JUL-24

PRATHER, ALLYSON, MFT

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-MAR-24

PRATHER, ALLYSON, MFT

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025*
Effective as of 01-APR-24

TIZNADO, MONICA, MFT

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

NEPHROLOGY

AL-DAHHAN, ZAID, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

AL-DAHHAN, ZAID, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

AL-DAHHAN, ZAID, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

AL-DAHHAN, ZAID, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-AUG-23

CHOUDRY, QASIM, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

CHOUDRY, QASIM, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

CHOUDRY, QASIM, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-NOV-23

CHOUDRY, QASIM, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

CHOUDRY, QASIM, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

CHOUDRY, QASIM, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-OCT-23

CHOUDRY, QASIM, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-OCT-23

GREENSTEIN, JOSHUA, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

GREENSTEIN, JOSHUA, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

GREENSTEIN, JOSHUA, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

GREENSTEIN, JOSHUA, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 301
ESCONDIDO, CA 92029
Effective as of 01-AUG-24

HEBREO, JOSEPH, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

HEBREO, JOSEPH, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

HEBREO, JOSEPH, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

HEBREO, JOSEPH, MD†

Provider ID: N/A


631 E GRAND AVE

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

ESCONDIDO, CA 92025
Effective as of 01-MAR-17


KHAWAR, OSMAN, MD†

Provider ID: N/A

 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21


KHAWAR, OSMAN, MD†

Provider ID: N/A

 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-22


KHAWAR, OSMAN, MD†

Provider ID: N/A

 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21


NEYAZ, MOHAMMED, DO†

Provider ID: N/A

 631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JAN-21


NEYAZ, MOHAMMED, DO†

Provider ID: N/A

 631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JAN-21

NEYAZ, MOHAMMED, DO†


Provider ID: N/A

 631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUL-22

NEUROLOGY


DELANEY, MICHAEL, MD†

Provider ID: N/A

 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-FEB-19


DELANEY, MICHAEL, MD†

Provider ID: N/A

 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21


DELANEY, MICHAEL, MD†

Provider ID: N/A

 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21


DROKER, BRIAN, MD

Provider ID: N/A

 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-MAR-24


FARNSWORTH, WILLIAM, MD†

Provider ID: N/A

 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-NOV-21

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A

 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JUN-24

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A


 1955 CITRACADO PKWY

STE 102

ESCONDIDO, CA 92029
Effective as of 01-FEB-22


FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21


FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-SEP-22


HUOTT, PATRICK, MD

Provider ID: N/A

 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JUN-24


HUOTT, PATRICK, MD

Provider ID: N/A

 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JUN-24


OH, IRENE, MD†

Provider ID: N/A

 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

OH, IRENE, MD†

Provider ID: N/A

 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

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

PADUGA, REMIA, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-SEP-22

QUESNELL, TARA, DO†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-JAN-24

SAVANI, AMAN, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JUL-24

SAVANI, AMAN, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JUN-24

SAVANI, AMAN, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-NOV-23

WANG, CHUNYANG, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-MAY-24

WANG, ANCHI, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029

Teleservice

Effective as of 01-JAN-21

WANG, CHUNYANG, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-FEB-24

NEUROPHYSIOLOGY CLINICAL

QUESNELL, TARA, DO†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029

Teleservice

Effective as of 01-NOV-23

OBSTETRICS / GYNECOLOGY

BABKINA, NATALIA, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 302
ESCONDIDO, CA 92029

Effective as of 01-MAY-24

BABKINA, NATALIA, MD

Provider ID: N/A

488 E VALLEY PKWY STE
308
ESCONDIDO, CA 92025

Effective as of 01-JAN-24

BABKINA, NATALIA, MD

Provider ID: N/A

488 E VALLEY PKWY STE
310
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

BULLOCH, EDGAR, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

BULLOCH, EDGAR, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

BULLOCH, EDGAR, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

CIZMAR, BRANISLAV, MD

Provider ID: N/A

488 E VALLEY PKWY STE
311
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

CIZMAR, BRANISLAV, MD

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

CIZMAR, BRANISLAV, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 302
ESCONDIDO, CA 92029
Effective as of 01-MAY-24

CIZMAR, BRANISLAV, MD

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

Provider ID: N/A

2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-FEB-24

HINSHAW, PAUL, DO†

Provider ID: N/A

1955 CITRACADO PKWY
STE 302
ESCONDIDO, CA 92029
Effective as of 01-SEP-22

HINSHAW, PAUL, DO†

Provider ID: N/A

488 E VALLEY PKWY STE
400
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

HUSKEY, DANA, MD

Provider ID: N/A

488 E VALLEY PKWY STE
310
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

OPHTHALMOLOGY

ABDALLAH, WALID, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-AUG-24

AVALLONE, THOMAS, MD†

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-AUG-24

BINDER, NICHOLAS, MD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026
Effective as of 01-DEC-21

BINDER, NICHOLAS, MD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-APR-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-NOV-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

CARRABY, ARNETT, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

CHOPLIN, NEIL, MD†

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-SEP-15

CHOPLIN, NEIL, MD†

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-JUL-21

DELENGOCKY, TAYSON, DO

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

GOMEZ, JESSICA, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

HUDSON, HENRY, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

HUDSON, HENRY, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

HUDSON, HENRY, MD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-21

IP, COLIN, MD

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

Provider ID: N/A

📍 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

KYTASTY, CHRISTINA, DO

Provider ID: N/A

📍 700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-MAY-24

MANI, MAJID, MD

Provider ID: N/A

📍 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

MANI, MAJID, MD

Provider ID: N/A

📍 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-AUG-24

MCDONNELL, EMMA, MD

Provider ID: N/A

📍 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

MCGRAW, JOSEPH, MD†

Provider ID: N/A

📍 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📍 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

MORRISON-REYES, JOSHUA,

MD†

Provider ID: N/A

📍 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-MAY-24

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📍 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

MORTON, ASA, MD†

Provider ID: N/A

📍 700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-NOV-21

MORTON, ASA, MD†

Provider ID: N/A

📍 700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-AUG-23

PAPASTERGIU, GEORGIOS, MD

Provider ID: N/A

📍 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

PATEL, GITANE, MD†

Provider ID: N/A

📍 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

PATEL, SARJAN, MD†

Provider ID: N/A

📍 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

PEAIRS, JAMES, MD

Provider ID: N/A

📍 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

PONS, MAURICIO, MD

Provider ID: N/A

📍 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

PONS, MAURICIO, MD

Provider ID: N/A

📍 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

PRABHU, SUJATA, MD†

Provider ID: N/A

📍 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

PRABHU, SUJATA, MD†

Provider ID: N/A

📍 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

PRABHU, SUJATA, MD†

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

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-21

PRABHU, SUJATA, MD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-23

RAJSBAUM, MARTIN, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

RAJSBAUM, MARTIN, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

ROESKE, RICHMOND, MD

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-MAR-24

SASSANI, PATRICK, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-MAY-24

SASSANI, PATRICK, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

SHEILS, CATHERINE, MD

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-JAN-24

SKAF, AYHAM, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

SKAF, AYHAM, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

ZHAO, TAILUN, MD

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-NOV-23

ZHAO, TAILUN, MD

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-JAN-24

ZHAO, TAILUN, MD

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-JUL-23

OPTOMETRIST

AOTO, KIM, OD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-SEP-22

AOTO, KIM, OD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

AOTO, KIM, OD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

AOTO, KIM, OD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

AOTO, KIM, OD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-21

DYER, SHARON, OD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

EL-MOGHRABI, ROULA, OD

Provider ID: N/A


1118 W VALLEY PKWY

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

ESCONDIDO, CA 92025
Effective as of 01-JUL-24


JULAZADEH, SARA, OD

Provider ID: N/A

 700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-SEP-23


KHALIL, VADY, OD†

Provider ID: N/A

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-NOV-22


KHALIL, VADY, OD†

Provider ID: N/A

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-NOV-22


KHIEU, TINA, OD

Provider ID: N/A

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-NOV-23


KHIEU, TINA, OD

Provider ID: N/A

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-23


KOO, ANITA, OD

Provider ID: N/A

 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24


KOO, ANITA, OD

Provider ID: N/A

 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUN-24


KOO, ANITA, OD

Provider ID: N/A

 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUN-24


MARR, RYAN, OD

Provider ID: N/A

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-JUL-24


SCOTT, JEFFREY, OD†

Provider ID: N/A

 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-JAN-22


TAUNTON, PHILIP, OD†

Provider ID: N/A

 700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-SEP-21


TAUNTON, PHILIP, OD†

Provider ID: N/A

 700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-SEP-23


TONNU, ANH, OD†

Provider ID: N/A

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-21

ZVANUT, DONALD, OD


Provider ID: N/A

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-AUG-24

OTOLARYNGOLOGY

SHAH, SAURABH, MD


Provider ID: N/A

 225 E 2ND AVE
STE 101
ESCONDIDO, CA 92025
Effective as of 01-AUG-24

PEDIATRICS


FIGUEROA RODRIGUEZ, BRENDA, MD

Provider ID: N/A

 425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-MAY-24

FIGUEROA RODRIGUEZ, BRENDA, MD


Provider ID: N/A

 426 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-AUG-24

PHYS MED/ REHAB PAIN MEDICINE

RICHARDSON, HENRY, MD†

Provider ID: N/A

 1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

PHYSICAL MEDICINE / REHABILITATION

TAHAEI, SEYED, MD†

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

Provider ID: N/A

215 S HICKORY ST STE 116
ESCONDIDO, CA 92025
Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

BALDWIN, DONNA, PA†

Provider ID: N/A

1035 E GRAND AVE STE 101
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

BEITTER, KEERSTIN, PA†

Provider ID: N/A

1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
Effective as of 01-MAR-22

CHATFIELD, ALEXANDRA, PA†

Provider ID: N/A

1955 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-FEB-21

COLESON, PAMELA, PA

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

DANESHVAR, ABRAHAM, PA

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-AUG-23

GANGJI, SHAZMIN, PA

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

GANGJI, SHAZMIN, PA

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

HUANG, STEPHANIE, PA†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

MEGALI, NICOLE, PA

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-APR-24

MEHTA, NOOPUR, PA

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

MEHTA, NOOPUR, PA

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

NIAKAMAL, EVAN, PA†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

WANG, GEORGE, PA

Provider ID: N/A

488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025

Effective as of 01-MAY-24

WICKWARE, TRACY, PA

Provider ID: N/A

488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

WICKWARE, TRACY, PA†

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-APR-24

WICKWARE, TRACY, PA†

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-APR-24

WICKWARE, TRACY, PA

Provider ID: N/A

426 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

WICKWARE, TRACY, PA†

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

WICKWARE, TRACY, PA†

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

WRIGHT, DEREK, PA

Provider ID: N/A

1955 CITRACADO PKWY
ESCONDIDO, CA 92029
Effective as of 01-AUG-23

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

WRIGHT, DEREK, PA

Provider ID: N/A

1955 CITRACADO PKWY
ESCONDIDO, CA 92029
Effective as of 01-NOV-23

PODIATRIST

BANKS, JAMINELLI, DPM†

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

CHU, ANDREW, DPM†

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

CHU, ANDREW, DPM†

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

FARMER, STEVEN, DPM†

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025*
Effective as of 01-SEP-22

HAN, KYOUNG, DPM

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-JAN-22

LARKINS, PHILIP, DPM

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

MEYER, JOAN, DPM

Provider ID: N/A

1147 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-APR-24

MORRIS, JASON, DPM

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUN-21

MORRIS, JASON, DPM

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JAN-23

MORRIS, JASON, DPM

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-SEP-22

NEGRON, RICARDO, DPM

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

NEGRON, RICARDO, DPM

Provider ID: N/A

1001 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

NEGRON, RICARDO, DPM

Provider ID: N/A

1001 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

READ, TRENTON, DPM

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-APR-23

REDKAR, AVANTI, DPM

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

REDKAR, AVANTI, DPM

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-MAY-22

SMITH, COLLIN, DPM†

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

SMITH, COLLIN, DPM†

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-FEB-21

SMITH, COLLIN, DPM†

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-DEC-21

TOUMA, ELIE, DPM†

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-FEB-23

TOUMA, ELIE, DPM

Provider ID: N/A

1045 E PENNSYLVANIA
AVE

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

ESCONDIDO, CA 92025
Teleservice
Effective as of 01-APR-23

PSYCHIATRY

BECKER, OLGA, MD

Provider ID: N/A
221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

BECKER, OLGA, MD

Provider ID: N/A
221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

CASTILLO, TIFFANY, MD†

Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-NOV-22

CASTILLO, TIFFANY, MD†

Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-NOV-22

CHAND, RAVINDRA, MD†

Provider ID: N/A
2185 CITRACADO PKWY
ESCONDIDO, CA 92029
Effective as of 01-JUL-21

CHAND, RAVINDRA, MD†

Provider ID: N/A
2185 CITRACADO PKWY
ESCONDIDO, CA 92029
Effective as of 01-JUL-21

EDE, KEKOA, MD

Provider ID: N/A
425 N DATE ST

ESCONDIDO, CA 92025
Effective as of 01-AUG-20

EDE, KEKOA, MD

Provider ID: N/A
460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

EDE, KEKOA, MD

Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

EDE, KEKOA, MD

Provider ID: N/A
460 N ELM ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

EDE, KEKOA, MD

Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

EDE, KEKOA, MD

Provider ID: N/A
460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

EDE, KEKOA, MD

Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

EDE, KEKOA, MD

Provider ID: N/A
460 N ELM ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

FANOUS, ASHRAF, MD

Provider ID: N/A
221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

FANOUS, ASHRAF, MD

Provider ID: N/A
221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

FANOUS, ASHRAF, MD

Provider ID: N/A
221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

FANOUS, ASHRAF, MD

Provider ID: N/A
221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

FU, KATHERINE, MD

Provider ID: N/A
704 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

FU, KATHERINE, MD

Provider ID: N/A
704 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

HOLLEMAN, KEVIN, DO

Provider ID: N/A
221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-APR-23

HOLLEMAN, KEVIN, DO

Provider ID: N/A
221 W CREST ST STE 205

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

ESCONDIDO, CA 92025
Effective as of 01-JUN-24

HOLLEMAN, KEVIN, DO

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-APR-23

HOLLEMAN, KEVIN, DO

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

KARRIS, BIANCA, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

KARRIS, BIANCA, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

PARASHAR, ANUSHREE, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

PARASHAR, ANUSHREE, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

PARASHAR, ANUSHREE, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

PARASHAR, ANUSHREE, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

PARASHAR, ANUSHREE, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

RODARTE, GABRIEL, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†

Provider ID: N/A

425 N DATE ST

ESCONDIDO, CA 92025
Effective as of 01-JUL-22

RODARTE, GABRIEL, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

PSYCHOLOGIST

CALOCA, LAURA, PSYD

Provider ID: N/A

488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

CALOCA, LAURA, PSYD

Provider ID: N/A

488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

CALOCA, LAURA, PSYD

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

CALOCA, LAURA, PSYD

Provider ID: N/A

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

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

CARLTON-PENN, CORNELIA, PhD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-NOV-22

CARLTON-PENN, CORNELIA, PhD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

CARLTON-PENN, CORNELIA, PhD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-NOV-22

CARLTON-PENN, CORNELIA, PhD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

CHAO, BRIAN, PhD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

CHAO, BRIAN, PhD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

ESTRADA PATINO, ANGELA,

PSYD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

ESTRADA PATINO, ANGELA, PSYD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

GREENE, ERIC, PSYD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

GREENE, ERIC, PSYD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

GUARDADO-SOTO, RAQUEL, PhD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-FEB-24

GUARDADO-SOTO, RAQUEL, PhD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-FEB-24

MEJIAS, JUAN, PhD

Provider ID: N/A

426 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-FEB-24

MEJIAS, JUAN, PhD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

MEJIAS, JUAN, PhD

Provider ID: N/A

426 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-FEB-24

MEJIAS, JUAN, PhD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

SUOZZO, JOSEPH, PhD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

SUOZZO, JOSEPH, PhD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

VALLEZ-BARLAM, ANDREA, PhD

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

VALLEZ-BARLAM, ANDREA, PhD

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025

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

Effective as of 01-DEC-23

**VALLEZ-BARLAM, ANDREA,
PhD**

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

**VALLEZ-BARLAM, ANDREA,
PhD**

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025

Effective as of 01-DEC-23

**WOODWORTH, JENNIFER,
PSYD**

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

**WOODWORTH, JENNIFER,
PSYD**

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

PULMONARY DISEASES

BENDER, FRANK, MD

Provider ID: N/A

2125 CITRACADO PKWY
STE 230
ESCONDIDO, CA 92029

Effective as of 01-FEB-24

POPPER, STEVEN, MD

Provider ID: N/A

2125 CITRACADO PKWY

STE 230
ESCONDIDO, CA 92029

Effective as of 01-JAN-24

QUAN, MICHELE GRACE, MD†

Provider ID: N/A

2125 CITRACADO PKWY
STE 230
ESCONDIDO, CA 92029

Effective as of 01-SEP-22

RADIATION ONCOLOGY

COLEMAN, LORI, MD†

Provider ID: N/A

2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029

Effective as of 01-JAN-21

FULLER, DONALD, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025

Effective as of 01-JAN-21

FULLER, DONALD, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025

Effective as of 01-SEP-22

FULLER, DONALD, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025

Effective as of 01-SEP-22

FULLER, DONALD, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025

Effective as of 01-JUL-22

FULLER, DONALD, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025

Effective as of 01-MAY-24

IJAZ, TAHIR, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025

Effective as of 01-JUL-22

IJAZ, TAHIR, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025

Effective as of 01-MAY-24

IJAZ, TAHIR, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025

Effective as of 01-SEP-22

IJAZ, TAHIR, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025

Effective as of 01-JAN-21

JABBARI, SIAVASH, MD†

Provider ID: N/A

2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029

Effective as of 01-OCT-22

SHIRAZI, REZA, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025

Effective as of 01-SEP-22

SHIRAZI, REZA, MD†

Provider ID: N/A

701 E GRAND AVE STE 200

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

ESCONDIDO, CA 92025
Effective as of 01-JAN-21

SHIRAZI, REZA, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

SHIRAZI, REZA, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-MAY-24

SHIRAZI, REZA, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAY-24

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAY-21

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-SEP-22

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUL-21

VOLPP, PAUL, MD†

Provider ID: N/A

2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

RADIOLOGY DIAGNOSTIC SPEECH PATHOLOGIST

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-SEP-22

REGISTERED PHYSICAL THERAPIST

BOUTELLE, BARBARA, PT

Provider ID: N/A

1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027
Effective as of 01-FEB-24

BOUTELLE, DAVID, PT

Provider ID: N/A

1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027
Effective as of 01-FEB-24

FARRAR, COURTNEY, PT

Provider ID: N/A

1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-JUL-23

FARRAR, COURTNEY, PT†

Provider ID: N/A

1340 W VALLEY PKWY STE
201
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

MCGEE, JACQUELINE, PT

Provider ID: N/A

1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027
Effective as of 01-JAN-21

CALDERON MORALES, ASTRID, SP

Provider ID: N/A

500 LA TERRAZA BLVD STE
150
ESCONDIDO, CA 92025
Effective as of 01-APR-24

DURNAN, CASSANDRA, SP

Provider ID: N/A

500 LA TERRAZA BLVD STE
150
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

KOUKEYAN, KARIN, SP

Provider ID: N/A

500 LA TERRAZA BLVD STE
150
ESCONDIDO, CA 92025
Effective as of 01-JAN-23

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO, MD

Provider ID: N/A

1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

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

CASILLAS BERUMEN, SERGIO, MD

Provider ID: N/A

1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

GROVE, JAY, MD†

Provider ID: N/A

2185 CITRACADO PKWY
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-JAN-21

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-AUG-24

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-24

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-24

SURGERY GENERAL VASCULAR

CHAMMAS, JOSEPH, MD†

Provider ID: N/A

1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

CHANG, ALEXANDER, MD†

Provider ID: N/A

625 CITRACADO PKWY STE
203
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

MORENO MARTINEZ, ENRIQUE, MD†

Provider ID: N/A

1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-24

NEMCEFF, DENNIS, MD†

Provider ID: N/A

625 CITRACADO PKWY STE
203
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-24

SURGERY

NEUROLOGICAL

STERN, MARK, MD†

Provider ID: N/A

705 E OHIO AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

STERN, MARK, MD†

Provider ID: N/A

705 E OHIO AVE
ESCONDIDO, CA 92025
Effective as of 01-SEP-23

SURGERY ORTHOPEDIC

BARBA, DANIEL, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

KNUTSON, THOMAS, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

PALANCA, ARIEL, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-JAN-24

RAISZADEH, RAMIN, MD†

Provider ID: N/A

2125 CITRACADO PKWY
STE 310
ESCONDIDO, CA 92029
Effective as of 01-JAN-23

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

RAISZADEH, RAMIN, MD†

Provider ID: N/A

📍 488 E VALLEY PKWY STE
316
ESCONDIDO, CA 92025
Effective as of 01-JAN-23

SHARP, LORRA, MD

Provider ID: N/A

📍 2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

SURGERY THORACIC

LIN, YUAN, MD

Provider ID: N/A

📍 2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

UROLOGY

ANTHONY, JULIAN, MD

Provider ID: N/A

📍 2130 CITRACADO PKWY
STE 210
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

CARDIOVASCULAR DISEASE

SANGODKAR, SANDEEP, DO†

Provider ID: N/A

📍 591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-MAR-20

SANGODKAR, SANDEEP, DO†

Provider ID: N/A

📍 591 E ELDER ST STE C
FALLBROOK, CA 92028

Effective as of 01-MAR-20

CERTIFIED ACUPUNCTURIST

WACHNER, KRISTELYN, LAC†

Provider ID: N/A

📍 1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-OCT-22

WACHNER, KRISTELYN, LAC†

Provider ID: N/A

📍 1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-OCT-22

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET, NP

Provider ID: N/A

📍 321 E ALVARADO ST
FALLBROOK, CA 92028
Effective as of 01-APR-24

STARICKA, MELISSA, NPF

Provider ID: N/A

📍 1328 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-FEB-23

CHIROPRACTOR

BARTZ, PAUL, DC†

Provider ID: N/A

📍 1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-22

FARSHLER, ANTHONY, DC†

Provider ID: N/A

📍 1309 S MISSION RD
FALLBROOK, CA 92028

Effective as of 01-JUL-22

SHERIDAN, SHANE, DC

Provider ID: N/A

📍 1309 S MISSION RD
FALLBROOK, CA 92028*
Effective as of 01-FEB-24

DERMATOLOGY

GILBOA, RUTH, MD†

Provider ID: N/A

📍 1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JUN-21

ROSS, ANDREW, MD†

Provider ID: N/A

📍 1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JUL-22

ROSS, ANDREW, MD†

Provider ID: N/A

📍 1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-AUG-20

SAMADY, JOSEPH, MD†

Provider ID: N/A

📍 1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-AUG-20

SAMADY, JOSEPH, MD†

Provider ID: N/A

📍 1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JUL-22

SIRICHOTIRATANA, MELISSA, MD†

Provider ID: N/A

📍 1309 S MISSION RD STE A
FALLBROOK, CA 92028

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

Effective as of 01-JAN-23

VENKAT, ARUN, MD[†]

Provider ID: N/A

📍 1309 S MISSION RD STE A
FALLBROOK, CA 92028

Effective as of 01-JUN-21

WONG, DARRYL, MD[†]

Provider ID: N/A

📍 1309 S MISSION RD STE A
FALLBROOK, CA 92028

Effective as of 01-JUN-21

GASTROENTEROLOGY

HONG, JOHN, MD[†]

Provider ID: N/A

📍 521 E ELDER ST STE 104
FALLBROOK, CA 92028

Effective as of 01-JAN-21

INTERNAL MEDICINE

COX, JEREMY, DO

Provider ID: N/A

📍 591 E ELDER ST STE C
FALLBROOK, CA 92028

Effective as of 01-NOV-23

MOOLANI, UJJALA, MD

Provider ID: N/A

📍 591 E ELDER ST STE C
FALLBROOK, CA 92028

Effective as of 01-MAY-23

INTERVENTIONAL CARDIOLOGY

BISWAS, MIMI, MD

Provider ID: N/A

📍 591 E ELDER ST STE C
FALLBROOK, CA 92028

Teleservice

Effective as of 01-NOV-23

MESSENGER, BRADLEY, MD[†]

Provider ID: N/A

📍 591 E ELDER ST STE C
FALLBROOK, CA 92028

Effective as of 01-JAN-19

SANGODKAR, SANDEEP, DO[†]

Provider ID: N/A

📍 591 E ELDER ST STE C
FALLBROOK, CA 92028

Effective as of 01-JAN-19

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A

📍 591 E ELDER ST STE C
FALLBROOK, CA 92028

Effective as of 01-MAY-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

📍 591 E ELDER ST STE C
FALLBROOK, CA 92028

Teleservice

Effective as of 01-OCT-23

NEUROLOGY

UDDIN, MOHAMMAD, MD[†]

Provider ID: N/A

📍 577 E ELDER ST STE E
FALLBROOK, CA 92028

Effective as of 01-OCT-20

UDDIN, MOHAMMAD, MD[†]

Provider ID: N/A

📍 577 E ELDER ST STE E
FALLBROOK, CA 92028

Effective as of 01-OCT-20

UDDIN, MOHAMMAD, MD[†]

Provider ID: N/A

📍 577 E ELDER ST STE E

FALLBROOK, CA 92028

Effective as of 01-SEP-17

UDDIN, MOHAMMAD, MD[†]

Provider ID: N/A

📍 577 E ELDER ST STE E
FALLBROOK, CA 92028

Effective as of 01-OCT-15

UDDIN, MOHAMMAD, MD[†]

Provider ID: N/A

📍 577 E ELDER ST STE E
FALLBROOK, CA 92028

Effective as of 01-JUL-19

UDDIN, MOHAMMAD, MD[†]

Provider ID: N/A

📍 577 E ELDER ST STE E
FALLBROOK, CA 92028

Effective as of 01-APR-22

OBSTETRICS / GYNECOLOGY

STIGEN, THERESA, MD[†]

Provider ID: N/A

📍 577 E ELDER ST STE K
FALLBROOK, CA 92028

Effective as of 01-SEP-17

OPHTHALMOLOGY

DONALDSON, JARED, MD[†]

Provider ID: N/A

📍 521 E ELDER ST STE 102
FALLBROOK, CA 92028

Effective as of 01-JAN-23

DONALDSON, JARED, MD[†]

Provider ID: N/A

📍 521 E ELDER ST STE 102
FALLBROOK, CA 92028

Effective as of 01-DEC-22

DONALDSON, JARED, MD[†]

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

Provider ID: N/A

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-SEP-22

JOHNSON, ROGER, MD†

Provider ID: N/A

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-JAN-22

JOHNSON, ROGER, MD†

Provider ID: N/A

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-FEB-22

ZHOU, SIWEI, MD†

Provider ID: N/A

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-JUL-23

OPTOMETRIST

ARCHIBALD, JOHN, OD†

Provider ID: N/A

521 E ELDER ST STE 102
FALLBROOK, CA 92028*
Effective as of 01-JUL-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-DEC-23

BULLUM, ANTHONY, OD†

Provider ID: N/A

1328 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-22

COLEMAN, BROOKE, OD†

Provider ID: N/A

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-FEB-22

COOPER, MICHAEL, OD†

Provider ID: N/A

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-FEB-22

COOPER, MICHAEL, OD†

Provider ID: N/A

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-SEP-22

PEDIATRICS

ROBINSON, DAISY, MD

Provider ID: N/A

321 E ALVARADO ST
FALLBROOK, CA 92028
Effective as of 01-MAR-23

RONAN, KEVIN, MD

Provider ID: N/A

321 E ALVARADO ST
FALLBROOK, CA 92028*
Effective as of 01-JUL-24

SMITH, LINDA, MD

Provider ID: N/A

1328 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-24

PODIATRIST

NEGRON, RICARDO, DPM

Provider ID: N/A

1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-21

NEGRON, RICARDO, DPM

Provider ID: N/A

1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-21

NEGRON, RICARDO, DPM

Provider ID: N/A

1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-22

ALLERGY IMMUNOLOGY

PANGANIBAN, CHRISTINE, MD†

Provider ID: N/A

26672 PORTOLA PKWY STE
110
FOOTHILL RANCH, CA
92610

Effective as of 01-NOV-22

PANGANIBAN, CHRISTINE, MD†

Provider ID: N/A

26672 PORTOLA PKWY STE
110
FOOTHILL RANCH, CA
92610

Effective as of 01-NOV-22

YOSHII, DENIS, DO†

Provider ID: N/A

26750 TOWNE CENTRE DR
STE D
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-18

YOSHII, DENIS, DO†

Provider ID: N/A

26750 TOWNE CENTRE DR
STE D
FOOTHILL RANCH, CA
92610

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

Effective as of 01-APR-23

YOSHII, DENIS, DO⁺

Provider ID: N/A

📍 26750 TOWNE CENTRE DR
STE D
FOOTHILL RANCH, CA
92610

Effective as of 01-APR-23

***CERTIFIED NURSE
PRACTITIONER***

KHAN, AHAD, NP

Provider ID: N/A

📍 26672 PORTOLA PKWY
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-23

LIU, GRACE, NP

Provider ID: N/A

📍 26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-23

LIU, GRACE, NP

Provider ID: N/A

📍 26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-23

**MCDANIEL-DAVIS, SHAYNA,
NP**

Provider ID: N/A

📍 26672 PORTOLA PKWY STE
108
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-24

**MCDANIEL-DAVIS, SHAYNA,
NP**

Provider ID: N/A

📍 26672 PORTOLA PKWY STE
108
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-24

VISHEH, PARYA, NP

Provider ID: N/A

📍 26730 TOWNE CENTRE DR
STE 102
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-24

CHIROPRACTOR

TUREK, PAUL, DC

Provider ID: N/A

📍 27462 PORTOLA PKWY STE
201
FOOTHILL RANCH, CA
92610

Effective as of 01-JUL-21

DERMATOLOGY

AHADIAT, OMEED, MD

Provider ID: N/A

📍 26700 TOWNE CENTRE DR
STE 170
FOOTHILL RANCH, CA
92610

Effective as of 01-DEC-23

***ENDOCRINOLOGY
METABOLISM DIABETES***

AHL, SCOTT, DO⁺

Provider ID: N/A

📍 26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA

92610

Effective as of 01-OCT-22

GASTROENTEROLOGY

ASHBY, KEVIN, MD

Provider ID: N/A

📍 26700 TOWNE CENTRE DR
STE 100
FOOTHILL RANCH, CA
92610

Effective as of 01-MAR-20

ASHRAF, HEBA, MD

Provider ID: N/A

📍 26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

📍 26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

📍 26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-23

ASHRAF, HEBA, MD

Provider ID: N/A

📍 26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-SEP-22

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

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-NOV-22

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-23

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-NOV-22

BEMANIAN, SHAHROOZ, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-23

BEMANIAN, SHAHROOZ, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-23

LEE, PAUL, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA

92610

Effective as of 01-OCT-23

OMAN, MATTHEW, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-23

YU, VICTOR, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-23

YU, VICTOR, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-23

***OBSTETRICS /
GYNECOLOGY***

DAVIS, STEPHANIE, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
108
FOOTHILL RANCH, CA
92610

Effective as of 01-FEB-23

DEJBAKHS, SHEILA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
180
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-22

MILLER, JAMIE, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
108
FOOTHILL RANCH, CA
92610

Effective as of 01-NOV-23

PETERS, AMY, DO

Provider ID: N/A

26672 PORTOLA PKWY STE
108
FOOTHILL RANCH, CA
92610

Effective as of 01-NOV-23

PETERS, AMY, DO†

Provider ID: N/A

26672 PORTOLA PKWY STE
180
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-22

PRICE, KERRY, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
180
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

VU, BAO-KHOI, PA†

Provider ID: N/A

26781 PORTOLA PKWY STE
4E
FOOTHILL RANCH, CA
92610

Effective as of 01-SEP-20

WU, VANNA, PA

Provider ID: N/A

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

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAR-24

PULMONARY DISEASES

FRANKLIN RUTLAND, CEDRIC, MD†

Provider ID: N/A

26672 PORTOLA PKWY
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-21

RHEUMATOLOGY

MAHMOOD, FARAH, MD†

Provider ID: N/A

26700 TOWNE CENTRE DR

STE 165
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-19

SURGERY GENERAL

SALEM, YASSER, MD†

Provider ID: N/A

26781 PORTOLA PKWY STE
4E
FOOTHILL RANCH, CA
92610

Effective as of 01-AUG-17

SALEM, YASSER, MD†

Provider ID: N/A

26781 PORTOLA PKWY STE
4E
FOOTHILL RANCH, CA
92610

Effective as of 01-AUG-13

SALEM, YASSER, MD†

Provider ID: N/A

26781 PORTOLA PKWY STE
4E
FOOTHILL RANCH, CA
92610

Effective as of 01-AUG-20

SURGERY PLASTIC

DANESHMAND, HOOTAN, MD

Provider ID: N/A

27462 PORTOLA PKWY STE
100
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-12

DANESHMAND, HOOTAN, MD

Provider ID: N/A

27462 PORTOLA PKWY STE
100

FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-18

DANESHMAND, HOOTAN, MD

Provider ID: N/A

27462 PORTOLA PKWY STE
100
FOOTHILL RANCH, CA
92610

Effective as of 01-APR-11

DANESHMAND, HOOTAN, MD

Provider ID: N/A

27462 PORTOLA PKWY STE
100
FOOTHILL RANCH, CA
92610

Effective as of 01-JUN-24

ALLERGY IMMUNOLOGY

BROWN, HOSEA, MD†

Provider ID: N/A

1000 E LATHAM AVE STE B
HEMET, CA 92543

Effective as of 01-JUL-23

BROWN, HOSEA, MD†

Provider ID: N/A

1000 E LATHAM AVE STE B
HEMET, CA 92543

Effective as of 01-FEB-22

BROWN, HOSEA, MD†

Provider ID: N/A

1000 E LATHAM AVE STE B
HEMET, CA 92543

Effective as of 01-MAY-15

SALEH, HANA, MD†

Provider ID: N/A

391 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-SEP-15

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

ANESTHESIOLOGY

DORAISWAMY, ARUL, MD†

Provider ID: N/A

☒ 1264 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-MAY-15

DORAISWAMY, ARUL, MD†

Provider ID: N/A

☒ 1264 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-MAY-15

HYUN, SUZANNE, MD

Provider ID: N/A

☒ 3989 W STETSON AVE STE
102
HEMET, CA 92545

Effective as of 01-MAR-24

JEDAMSKI, WALDTRAUT, MD

Provider ID: N/A

☒ 1264 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-OCT-19

PANG, GARY, MD†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
102
HEMET, CA 92545

Effective as of 01-MAR-24

ANESTHESIOLOGY PAIN MANAGEMENT

CHEN, HAMILTON, MD†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
102
HEMET, CA 92545

Effective as of 01-MAY-21

DORAISWAMY, ARUL, MD†

Provider ID: N/A

☒ 1264 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-NOV-17

DORAISWAMY, ARUL, MD†

Provider ID: N/A

☒ 1264 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-NOV-14

GUIANG, RAINIER, MD†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
102
HEMET, CA 92545

Effective as of 01-MAR-24

GUIANG, RAINIER, MD†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
102
HEMET, CA 92545

Effective as of 01-MAY-21

GUIANG, RAINIER, MD†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
102
HEMET, CA 92545

Effective as of 01-JUL-24

HYUN, SUZANNE, MD

Provider ID: N/A

☒ 3989 W STETSON AVE STE
102
HEMET, CA 92545

Effective as of 01-JUL-24

KANU, ABDUL, MD

Provider ID: N/A

☒ 1011 E DEVONSHIRE AVE
HEMET, CA 92543

Teleservice

Effective as of 01-JUN-21

LEIER, TIM, MD

Provider ID: N/A

☒ 1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543

Effective as of 01-SEP-19

PANG, GARY, MD†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
102
HEMET, CA 92545

Effective as of 01-JUL-24

PANG, GARY, MD†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
102
HEMET, CA 92545

Effective as of 01-MAY-21

CARDIOVASCULAR DISEASE

AGARWAL, ASHOK, MD

Provider ID: N/A

☒ 136 S SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-JUL-23

AGGARWAL, SAURABH, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE D
HEMET, CA 92543

Effective as of 01-DEC-21

AGGARWAL, SAURABH, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE D
HEMET, CA 92543

Effective as of 01-AUG-22

AGGARWAL, SAURABH, MD†

Provider ID: N/A

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

949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-AUG-22

AGGARWAL, SAURABH, MD†
Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-JUL-24

AMIN, JATIN, MD†
Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Teleservice
Effective as of 01-MAY-21

AMIN, JATIN, MD†
Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Teleservice
Effective as of 01-JUL-24

ATTIA, NADER, DO†
Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Teleservice
Effective as of 01-MAR-20

ATTIA, NADER, DO†
Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Teleservice
Effective as of 01-JUL-22

ATTIA, NADER, DO†
Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Teleservice
Effective as of 01-MAY-21

ATTIA, NADER, DO†
Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Teleservice
Effective as of 01-AUG-24

ATTIA, NADER, DO†
Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Teleservice
Effective as of 01-SEP-18

BISWAS, MIMI, MD†
Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Teleservice
Effective as of 01-SEP-18

COX, JEREMY, DO†
Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Effective as of 01-SEP-18

GOKHROO, RAHUL, MD†
Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-JUL-24

**GRANT ANDERSON, BETTY,
MD†**

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-JUL-24

**GRANT ANDERSON, BETTY,
MD†**

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-AUG-23

MAPLETON, SHARINA, DO
Provider ID: N/A

1030 E FLORIDA AVE
HEMET, CA 92543*
Effective as of 01-NOV-24

RASTOGI, ANIL, MD†
Provider ID: N/A

1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-MAY-15

RASTOGI, ANISHA, MD†
Provider ID: N/A

1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-AUG-20

RASTOGI, ANISHA, MD†
Provider ID: N/A

1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-FEB-21

RASTOGI, ANIL, MD†
Provider ID: N/A

1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-SEP-09

RASTOGI, ANIL, MD†
Provider ID: N/A

1275 E LATHAM AVE STE A

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

HEMET, CA 92543
Effective as of 01-SEP-00

RIVA, GREGORY, MD†

Provider ID: N/A

1275 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-MAY-15

CERTIFIED NURSE PRACTITIONER

ABAYA, HONEYLYNN, NP

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-OCT-23

ADEDAYO, TOLULOPE, NP

Provider ID: N/A

1030 E FLORIDA AVE
HEMET, CA 92543

Effective as of 01-FEB-24

ADEDAYO, TOLULOPE, NP†

Provider ID: N/A

422 N SAN JACINTO ST STE
A
HEMET, CA 92543

Effective as of 01-APR-21

ADEGBITE, ADEKUNLE, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

ADEGBITE, ADEKUNLE, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

ADEGBITE, ADEKUNLE, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-SEP-22

ADEGBITE, ADEKUNLE, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

ADEGBITE, ADEKUNLE, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-SEP-22

AGUILAR, MICHELLE, NP†

Provider ID: N/A

1000 E LATHAM AVE STE G
HEMET, CA 92543

Effective as of 01-MAY-21

AMJAD WARYAM, ASHEE

AMJAD, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-AUG-21

AMJAD WARYAM, ASHEE

AMJAD, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-AUG-21

AMJAD WARYAM, ASHEE

AMJAD, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-DEC-22

AMJAD WARYAM, ASHEE

AMJAD, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-DEC-22

ANEKWE, CHINWE, NP

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-MAY-23

ANEKWE, CHINWE, NP

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-MAY-23

BAKER, SERENA, NP

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-JUL-23

BAKER, SERENA, NP

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-JUL-23

BASA, GRACIOUS, NPF

Provider ID: N/A

901 S STATE ST STE 600
HEMET, CA 92543

Effective as of 01-JUN-24

BEDFORD, RONALD, NP†

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543

Effective as of 01-SEP-22

BEDFORD, RONALD, NP†

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

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-SEP-22

BRAR, SUKHDEEP, NP

Provider ID: N/A

255 N GILBERT ST BLDG B4
HEMET, CA 92543
Effective as of 01-SEP-21

BRASKET, ADAM, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

BRASKET, ADAM, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

BRASKET, ADAM, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-NOV-21

EDEM, MARY, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAR-21

HUERTA, CARMEN, NP†

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-DEC-22

HUERTA, CARMEN, NP†

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543

Effective as of 01-OCT-22

HUERTA, CARMEN, NP†

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-AUG-22

HUERTA, CARMEN, NP†

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-AUG-22

HUERTA, CARMEN, NP†

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-AUG-22

HUERTA, CARMEN, NP†

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-AUG-22

IGWE, CHINWENDU, NP†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-AUG-19

IGWE, CHINWENDU, NP†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JAN-20

IHEMEDU, AMARACHI, NPF

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

IHEMEDU, AMARACHI, NPF

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

IHEMEDU, AMARACHI, NPF

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

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

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-SEP-22

JOHNSON, KIMBERLY, NP†
Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-SEP-22

JOHNSON, KIMBERLY, NP†
Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-SEP-22

JOHNSON, KIMBERLY, NP†
Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-SEP-22

JOHNSON, KIMBERLY, NP†
Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-JAN-23

JOHNSON, KIMBERLY, NP†
Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-JUL-23

JOHNSON, KIMBERLY, NP†
Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545

Effective as of 01-JUL-23

JOHNSON, KIMBERLY, NP†
Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545

Effective as of 01-JUL-23

JOHNSON, KIMBERLY, NP†
Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545

Effective as of 01-JUL-23

JOHNSON, KIMBERLY, NP†
Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545

Effective as of 01-MAY-23

JOHNSON, KIMBERLY, NP†
Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545

Effective as of 01-MAY-23

JONES, LAKESHA, NP†
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

JONES, LAKESHA, NP†
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

KUMAR, NINA, NP†
Provider ID: N/A

422 N SAN JACINTO ST

HEMET, CA 92543
Effective as of 01-APR-21

KUMAR, NINA, NP
Provider ID: N/A

1030 E FLORIDA AVE
HEMET, CA 92543
Effective as of 01-FEB-24

LAWHORN, CHRISTA, NPF
Provider ID: N/A

1701 E FLORIDA AVE
HEMET, CA 92544
Effective as of 01-JAN-24

LE, NGUYEN, NP
Provider ID: N/A

1030 E FLORIDA AVE
HEMET, CA 92543
Effective as of 01-FEB-24

LEANO, ANYLOU, NP†
Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-JUL-17

MELOT, KAREN, NP
Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-20

MELOT, KAREN, NP
Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-20

MELOT, KAREN, NP
Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-20

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

MILLON, TINA, NPF

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-SEP-23

MILLON, TINA, NPF

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-SEP-23

MILLON, TINA, NPF

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-SEP-23

NGUYEN, ANDY, NP†

Provider ID: N/A

2390 E FLORIDA AVE STE
104
HEMET, CA 92544

Effective as of 01-JUL-21

NGUYEN, ANDY, NP†

Provider ID: N/A

2390 E FLORIDA AVE STE
104
HEMET, CA 92544

Effective as of 01-JUL-21

O'NEIL, NICOLE, NP†

Provider ID: N/A

1701 E FLORIDA AVE
HEMET, CA 92544

Effective as of 01-MAR-22

ONUOHA, NOJA, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-MAR-23

ONUOHA, NOJA, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAR-23

ONUOHA, NOJA, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543*
Effective as of 01-NOV-22

ONUOHA, NOJA, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543*
Effective as of 01-NOV-22

PAULHUS, PATRICIA, NP†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-MAR-20

PAULHUS, PATRICIA, NP†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-MAR-20

PAULHUS, PATRICIA, NP†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-MAR-20

RATAJCZAK, CELESTE, NP

Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-FEB-24

SANCHEZ, YAHAIRA, NP†

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543

Effective as of 01-DEC-22

SANCHEZ, YAHAIRA, NP†

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543

Effective as of 01-OCT-22

SANCHEZ, YAHAIRA, NP†

Provider ID: N/A

1003 E FLORIDA AVE STE
104
HEMET, CA 92543

Effective as of 01-OCT-22

SANCHEZ, YAHAIRA, NP†

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543

Effective as of 01-MAR-22

SHARTZER, ANNA KARENINA, NP†

Provider ID: N/A

422 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-SEP-22

SHEIKH, SARAH, NP

Provider ID: N/A

901 S STATE ST STE 600
HEMET, CA 92543

Effective as of 01-MAY-23

SHEIKH, SARAH, NP

Provider ID: N/A

901 S STATE ST STE 600
HEMET, CA 92543

Effective as of 01-OCT-16

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

SHIH, LU-HSUN, NP

Provider ID: N/A

📍 225 LAURSEN ST
HEMET, CA 92543
Effective as of 01-APR-24

SINGH, JOGENDRA, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-22

SINGH, JOGENDRA, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-22

SINGH, JOGENDRA, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-20

SINGH, JOGENDRA, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-20

VALDEVERONA, KATHY, NP†

Provider ID: N/A

📍 4020 W FLORIDA AVE
HEMET, CA 92545
Effective as of 01-NOV-19

VENTURA, ALEXIS, NP

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

VENTURA, ALEXIS, NP

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

VENTURA, ALEXIS, NP

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JAN-23

VENTURA, ALEXIS, NP

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JAN-23

VIDAL, ALYSSA, NPF

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-23

VIDAL, ALYSSA, NPF

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-23

VIDAL, ALYSSA, NPF

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-23

VIDAL, ALYSSA, NPF

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-23

WILLIAM, PHEBEE, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAY-21

WILLIAM, PHEBEE, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAY-21

ZELEDON, JAIME, NP

Provider ID: N/A

📍 422 N SAN JACINTO ST STE
B
HEMET, CA 92543
Effective as of 01-MAY-18

CHIROPRACTOR

BROWN, KEVIN, DC

Provider ID: N/A

📍 3012 W FLORIDA AVE
HEMET, CA 92545
Effective as of 01-AUG-23

BROWN, KEVIN, DC

Provider ID: N/A

📍 3012 W FLORIDA AVE
HEMET, CA 92545
Effective as of 01-AUG-23

BROWN, KEVIN, DC†

Provider ID: N/A

📍 2940 W FLORIDA AVE STE
B
HEMET, CA 92545
Effective as of 01-MAR-22

BROWN, KEVIN, DC†

Provider ID: N/A

📍 2940 W FLORIDA AVE STE
B
HEMET, CA 92545
Effective as of 01-MAR-22

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

HINES, TAYTE, DC

Provider ID: N/A

☐ 903 E DEVONSHIRE AVE
STE D
HEMET, CA 92543
Effective as of 01-JAN-24

ROBINSON, DEAN, DC

Provider ID: N/A

☐ 903 E DEVONSHIRE AVE
STE D
HEMET, CA 92543
Effective as of 01-JUL-22

WACHHOLZ, PAMELA, DC

Provider ID: N/A

☐ 760 W ACACIA AVE STE 113
HEMET, CA 92543
Effective as of 01-SEP-09

WACHHOLZ, PAMELA, DC

Provider ID: N/A

☐ 760 W ACACIA AVE STE 113
HEMET, CA 92543
Effective as of 01-JUL-23

WACHHOLZ, PAMELA, DC

Provider ID: N/A

☐ 760 W ACACIA AVE STE 113
HEMET, CA 92543
Effective as of 01-FEB-11

DERMATOLOGY

HARFORD, ROBERT, MD†

Provider ID: N/A

☐ 750 E LATHAM AVE STE 3
HEMET, CA 92543
Effective as of 01-DEC-20

KOUPAIE, JAFAR, MD

Provider ID: N/A

☐ 3853 W STETSON AVE
STE 201

HEMET, CA 92545
Effective as of 01-JUL-24

MITCHELL, JESSE, MD

Provider ID: N/A

☐ 3989 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-DEC-23

MITCHELL, JESSE, MD

Provider ID: N/A

☐ 3989 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-DEC-23

MITCHELL, JESSE, MD†

Provider ID: N/A

☐ 3853 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-JUL-21

MITCHELL, JESSE, MD

Provider ID: N/A

☐ 3989 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-DEC-23

MITCHELL, JESSE, MD†

Provider ID: N/A

☐ 3853 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-JUL-21

MITCHELL, JESSE, MD

Provider ID: N/A

☐ 3989 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-DEC-23

MUDGE, BRADLEY, MD†

Provider ID: N/A

☐ 850 E LATHAM AVE STE 201
HEMET, CA 92543
Teleservice
Effective as of 01-OCT-21

OBBEREMOK, STEVE, MD

Provider ID: N/A

☐ 901 S STATE ST STE 100
HEMET, CA 92543
Effective as of 01-AUG-23

OBBEREMOK, STEVE, MD

Provider ID: N/A

☐ 720 E LATHAM AVE STE 1
HEMET, CA 92543*
Effective as of 01-JUL-23

SAIED, NAGI, MD†

Provider ID: N/A

☐ 850 E LATHAM AVE STE 201
HEMET, CA 92543
Teleservice
Effective as of 01-NOV-21

SAIED, NAGI, MD†

Provider ID: N/A

☐ 850 E LATHAM AVE STE 201
HEMET, CA 92543
Teleservice
Effective as of 01-OCT-21

SEYFZADEH, MANOUCHEHR, MD†

Provider ID: N/A

☐ 1280 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-JUL-14

EMERGENCY MEDICINE

MATHUR, ARVIND, MD†

Provider ID: N/A

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

975 SAINT JOHN PL
HEMET, CA 92543
Effective as of 01-APR-23

ENDOCRINOLOGY METABOLISM DIABETES

HAIDER, UZMA, MD†
Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-DEC-20

HAIDER, SHANZAY, MD
Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-MAR-24

HAIDER, SHANZAY, MD
Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-MAR-24

HAIDER, UZMA, MD†
Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-NOV-23

HAIDER, SHANZAY, MD
Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-MAR-24

HAIDER, SHANZAY, MD
Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-MAR-24

HAIDER, UZMA, MD†
Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-JUL-21

HAIDER, UZMA, MD†
Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-DEC-20

HAIDER, UZMA, MD†
Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-APR-24

SEYED, KAZEM, MD†
Provider ID: N/A

750 E LATHAM AVE STE 1
HEMET, CA 92543
Effective as of 01-AUG-20

FAMILY PRACTICE

**CHAMBI-HERNANDEZ, RUTH,
MD**

Provider ID: N/A

1035 SAINT JOHN PL
HEMET, CA 92543
Effective as of 01-MAY-23

GASTROENTEROLOGY

**CHAKRABARTY,
MILANKUMAR, MD†**

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-SEP-09

**CHAKRABARTY,
MILANKUMAR, MD†**

Provider ID: N/A

1003 E FLORIDA AVE STE

101
HEMET, CA 92543
Effective as of 01-AUG-20

**CHAKRABARTY,
MILANKUMAR, MD†**

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-MAY-15

**CHAKRABARTY,
MILANKUMAR, MD†**

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-MAY-15

**CHAKRABARTY,
MILANKUMAR, MD†**

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-JUL-23

NAKKA, SREENIVASA, MD†
Provider ID: N/A

949 CALHOUN PL STE A
HEMET, CA 92543
Teleservice
Effective as of 01-JUL-23

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-MAY-22

QASEEM, TAHIR, MD

Provider ID: N/A

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

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-MAY-22

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-DEC-22

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
104
HEMET, CA 92543
Effective as of 01-DEC-22

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-APR-22

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-JUL-23

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-JAN-22

SINGHVI, AJEET, MD†

Provider ID: N/A

397 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-DEC-17

HEMATOLOGY / ONCOLOGY

AGAJANIAN, RICHY, MD

Provider ID: N/A

1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-JUL-23

BANTA, WARREN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-AUG-22

BANTA, WARREN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-AUG-22

BANTA, WARREN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-AUG-22

BANTA, WARREN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-AUG-22

BANTA, WARREN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-AUG-22

BASERI, BABAK, MD

Provider ID: N/A

1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-23

BELLO, OSAGIE, MD

Provider ID: N/A

2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-OCT-23

BELLO, OSAGIE, MD

Provider ID: N/A

2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-OCT-23

BELLO, OSAGIE, MD

Provider ID: N/A

2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-OCT-23

LEE, BYUNG, DO†

Provider ID: N/A

2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-JUL-21

LEE, BYUNG, DO†

Provider ID: N/A

2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-JUL-21

LEE, BYUNG, DO†

Provider ID: N/A


2390 E FLORIDA AVE STE
105

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

HEMET, CA 92544
Effective as of 01-JUL-21


MARJON, PHILIP, MD

Provider ID: N/A

 1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-23


MOST, CAROLE, MD†

Provider ID: N/A

 2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-SEP-18


MOST, CAROLE, MD†

Provider ID: N/A

 2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-SEP-18


MOST, CAROLE, MD†

Provider ID: N/A

 2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-MAR-21


MOST, CAROLE, MD†

Provider ID: N/A

 2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-SEP-18


SARWARI, NAWID, MD

Provider ID: N/A

 1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-23


SAUNDERS, PHILLIP, DO

Provider ID: N/A

 1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-23


SAUNDERS, PHILLIP, DO

Provider ID: N/A

 1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-JUL-24


SAUNDERS, PHILLIP, DO†

Provider ID: N/A

 1011 E DEVONSHIRE AVE
STE 201
HEMET, CA 92543
Effective as of 01-DEC-20


SCHWERKOSKE, JOHN, MD

Provider ID: N/A

 1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-JUL-23


SHUM, MERRILL, MD

Provider ID: N/A

 1011 E DEVONSHIRE AVE
STE 201
HEMET, CA 92543
Effective as of 01-JUL-23


TSAI, JAMES, MD†

Provider ID: N/A

 201 LAURSEN ST
HEMET, CA 92543
Effective as of 01-SEP-09


TSANG, WALTER, MD†

Provider ID: N/A

 2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-FEB-20


TSANG, WALTER, MD†

Provider ID: N/A

 2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-FEB-20

TSANG, WALTER, MD†


Provider ID: N/A

 2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-FEB-20

HOSPICE AND PALLIATIVE MEDICINE

TAECHARVONGPHAIROJ, VEERAVAT, MD


Provider ID: N/A

 850 E LATHAM AVE STE
205
HEMET, CA 92543
Effective as of 01-MAR-24

INTERNAL MEDICINE


DHIMAN, DARSHAN, MD†

Provider ID: N/A

 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-DEC-23


DHIMAN, DARSHAN, MD†

Provider ID: N/A

 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-DEC-23

GRANT ANDERSON, BETTY, MD†

Provider ID: N/A

 949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-JUN-17

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

MATHIAS, HERMAN, MD†

Provider ID: N/A

391 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-DEC-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Teleservice

Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Teleservice

Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Teleservice

Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Teleservice

Effective as of 01-SEP-23

PEARCE, DANIEL, DO

Provider ID: N/A

1030 E FLORIDA AVE
HEMET, CA 92543

Effective as of 01-OCT-23

RIVA, GREGORY, MD†

Provider ID: N/A

1275 E LATHAM AVE STE C
HEMET, CA 92543

Effective as of 01-APR-21

INTERNAL MEDICINE GERIATRIC MEDICINE

MATHIAS, HERMAN, MD†

Provider ID: N/A

391 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-AUG-95

INTERVENTIONAL CARDIOLOGY

AGARWAL, ASHOK, MD

Provider ID: N/A

136 S SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-JAN-17

AGARWAL, ASHOK, MD

Provider ID: N/A

136 S SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-JAN-17

AGARWAL, ASHOK, MD

Provider ID: N/A

136 S SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-JAN-17

AMIN, JATIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545

Teleservice

Effective as of 01-JAN-19

ATTIA, NADER, DO†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545

Teleservice

Effective as of 01-JAN-19

BISWAS, MIMI, MD†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545

Teleservice

Effective as of 01-JAN-19

COX, JEREMY, DO†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545

Effective as of 01-JAN-19

GOKHROO, RAHUL, MD†

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543

Effective as of 01-DEC-22

GOKHROO, RAHUL, MD†

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543

Effective as of 01-DEC-22

GOKHROO, RAHUL, MD†

Provider ID: N/A


949 CALHOUN PL STE D
HEMET, CA 92543

Effective as of 01-DEC-22


GRANT ANDERSON, BETTY, MD†

Provider ID: N/A


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

 949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-JUL-14


MESSENGER, BRADLEY, MD†
Provider ID: N/A

 3853 W STETSON AVE STE
104
HEMET, CA 92545
Effective as of 01-JAN-19


RASTOGI, ANISHA, MD†
Provider ID: N/A

 1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-AUG-20


RIVA, GREGORY, MD†
Provider ID: N/A

 1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-MAR-14

RIVA, GREGORY, MD†
Provider ID: N/A

 1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-13

SANGODKAR, SANDEEP, DO
Provider ID: N/A

 3853 W STETSON AVE STE
104
HEMET, CA 92545
Effective as of 01-NOV-23

LICENSED CLINICAL SOCIAL WORKER

**ARIAS ALISHAHI, ELIZABETH,
LCSW**

Provider ID: N/A

 903 E DEVONSHIRE AVE
STE D
HEMET, CA 92543

Effective as of 01-JAN-21


BRINSON, CIRSTEN, LCSW†

Provider ID: N/A

 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-22


BRINSON, CIRSTEN, LCSW†

Provider ID: N/A

 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-22


GRANDISON, BROOKE, LCSW

Provider ID: N/A

 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-FEB-24


GRANDISON, BROOKE, LCSW

Provider ID: N/A

 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-FEB-24


HERSH, LINDSEY, LCSW†

Provider ID: N/A

 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23


HERSH, LINDSEY, LCSW†

Provider ID: N/A

 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23


HERSH, LINDSEY, LCSW†

Provider ID: N/A

 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-AUG-22


JONES, VALORIA, LCSW†

Provider ID: N/A

 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23


JONES, VALORIA, LCSW†

Provider ID: N/A

 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23


JONES, VALORIA, LCSW†

Provider ID: N/A

 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23


JONES, VALORIA, LCSW†

Provider ID: N/A

 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JAN-23


**PIDDINGTON, CHRISTINE,
LCSW†**

Provider ID: N/A

 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAR-21


**PIDDINGTON, CHRISTINE,
LCSW†**

Provider ID: N/A

 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

**PIDDINGTON, CHRISTINE,
LCSW†**

Provider ID: N/A

 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

TABIL-GALAPON, BERNICE,

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

LCSW

Provider ID: N/A

☒ 1030 E FLORIDA AVE
HEMET, CA 92543

Effective as of 01-JUL-23

VALDEZ-HERNANDEZ, ISRAEL, LCSW†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

VALDEZ-HERNANDEZ, ISRAEL, LCSW†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

VALDEZ-HERNANDEZ, ISRAEL, LCSW†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-JAN-23

VALDEZ-HERNANDEZ, ISRAEL, LCSW†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-JAN-23

MARRIAGE FAMILY THERAPIST

POOR, PATRICK, MFT†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-DEC-22

POOR, PATRICK, MFT†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-DEC-22

MEDICAL ONCOLOGY

PARSI, HOOMAN, MD

Provider ID: N/A

☒ 1001 S STATE ST STE A
HEMET, CA 92543

Effective as of 01-APR-23

SHAIKH, ANWER, MD

Provider ID: N/A

☒ 1001 S STATE ST STE A
HEMET, CA 92543

Effective as of 01-APR-23

SHAIKH, ANWER, MD

Provider ID: N/A

☒ 1001 S STATE ST STE A
HEMET, CA 92543

Effective as of 01-JUL-24

NEPHROLOGY

CHANG, DAVID, MD†

Provider ID: N/A

☒ 850 E LATHAM AVE STE D
HEMET, CA 92543

Effective as of 01-NOV-06

CHANG, DAVID, MD†

Provider ID: N/A

☒ 1011 E DEVONSHIRE AVE
STE 201
HEMET, CA 92543

Effective as of 01-SEP-09

CHANG, DAVID, MD†

Provider ID: N/A

☒ 1011 E DEVONSHIRE AVE
STE 201
HEMET, CA 92543

Effective as of 01-SEP-09

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-SEP-17

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-SEP-17

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-OCT-20

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☒ 3989 W STETSON AVE
HEMET, CA 92545

Effective as of 01-AUG-17

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-AUG-17

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

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

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-OCT-17

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-MAR-18

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-AUG-17

DHIMAN, DARSHAN, MD†

Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-DEC-15

DHIMAN, DARSHAN, MD†

Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-DEC-15

DHIMAN, DARSHAN, MD†

Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-DEC-15

DHIMAN, DARSHAN, MD†

Provider ID: N/A

3989 W STETSON AVE STE 202

HEMET, CA 92545
Effective as of 01-DEC-15

DHIMAN, DARSHAN, MD†

Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-MAR-21

DHIMAN, DARSHAN, MD†

Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-APR-18

ISHAK, SALAM, MD†

Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-AUG-20

NAGASUNDER, ARABHI, DO

Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545

Teleservice

Effective as of 01-NOV-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545

Teleservice

Effective as of 01-OCT-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545

Teleservice

Effective as of 01-OCT-23

NATH, ASHOK, MD†

Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-APR-20

YAN, ERIC, MD

Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-JUN-23

YAN, ERIC, MD

Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-JUN-23

YAN, ERIC, MD

Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-JUN-23

YOUSSEF, AMR, DO†

Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-JUN-22

YOUSSEF, AMR, DO†

Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-SEP-22

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

YOUSSEF, AMR, DO[†]

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-22

OBSTETRICS / GYNECOLOGY

NIHIRA, MIKIO, MD[†]

Provider ID: N/A

📍 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-NOV-20

NIHIRA, MIKIO, MD[†]

Provider ID: N/A

📍 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-NOV-20

NIHIRA, MIKIO, MD[†]

Provider ID: N/A

📍 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-NOV-20

RIZVI, SYED, MD[†]

Provider ID: N/A

📍 1600 E FLORIDA AVE STE
315
HEMET, CA 92544
Effective as of 01-MAR-22

RIZVI, SYED, MD[†]

Provider ID: N/A

📍 1600 E FLORIDA AVE STE
315
HEMET, CA 92544
Effective as of 01-FEB-17

URSO, MARY JO, DO[†]

Provider ID: N/A

📍 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-20

URSO, MARY JO, DO[†]

Provider ID: N/A

📍 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-20

URSO, MARY JO, DO[†]

Provider ID: N/A

📍 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-20

URSO, MARY JO, DO[†]

Provider ID: N/A

📍 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-20

URSO, MARY JO, DO[†]

Provider ID: N/A

📍 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-20

URSO, MARY JO, DO[†]

Provider ID: N/A

📍 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-20

URSO, MARY JO, DO[†]

Provider ID: N/A

📍 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-JUL-23

OCCUPATIONAL THERAPIST

BONILLA, EDWARD, OT

Provider ID: N/A

📍 3989 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-DEC-23

BONILLA, EDWARD, OT

Provider ID: N/A

📍 3989 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-DEC-23

JENSEN, BROOKE, OT[†]

Provider ID: N/A

📍 3889 W STETSON AVE STE
150
HEMET, CA 92545
Effective as of 01-JAN-20

OPHTHALMOLOGY

CARLSON, JOHN, MD[†]

Provider ID: N/A

📍 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-AUG-20

CARLSON, JOHN, MD[†]

Provider ID: N/A

📍 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-MAY-14

CARLSON, JOHN, MD[†]

Provider ID: N/A

📍 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JAN-22

CARLSON, JOHN, MD[†]

Provider ID: N/A

📍 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-FEB-22

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

CHOW, JASON, MD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-FEB-24

CHOW, JASON, MD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-23

CHOW, JASON, MD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-OCT-22

CHOW, JASON, MD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-SEP-22

DONALDSON, JARED, MD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-SEP-22

DONALDSON, JARED, MD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-MAY-21

DONALDSON, JARED, MD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JAN-23

DONALDSON, JARED, MD†

Provider ID: N/A

☞ 3953 W STETSON AVE

HEMET, CA 92545
Effective as of 01-DEC-22

JACOBS, JEFFREY, MD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-JUL-18

JACOBS, JEFFREY, MD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-JUL-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-NOV-08

JACOBS, JEFFREY, MD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-SEP-09

JACOBSON, ARTHUR, MD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-SEP-09

JACOBSON, ARTHUR, MD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-JUL-23

JACOBSON, ARTHUR, MD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-MAR-98

JOHNSON, ROGER, MD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-23

JOSEPH, JEFFREY, MD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-DEC-21

JOSEPH, JEFFREY, MD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-AUG-19

JOSEPH, JEFFREY, MD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-AUG-20

LEE, JOHN, MD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-JUL-23

LEE, JOHN, MD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-FEB-11

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

LEE, JOHN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-JAN-11

LEE, JOHN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-MAR-14

NAMBIAR, MARGARET, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-FEB-20

PHILLIPS, BARRATT, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-MAY-14

PHILLIPS, BARRATT, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-SEP-09

SHELTON, RAYMOND, MD

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-MAY-23

SKINNER, ANTHONY, MD

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-APR-24

SKINNER, ANTHONY, MD

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-APR-24

SKINNER, ANTHONY, MD

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-APR-24

SORENSEN, ROBERT, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-DEC-21

SORENSEN, ROBERT, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JAN-22

SORENSEN, ROBERT, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JUL-23

SORENSEN, ROBERT, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-SEP-09

VIDOR, IRA, MD†

Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-JUL-19

WARNER, MICHAEL, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Teleservice

Effective as of 01-JUL-23

WARNER, MICHAEL, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Teleservice

Effective as of 01-SEP-09

WARNER, MICHAEL, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Teleservice

Effective as of 01-MAR-14

WARNER, MICHAEL, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Teleservice

Effective as of 01-MAR-14

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

OPTOMETRIST

ARCHIBALD, JOHN, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JUL-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-DEC-23

BARR, AUSTIN, OD

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-MAR-23

BARR, AUSTIN, OD

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-NOV-22

COLEMAN, BROOKE, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE

HEMET, CA 92545

Effective as of 01-JUL-23

COLEMAN, BROOKE, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-AUG-20

COLEMAN, BROOKE, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JUL-11

FENNEMA, ERIC, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-FEB-22

FENNEMA, ERIC, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-SEP-22

LANE, KEVIN, OD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-FEB-11

LANE, KEVIN, OD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-SEP-09

LANE, KEVIN, OD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
207

HEMET, CA 92544

Effective as of 01-JUL-23

LARSON, BRETT, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-AUG-20

LARSON, BRETT, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JUL-23

LARSON, BRETT, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-SEP-10

LARSON, BRETT, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-FEB-22

MC CLEARY, DAVID, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-DEC-21

MC CLEARY, DAVID, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-AUG-18

MC CLEARY, DAVID, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JUL-23

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

TADROS, JESSICA, OD[†]

Provider ID: N/A

2390 E FLORIDA AVE STE 207
HEMET, CA 92544

Effective as of 01-JUL-23

ULIBARRI, MATTHEW, OD[†]

Provider ID: N/A

2390 E FLORIDA AVE STE 207
HEMET, CA 92544

Effective as of 01-JUL-23

PEDIATRIC

ENDOCRINOLOGY

SEYED, KAZEM, MD[†]

Provider ID: N/A

750 E LATHAM AVE STE 1
HEMET, CA 92543

Effective as of 01-MAY-15

SEYED, KAZEM, MD[†]

Provider ID: N/A

750 E LATHAM AVE STE 1
HEMET, CA 92543

Effective as of 01-MAY-15

SEYED, KAZEM, MD[†]

Provider ID: N/A

750 E LATHAM AVE STE 1
HEMET, CA 92543

Effective as of 01-OCT-10

PHYS MED/ REHAB PAIN MEDICINE

CHEN, HAMILTON, MD[†]

Provider ID: N/A

3989 W STETSON AVE STE 102
HEMET, CA 92545

Effective as of 01-JUL-24

PHYSICAL MEDICINE / REHABILITATION

AILINANI, HARY, MD

Provider ID: N/A

1011 E DEVONSHIRE AVE STE 203
HEMET, CA 92543

Effective as of 01-MAY-21

CHEN, HAMILTON, MD[†]

Provider ID: N/A

3989 W STETSON AVE STE 102
HEMET, CA 92545

Effective as of 01-MAR-24

LEE, JONATHAN KWANG, MD[†]

Provider ID: N/A

3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-JUL-15

PHYSICIANS ASSISTANT

ANDERSON, MATTHEW, PA[†]

Provider ID: N/A

3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-AUG-21

BAKER, ROBERT, PA

Provider ID: N/A

1011 E DEVONSHIRE AVE STE 203
HEMET, CA 92543

Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

1011 E DEVONSHIRE AVE STE 203
HEMET, CA 92543

Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

1011 E DEVONSHIRE AVE STE 203
HEMET, CA 92543

Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

1011 E DEVONSHIRE AVE STE 203
HEMET, CA 92543

Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

1011 E DEVONSHIRE AVE STE 203
HEMET, CA 92543

Effective as of 01-MAR-24

CAGATAY, HARRIER, PA[†]

Provider ID: N/A

1011 E DEVONSHIRE AVE
HEMET, CA 92543

Effective as of 01-AUG-20

CAGATAY, HARRIER, PA[†]

Provider ID: N/A

422 N SAN JACINTO ST STE B-C
HEMET, CA 92543

Effective as of 01-AUG-20

CERALDE, ALAN, PA[†]

Provider ID: N/A

3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-NOV-16

CERALDE, ALAN, PA[†]

Provider ID: N/A

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

3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-AUG-16

CERALDE, ALAN, PA†

Provider ID: N/A

3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-AUG-16

CERALDE, ALAN, PA†

Provider ID: N/A

3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-AUG-16

CURTIS, DANIEL, PA†

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-DEC-22

CURTIS, DANIEL, PA†

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-MAY-23

CURTIS, DANIEL, PA†

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-DEC-22

CURTIS, DANIEL, PA†

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-JUL-24

DE CARO, ROBERT, PA†

Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-OCT-19

DIETZLER, MARQUE, PA†

Provider ID: N/A

4020 W FLORIDA AVE
HEMET, CA 92545
Effective as of 01-JUL-19

GONZALEZ, KEVIN, PA

Provider ID: N/A

3989 W STETSON AVE STE 201
HEMET, CA 92545
Effective as of 01-DEC-23

GONZALEZ, KEVIN, PA

Provider ID: N/A

3989 W STETSON AVE STE 201
HEMET, CA 92545
Effective as of 01-DEC-23

GONZALEZ, KEVIN, PA

Provider ID: N/A

3989 W STETSON AVE STE 201
HEMET, CA 92545
Effective as of 01-DEC-23

GONZALEZ, KEVIN, PA

Provider ID: N/A

3989 W STETSON AVE STE 201
HEMET, CA 92545
Effective as of 01-DEC-23

HUNSAKER, NALANI, PA†

Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-NOV-23

HUNSAKER, NALANI, PA†

Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-DEC-20

HUNSAKER, NALANI, PA†

Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-DEC-20

LANIER, JAME, PA†

Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-OCT-19

LANIER, JAME, PA†

Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-JUL-17

MACHO, DANIELLA, PA†

Provider ID: N/A

1701 E FLORIDA AVE
HEMET, CA 92544
Effective as of 01-FEB-17

MITCHELL, PAUL, PA

Provider ID: N/A

422 N SAN JACINTO ST STE B
HEMET, CA 92543
Effective as of 01-JUN-18

MITCHELL, PAUL, PA

Provider ID: N/A

1011 E DEVONSHIRE AVE
STE 101
HEMET, CA 92543
Effective as of 01-FEB-24

MOORE, PAMELA, PA†

Provider ID: N/A

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

3889 W STETSON AVE STE
120
HEMET, CA 92545
Effective as of 01-DEC-17

QUEROL, CYRUS, PA

Provider ID: N/A

901 S STATE ST STE 100
HEMET, CA 92543
Effective as of 01-APR-24

RODDICK, JASON, PA

Provider ID: N/A

3989 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-DEC-23

RODDICK, JASON, PA

Provider ID: N/A

3989 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-DEC-23

RODDICK, JASON, PA

Provider ID: N/A

3989 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-DEC-23

RODDICK, JASON, PA

Provider ID: N/A

3989 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-DEC-23

RODDICK, JASON, PA†

Provider ID: N/A

3853 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-JUL-23

SHORES, CLORINDA, PA†

Provider ID: N/A

255 N GILBERT ST BLDG B4
HEMET, CA 92543
Effective as of 01-OCT-17

SMITH, ANTHONY, PA†

Provider ID: N/A

3889 W STETSON AVE STE
200
HEMET, CA 92545
Effective as of 01-JUN-18

SMITH, ANTHONY, PA†

Provider ID: N/A

3889 W STETSON AVE STE
200
HEMET, CA 92545
Effective as of 01-JUN-18

SZCZESIK, KRYSTIAN, PA†

Provider ID: N/A

3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-MAY-18

SZCZESIK, KRYSTIAN, PA†

Provider ID: N/A

3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-MAY-18

SZCZESIK, KRYSTIAN, PA†

Provider ID: N/A

3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-MAY-18

PODIATRIST

HAAS, RICHARD, DPM†

Provider ID: N/A

760 W ACACIA AVE STE 117
HEMET, CA 92543
Effective as of 01-JUL-23

PAOLERCIO, NANCY, DPM

Provider ID: N/A

255 N GILBERT ST STE B1
HEMET, CA 92543
Effective as of 01-MAR-17

PAOLERCIO, NANCY, DPM

Provider ID: N/A

255 N GILBERT ST STE B1
HEMET, CA 92543
Effective as of 01-MAR-17

PAOLERCIO, NANCY, DPM

Provider ID: N/A

255 N GILBERT ST STE B1
HEMET, CA 92543
Effective as of 01-MAR-17

PSYCHIATRY

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-SEP-17

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-JUN-17

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-MAR-15

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

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

361 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-JUL-24

ADEYEMO, OLUWAFEMI, MD
Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-SEP-17

ADEYEMO, OLUWAFEMI, MD
Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-MAR-15

ADEYEMO, OLUWAFEMI, MD
Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-JUL-24

ADEYEMO, OLUWAFEMI, MD
Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-JUN-17

JAKKULA, JAGAN, MD†
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-NOV-23

JAKKULA, JAGAN, MD†
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-20

JAKKULA, JAGAN, MD†
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-AUG-22

JAKKULA, JAGAN, MD†
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-AUG-22

JAKKULA, JAGAN, MD†
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-NOV-23

JAKKULA, JAGAN, MD†
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-20

JAKKULA, JAGAN, MD†
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-AUG-22

JAKKULA, JAGAN, MD†
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-AUG-22

PERSAUD, PRIA, MD
Provider ID: N/A

903 E DEVONSHIRE AVE
STE D
HEMET, CA 92543
Effective as of 01-AUG-20

PERSAUD, PRIA, MD
Provider ID: N/A

903 E DEVONSHIRE AVE
STE D
HEMET, CA 92543
Effective as of 01-AUG-20

PUCHAKAYALA, NANDITA, MD†
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUN-21

PUCHAKAYALA, NANDITA, MD†
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-SEP-23

PUCHAKAYALA, NANDITA, MD†
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-SEP-23

PUCHAKAYALA, NANDITA, MD†
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUN-21

PSYCHOLOGIST

DUNN, JOSEPH, PhD
Provider ID: N/A

1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-JUN-23

DUNN, JOSEPH, PhD
Provider ID: N/A

1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-JUN-23

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

PULMONARY DISEASES

LU, CHONG PING, MD†

Provider ID: N/A

☒ 1000 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-SEP-09

LU, CHONG PING, MD†

Provider ID: N/A

☒ 1000 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-SEP-09

LU, CHONG PING, MD†

Provider ID: N/A

☒ 1000 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-SEP-00

LU, CHONG PING, MD†

Provider ID: N/A

☒ 1000 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-JUL-23

RADIATION ONCOLOGY

BELL, DAVID, MD†

Provider ID: N/A

☒ 430 W STETSON AVE
HEMET, CA 92543
Effective as of 01-OCT-21

RHA, JANICE, MD†

Provider ID: N/A

☒ 430 W STETSON AVE
HEMET, CA 92543
Effective as of 01-DEC-21

RADIOLOGY DIAGNOSTIC

BURROUGHS, GLORIA, MD†

Provider ID: N/A

☒ 850 E LATHAM AVE STE 101

HEMET, CA 92543
Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD†

Provider ID: N/A

☒ 850 E LATHAM AVE STE 101
HEMET, CA 92543
Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD†

Provider ID: N/A

☒ 850 E LATHAM AVE STE 101
HEMET, CA 92543
Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD†

Provider ID: N/A

☒ 540 N JACINTO ST
HEMET, CA 92543
Effective as of 01-MAR-07

REGISTERED PHYSICAL THERAPIST

MONTERO, MARIA, PT

Provider ID: N/A

☒ 1515 W FLORIDA AVE STE E
HEMET, CA 92543
Effective as of 01-APR-23

MONTERO, MARIA, PT

Provider ID: N/A

☒ 1515 W FLORIDA AVE STE E
HEMET, CA 92543
Effective as of 01-APR-23

SMITH, DIANNE, PT†

Provider ID: N/A

☒ 1515 W FLORIDA AVE STE E
HEMET, CA 92543
Effective as of 01-JUN-17

RHEUMATOLOGY

COLBURN, KEITH, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE F
HEMET, CA 92543
Effective as of 01-MAR-21

MEHTA, AMAL, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE F
HEMET, CA 92543
Effective as of 01-JUL-23

MEHTA, AMAL, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE F
HEMET, CA 92543
Effective as of 01-SEP-18

RAMASWAMY, DHARMARAJAN, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE F
HEMET, CA 92543
Effective as of 01-SEP-18

RAMASWAMY, DHARMARAJAN, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE F
HEMET, CA 92543
Effective as of 01-JUL-23

SURGERY COLON SURGERY

GORSKI, TITO, MD†

Provider ID: N/A

☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

GORSKI, TITO, MD†

Provider ID: N/A

☒ 3853 W STETSON AVE STE

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

105
HEMET, CA 92545
Effective as of 01-MAY-22

SURGERY GENERAL

ATCHISON, MARVIN, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-JUL-21

ATCHISON, MARVIN, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-JUL-21

ATCHISON, MARVIN, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-DEC-20

ATCHISON, MARVIN, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-DEC-21

ATCHISON, MARVIN, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

ATCHISON, MARVIN, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105

HEMET, CA 92545
Effective as of 01-MAY-22

ATCHISON, MARVIN, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-SEP-22

BARRERA, KAYLENE, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

BARRERA, KAYLENE, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-SEP-22

BARRERA, KAYLENE, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

BARRERA, KAYLENE, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-APR-22

GORSKI, TITO, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-APR-22

GORSKI, TITO, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-FEB-24

GORSKI, TITO, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-SEP-22

GORSKI, YARA, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-SEP-22

IGWE, DANIEL, MD†

Provider ID: N/A
☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-JUL-18

IGWE, DANIEL, MD†

Provider ID: N/A
☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-JUL-18

IGWE, DANIEL, MD†

Provider ID: N/A
☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-JUL-18

JOHNSEN, HEGE, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

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

JOHNSEN, HEGE, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-MAY-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-SEP-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-APR-22

MAC, OLIVIA, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-DEC-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-APR-20

NAFIU, BOLAJI, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-SEP-22

NOURI, SARVENAZ, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-NOV-22

SHARMA, SURENDRA, MD†

Provider ID: N/A

4020 W FLORIDA AVE
HEMET, CA 92545
Effective as of 01-SEP-00

SHARMA, SURENDRA, MD†

Provider ID: N/A

4020 W FLORIDA AVE
HEMET, CA 92545
Effective as of 01-SEP-09

SHARMA, SURENDRA, MD†

Provider ID: N/A

4020 W FLORIDA AVE
HEMET, CA 92545
Effective as of 01-SEP-09

TIU, BRIAN, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-SEP-22

WANG, XIUJIE, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-SEP-19

WANG, XIUJIE, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-DEC-21

SURGERY GENERAL

VASCULAR

GORSKI, YARA, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-MAY-22

GORSKI, YARA, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-MAY-22

KARMUR, AMIT, DO†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-JAN-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-DEC-21

NAFIU, BOLAJI, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-MAY-22

TIU, BRIAN, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-APR-22

WANG, XIUJIE, MD†

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

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-OCT-20

WANG, XIUJIE, MD†

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

WANG, XIUJIE, MD†

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-OCT-20

WANG, XIUJIE, MD†

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

SURGERY HEAD

LE, SANG, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-JUL-15

SURGERY ORTHOPEDIC

ALLEN, JONATHAN, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Teleservice
Effective as of 01-JUL-15

ALLEN, JONATHAN, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Teleservice
Effective as of 01-DEC-21

ALLEN, JONATHAN, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Teleservice
Effective as of 01-DEC-21

ALLEN, JONATHAN, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Teleservice
Effective as of 01-APR-24

BURTON, PAUL, DO†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-APR-24

BURTON, PAUL, DO†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-MAR-21

BURTON, PAUL, DO†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-DEC-21

BURTON, PAUL, DO†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-DEC-21

BURTON, PAUL, DO†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-JUL-15

CAPUTO, ROY, MD

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-APR-24

CHAN, JASON, MD

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-JUL-24

ELSISSY, PETER, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-JUL-24

ELSISSY, PETER, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-AUG-21

ELSISSY, PETER, MD†

Provider ID: N/A

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

<p>☐ 3889 W STETSON AVE STE 100 HEMET, CA 92545 Effective as of 01-AUG-21</p> <p>ELSISSY, PETER, MD† Provider ID: N/A</p> <p>☐ 3889 W STETSON AVE STE 100 HEMET, CA 92545 Effective as of 01-MAY-16</p> <p>ELSISSY, PETER, MD† Provider ID: N/A</p> <p>☐ 3889 W STETSON AVE STE 100 HEMET, CA 92545 Effective as of 01-MAR-24</p> <p>GHAZAL, RONNY, MD Provider ID: N/A</p> <p>☐ 3889 W STETSON AVE STE 100 HEMET, CA 92545 Effective as of 01-MAR-24</p> <p>GRAMES, BARRY, MD† Provider ID: N/A</p> <p>☐ 3889 W STETSON AVE STE 100 HEMET, CA 92545 Effective as of 01-MAR-24</p> <p>GRAMES, BARRY, MD† Provider ID: N/A</p> <p>☐ 3889 W STETSON AVE STE 100 HEMET, CA 92545 Effective as of 01-MAY-16</p> <p>GRAMES, BARRY, MD† Provider ID: N/A</p> <p>☐ 3889 W STETSON AVE STE 100 HEMET, CA 92545</p>	<p>Effective as of 01-JUL-24</p> <p>GRAMES, BARRY, MD† Provider ID: N/A</p> <p>☐ 3889 W STETSON AVE STE 200 HEMET, CA 92545 Effective as of 01-MAR-21</p> <p>GUSTAFSON, GEORGE, MD† Provider ID: N/A</p> <p>☐ 3889 W STETSON AVE STE 100 HEMET, CA 92545 Effective as of 01-JUL-24</p> <p>GUSTAFSON, GEORGE, MD† Provider ID: N/A</p> <p>☐ 3889 W STETSON AVE STE 100 HEMET, CA 92545 Effective as of 01-AUG-15</p> <p>HADLEY, ZACHARY, MD† Provider ID: N/A</p> <p>☐ 3889 W STETSON AVE STE 100 HEMET, CA 92545 Effective as of 01-JUL-24</p> <p>HADLEY, ZACHARY, MD Provider ID: N/A</p> <p>☐ 3889 W STETSON AVE STE 100 HEMET, CA 92545 Effective as of 01-MAY-24</p> <p>HUSAIN, ASGHAR, MD Provider ID: N/A</p> <p>☐ 3889 W STETSON AVE STE 100 HEMET, CA 92545 Effective as of 01-MAR-24</p> <p>LAROSE, CONNOR, MD† Provider ID: N/A</p>	<p>☐ 3889 W STETSON AVE STE 100 HEMET, CA 92545 Effective as of 01-MAR-21</p> <p>LE, SANG, MD† Provider ID: N/A</p> <p>☐ 3889 W STETSON AVE STE 100 HEMET, CA 92545 Effective as of 01-MAR-21</p> <p>LE, SANG, MD† Provider ID: N/A</p> <p>☐ 3889 W STETSON AVE STE 100 HEMET, CA 92545 Effective as of 01-NOV-16</p> <p>LE, SANG, MD† Provider ID: N/A</p> <p>☐ 3889 W STETSON AVE STE 100 HEMET, CA 92545 Effective as of 01-JUL-15</p> <p>LE, SANG, MD† Provider ID: N/A</p> <p>☐ 3889 W STETSON AVE STE 100 HEMET, CA 92545 Effective as of 01-JUL-15</p> <p>MATIKO, JAMES, MD† Provider ID: N/A</p> <p>☐ 3889 W STETSON AVE STE 100 HEMET, CA 92545 Effective as of 01-MAR-24</p> <p>PANSE, MILIND, MD† Provider ID: N/A</p> <p>☐ 1225 E LATHAM AVE STE A HEMET, CA 92543* Effective as of 01-JUL-23</p>
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**C1. Lista de proveedores de la red
Médico de atención especializada**

WONG, ANDREW, MD†

Provider ID: N/A

1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543

Effective as of 01-NOV-09

UROLOGY

NIHIRA, MIKIO, MD†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-OCT-21

NIHIRA, MIKIO, MD†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-OCT-21

FAMILY PRACTICE

CHISUM, FAITH, MD

Provider ID: N/A

949 PALM AVE
IMPERIAL BEACH, CA 91932

Effective as of 01-FEB-23

**SUMMERS-DAY, COURTNEY,
MD†**

Provider ID: N/A

949 PALM AVE
IMPERIAL BEACH, CA
91932*

Effective as of 01-JUL-22

INTERNAL MEDICINE

RYAN, DANA, MD

Provider ID: N/A

949 PALM AVE
IMPERIAL BEACH, CA 91932

Effective as of 01-APR-23

**REGISTERED PHYSICAL
THERAPIST**

CHENG, BRANDON, PT

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Effective as of 01-FEB-24

DORSEY, KYLE, PT

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Effective as of 01-FEB-24

HERMAN, RACHEL, PT

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Effective as of 01-FEB-24

KARANDE, PRACHI, PT†

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Effective as of 01-JAN-22

NGUYEN, TIA, PT

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Effective as of 01-MAR-24

NOVENCIDO, ANDREW, PT†

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Effective as of 01-SEP-22

SUGGS, SARAH, PT

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Effective as of 01-MAY-23

VILLANUEVA, GIOVANNI, PT†

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Effective as of 01-JAN-21

ALLERGY IMMUNOLOGY

CARR, WARNER, MD

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618

Effective as of 01-JUL-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

22 ODYSSEY STE 240
IRVINE, CA 92618

Effective as of 01-DEC-21

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

22 ODYSSEY STE 240
IRVINE, CA 92618

Effective as of 01-DEC-21

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

22 ODYSSEY STE 240
IRVINE, CA 92618

Effective as of 01-JUL-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

22 ODYSSEY STE 240
IRVINE, CA 92618

Effective as of 01-MAY-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

22 ODYSSEY STE 240
IRVINE, CA 92618

Effective as of 01-MAY-23

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

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-DEC-21

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-DEC-21

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-JUL-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 240

IRVINE, CA 92618
Effective as of 01-DEC-21

LEE-KIM, CHRISTINE, DO

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-FEB-23

LEE-KIM, CHRISTINE, DO

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-FEB-23

MEHTA, VINAY, MD

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23

VENKAT, GEETA, MD†

Provider ID: N/A

☐ 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-OCT-17

VENKAT, GEETA, MD†

Provider ID: N/A

☐ 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-OCT-17

ANESTHESIOLOGY

HO, LARRY, MD

Provider ID: N/A

☐ 15701 ROCKFIELD BLVD
IRVINE, CA 92618
Effective as of 01-SEP-10

PERERA-THANGARATNAM, D, MD†

Provider ID: N/A

☐ 5 HOLLAND STE 101
IRVINE, CA 92618
Effective as of 01-SEP-19

ANESTHESIOLOGY PAIN MANAGEMENT

BESHAI, ALFRED, MD

Provider ID: N/A

☐ 16405 SAND CANYON AVE
STE 210
IRVINE, CA 92618
Effective as of 01-DEC-23

BESHAI, ALFRED, MD

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

Provider ID: N/A

16405 SAND CANYON AVE
STE 210
IRVINE, CA 92618
Effective as of 01-JUN-22

BESHAI, ALFRED, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 210
IRVINE, CA 92618
Effective as of 01-MAR-24

HO, LARRY, MD

Provider ID: N/A

15701 ROCKFIELD BLVD
IRVINE, CA 92618
Effective as of 01-APR-11

HO, LARRY, MD

Provider ID: N/A

15701 ROCKFIELD BLVD
IRVINE, CA 92618
Effective as of 01-OCT-01

JILLANI, ASIF, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-NOV-17

JILLANI, ASIF, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-NOV-17

MAHROU, REZA, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 345
IRVINE, CA 92618
Effective as of 01-JAN-15

MAHROU, REZA, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 345
IRVINE, CA 92618
Effective as of 01-JAN-15

RAFIZAD, AMIR, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 345
IRVINE, CA 92618
Effective as of 01-JAN-15

RAFIZAD, AMIR, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 345
IRVINE, CA 92618
Effective as of 01-JAN-15

AUDIOLOGIST

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-NOV-22

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-NOV-22

CARDIAC

ELECTROPHYSIOLOGY

BURRIS, RYAN, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-NOV-22

BURRIS, RYAN, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-NOV-22

MITIKU, TEFERI, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618
Effective as of 01-FEB-22

MITIKU, TEFERI, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618
Effective as of 01-FEB-22

WARRIER, NIKHIL, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-OCT-23

CARDIOVASCULAR DISEASE

ASHTIANI, ALI, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-MAY-22

ASHTIANI, ALI, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-FEB-22

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

ASHTIANI, ALI, MD Provider ID: N/A 16300 SAND CANYON AVE STE 201 IRVINE, CA 92618 Effective as of 01-FEB-22	16300 SAND CANYON AVE STE 201 IRVINE, CA 92618 Effective as of 01-APR-18	Effective as of 01-OCT-23	ESLAMI, BAHRAM, MD† Provider ID: N/A 16300 SAND CANYON AVE STE 201 IRVINE, CA 92618 Effective as of 01-APR-18
ASHTIANI, ALI, MD Provider ID: N/A 16300 SAND CANYON AVE STE 201 IRVINE, CA 92618 Effective as of 01-OCT-23	DOAN VAN, NICOLAS, MD† Provider ID: N/A 16300 SAND CANYON AVE STE 708 IRVINE, CA 92618 Effective as of 01-DEC-21		ESLAMI, BAHRAM, MD† Provider ID: N/A 16300 SAND CANYON AVE STE 201 IRVINE, CA 92618 Effective as of 01-APR-18
COHEN, STEPHEN, MD† Provider ID: N/A 16300 SAND CANYON AVE STE 201 IRVINE, CA 92618 Effective as of 01-OCT-23	DOAN VAN, NICOLAS, MD† Provider ID: N/A 16300 SAND CANYON AVE STE 708 IRVINE, CA 92618 Effective as of 01-OCT-23		ESLAMI, BAHRAM, MD† Provider ID: N/A 16300 SAND CANYON AVE STE 201 IRVINE, CA 92618 Effective as of 01-APR-18
COHEN, STEPHEN, MD† Provider ID: N/A 16300 SAND CANYON AVE STE 201 IRVINE, CA 92618 Effective as of 01-APR-18	ELSAYED, SARAH SABRY, MD† Provider ID: N/A 16300 SAND CANYON AVE STE 708 IRVINE, CA 92618 Effective as of 01-OCT-23		ESLAMI, BAHRAM, MD† Provider ID: N/A 16300 SAND CANYON AVE STE 201 IRVINE, CA 92618 Effective as of 01-APR-18
COHEN, STEPHEN, MD† Provider ID: N/A 16300 SAND CANYON AVE STE 201 IRVINE, CA 92618 Effective as of 01-MAY-22	ELSAYED, SARAH SABRY, MD† Provider ID: N/A 16300 SAND CANYON AVE STE 708 IRVINE, CA 92618 Effective as of 01-JAN-22		ESLAMI-FARSANI, MAHMOUD, MD† Provider ID: N/A 16300 SAND CANYON AVE STE 201 IRVINE, CA 92618 Effective as of 01-APR-18
COHEN, STEPHEN, MD† Provider ID: N/A 16300 SAND CANYON AVE STE 201 IRVINE, CA 92618 Effective as of 01-APR-18	ESLAMI, BAHRAM, MD† Provider ID: N/A 16300 SAND CANYON AVE STE 201 IRVINE, CA 92618 Effective as of 01-APR-18		ESLAMI-FARSANI, MAHMOUD, MD† Provider ID: N/A 16300 SAND CANYON AVE STE 201 IRVINE, CA 92618 Effective as of 01-OCT-23
COHEN, STEPHEN, MD† Provider ID: N/A 16300 SAND CANYON AVE STE 201 IRVINE, CA 92618 Effective as of 01-APR-18	ESLAMI, BAHRAM, MD† Provider ID: N/A 16300 SAND CANYON AVE STE 201 IRVINE, CA 92618		MELTZER, PAUL, MD† Provider ID: N/A 16300 SAND CANYON AVE STE 201 IRVINE, CA 92618 Effective as of 01-OCT-23

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

MELTZER, PAUL, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-JAN-20

MELTZER, PAUL, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

MELTZER, PAUL, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

MELTZER, PAUL, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

MELTZER, PAUL, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-MAY-22

NGUYEN, HOANG, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-DEC-21

NGUYEN, HOANG, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-DEC-21

Effective as of 01-OCT-23

NGUYEN, HUY, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-JAN-20

NI, YU-MING, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-OCT-23

NI, YU-MING, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-AUG-22

PATEL, SANJIV, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-JAN-22

PATEL, SANJIV, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-OCT-23

WARRIER, NIKHIL, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

WERTMAN, BRETT, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-JAN-20

WONG, JENNIFER, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-OCT-23

WONG, JENNIFER, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-JAN-22

YALVAC, ETHAN, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-JAN-20

YALVAC, ETHAN, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-OCT-23

YALVAC, ETHAN, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-MAY-22

YANG, TAE, MD[†]

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

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-JAN-22

YANG, TAE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-OCT-23

***CERTIFIED
ACUPUNCTURIST***

CHOI, JI EI, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-MAR-22

CHOI, JI EI, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-OCT-22

CHOI, JI EI, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-FEB-23

CHOI, JI EI, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-OCT-22

CHOI, JI EI, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-OCT-22

CHOI, JI EI, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-OCT-22

HONG, HEE KYUNG, LAC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618

Effective as of 01-AUG-22

HONG, HEE KYUNG, LAC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618

Effective as of 01-AUG-22

KIM, CHEL, LAC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618

Effective as of 01-MAY-21

KIM, LAUREN SOOJIN, LAC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618

Effective as of 01-MAY-21

KIM, LAUREN SOOJIN, LAC

Provider ID: N/A

113 WATERWORKS WAY
STE 205

IRVINE, CA 92618

Effective as of 01-MAY-21

LEE, BRIAN, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-MAY-21

LEE, BRIAN, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-MAY-21

LEE, BRIAN, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-MAY-21

LEE, BRIAN, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-MAY-21

LEE, BRIAN, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-MAY-21

LEE, BRIAN, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-AUG-22

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

LEE, BRIAN, LAC†

Provider ID: N/A

📄 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-FEB-23

LEE, SEMI, LAC

Provider ID: N/A

📄 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-JUN-23

LEE, SEMI, LAC

Provider ID: N/A

📄 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-JUL-23

LEE, SEMI, LAC

Provider ID: N/A

📄 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-JUL-23

LEE, SEMI, LAC

Provider ID: N/A

📄 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-JUL-23

LEE, SEMI, LAC

Provider ID: N/A

📄 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-JUL-23

PARSI KANEMOTO, MARYAM, LAC†

Provider ID: N/A

📄 22 ODYSSEY STE 165
IRVINE, CA 92618
Effective as of 01-SEP-21

CERTIFIED NURSE PRACTITIONER

CARR, CHERYL, NP

Provider ID: N/A

📄 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-APR-23

CARR, CHERYL, NP

Provider ID: N/A

📄 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-APR-23

CARR, CHERYL, NP

Provider ID: N/A

📄 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAY-23

CARR, CHERYL, NP

Provider ID: N/A

📄 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-JUN-24

CARR, CHERYL, NP

Provider ID: N/A

📄 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAY-23

CHOI, RANA, NP†

Provider ID: N/A

📄 15775 LAGUNA CANYON

RD STE 210
IRVINE, CA 92618
Effective as of 01-SEP-19

DESAI, SONAM, NPF†

Provider ID: N/A

📄 16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618*
Effective as of 01-OCT-22

FERRANTE, JADE, NP

Provider ID: N/A

📄 8607 IRVINE CENTER DR
IRVINE, CA 92618
Effective as of 01-NOV-23

LIU, GRACE, NP

Provider ID: N/A

📄 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-23

LIU, GRACE, NP

Provider ID: N/A

📄 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-23

MCDANIEL-DAVIS, SHAYNA, NP

Provider ID: N/A

📄 16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618
Effective as of 01-MAY-24

MCDANIEL-DAVIS, SHAYNA, NP

Provider ID: N/A

📄 16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618

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

Effective as of 01-MAY-24

PARK, SE, NP

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-24

PARK, SE, NP

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUL-23

REED, BRENDYN, NP

Provider ID: N/A

8607 IRVINE CENTER DR
IRVINE, CA 92618

Effective as of 01-JUL-24

REED, BRENDYN, NP

Provider ID: N/A

8607 IRVINE CENTER DR
IRVINE, CA 92618

Effective as of 01-JUL-24

WU, JENNY, NP

Provider ID: N/A

16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618

Effective as of 01-DEC-23

CERTIFIED REGISTERED NURSE MIDWIFE

SAJADI, ALISA, CRNM

Provider ID: N/A

16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618

Effective as of 01-DEC-23

CHIROPRACTOR

KANG, KYUNG, DC

Provider ID: N/A

14875 JEFFREY RD STE 210
IRVINE, CA 92618

Effective as of 01-OCT-23

KIM, SEON-HOON SEAN, DC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618

Effective as of 01-JAN-23

KIM, SEON-HOON SEAN, DC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618

Effective as of 01-OCT-23

KIM, SEON-HOON SEAN, DC

Provider ID: N/A

113 WATERWORKS WAY
STE 205

IRVINE, CA 92618

Effective as of 01-MAR-22

KIM, SEON-HOON SEAN, DC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618

Effective as of 01-MAR-22

WEDDLE, DIRK, DC

Provider ID: N/A

15375 BARRANCA PKWY
STE J104
IRVINE, CA 92618

Effective as of 01-JAN-18

CLINICAL NEUROPSYCHOLOGIST

BENNETT, LAUREN, PhD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618*

Effective as of 01-OCT-22

BENNETT, LAUREN, PhD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618*

Effective as of 01-OCT-22

DERMATOLOGY

BAGHERI, BITA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-21

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

WANG, STEVEN, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JUL-22

WANG, STEVEN, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JUL-22

EMERGENCY MEDICINE

KADAKIA, AMAR, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

ENDOCRINOLOGY

METABOLISM DIABETES

CHAVEZ, BRIAN, MD†

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618
Teleservice

Effective as of 01-AUG-21

CHAVEZ, BRIAN, MD†

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618
Teleservice

Effective as of 01-OCT-23

FARJOU DI, FARHAD, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 108
IRVINE, CA 92618

Effective as of 01-MAY-22

FARJOU DI, FARHAD, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 108
IRVINE, CA 92618

Effective as of 01-MAY-22

FARJOU DI, FARHAD, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 250
IRVINE, CA 92618

Effective as of 01-JUN-22

FARJOU DI, FARHAD, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 250
IRVINE, CA 92618
Effective as of 01-JUN-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-MAY-24

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JUL-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JUL-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JUL-22

MARKMAN, LISA, MD

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Effective as of 01-MAR-23

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

MARKMAN, LISA, MD

Provider ID: N/A

☑ 22 ODYSSEY STE 115
IRVINE, CA 92618
Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A

☑ 22 ODYSSEY STE 115
IRVINE, CA 92618
Effective as of 01-MAR-23

MEHTA, SHILPA, MD†

Provider ID: N/A

☑ 22 ODYSSEY STE 115
IRVINE, CA 92618
Teleservice
Effective as of 01-JAN-23

MEHTA, SHILPA, MD†

Provider ID: N/A

☑ 22 ODYSSEY STE 115
IRVINE, CA 92618
Teleservice
Effective as of 01-JUN-19

MEHTA, SHILPA, MD†

Provider ID: N/A

☑ 22 ODYSSEY STE 115
IRVINE, CA 92618
Teleservice
Effective as of 01-JUN-19

MEHTA, SHILPA, MD†

Provider ID: N/A

☑ 22 ODYSSEY STE 115
IRVINE, CA 92618
Teleservice
Effective as of 01-OCT-23

VYAS, URVI, MD

Provider ID: N/A

☑ 16300 SAND CANYON AVE

STE 311
IRVINE, CA 92618
Effective as of 01-JUN-24

VYAS, URVI, MD

Provider ID: N/A

☑ 16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618
Effective as of 01-JUN-24

FAMILY PRACTICE

BURRIS, RYAN, MD

Provider ID: N/A

☑ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-FEB-23

BURRIS, RYAN, MD

Provider ID: N/A

☑ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-FEB-23

FAMILY PRACTICE

SPORTS MEDICINE

RIVADENEYRA, ADAM, MD†

Provider ID: N/A

☑ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-NOV-17

RIVADENEYRA, ADAM, MD†

Provider ID: N/A

☑ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-JAN-19

FEMALE PELVIC MED AND

RECONSTRUCTIVE SURG

MWESIGWA, PATRICIA, MD†

Provider ID: N/A

☑ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-MAR-22

SHOURESHI, POONE, MD

Provider ID: N/A

☑ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-23

SHOURESHI, POONE, MD

Provider ID: N/A

☑ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-23

GASTROENTEROLOGY

ASHRAF, HEBA, MD

Provider ID: N/A

☑ 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-23

ASHRAF, HEBA, MD

Provider ID: N/A

☑ 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-23

ASHRAF, HEBA, MD

Provider ID: N/A

☑ 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-SEP-22

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

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-NOV-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-NOV-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-OCT-23

BABAKNIA, ARDALAN, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 240
IRVINE, CA 92618

Effective as of 01-APR-11

BABAKNIA, ARDALAN, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 240
IRVINE, CA 92618

Effective as of 01-MAY-12

BEMANIAN, SHAHROOZ, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-OCT-23

BEMANIAN, SHAHROOZ, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JUN-24

BEMANIAN, SHAHROOZ, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-21

BEMANIAN, SHAHROOZ, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-MAY-16

BEMANIAN, SHAHROOZ, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-20

BEMANIAN, SHAHROOZ, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-18

BEMANIAN, SHAHROOZ, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-16

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-AUG-22

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JUL-22

CHOI, DAVID, DO†

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

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-MAY-23

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-MAY-22

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-MAY-22

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-OCT-23

HWANG, CAROLINE, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618

Effective as of 01-JUN-23

HWANG, CAROLINE, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618

Effective as of 01-JUN-23

HWANG, CAROLINE, MD

Provider ID: N/A

500 SUPERIOR AVE
STE 100

IRVINE, CA 92618

Effective as of 01-AUG-23

HWANG, CAROLINE, MD

Provider ID: N/A

500 SUPERIOR AVE
STE 100
IRVINE, CA 92618

Effective as of 01-AUG-23

KAUFMAN, DAVID, DO

Provider ID: N/A

18 ENDEAVOR STE 204
IRVINE, CA 92618

Effective as of 01-JUL-12

KUMAR, RASHMI, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618

Effective as of 01-OCT-23

KUMAR, RASHMI, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618

Effective as of 01-OCT-23

LEE, PAUL, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-OCT-23

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-OCT-23

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JUN-24

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-MAY-16

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-21

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-20

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-23

LEE, JAMES, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JUN-23

LEE, JAMES, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220

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

IRVINE, CA 92618
Effective as of 01-JUN-23

LEE, PAUL, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230

IRVINE, CA 92618
Effective as of 01-JAN-23

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618
Effective as of 01-JAN-18

OHARA, JUN ICHI, MD

Provider ID: N/A

22 ODYSSEY STE 170A
IRVINE, CA 92618

Effective as of 01-JUN-19

OMAN, MATTHEW, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230

IRVINE, CA 92618
Effective as of 01-JAN-23

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618
Effective as of 01-JAN-18

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618
Effective as of 01-JAN-20

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-JAN-21

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-JUN-24

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-OCT-23

OMAN, MATTHEW, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230

IRVINE, CA 92618

Effective as of 01-OCT-23

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-FEB-18

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-AUG-18

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-AUG-18

SINGH, HARDEEP, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618

Effective as of 01-MAY-17

SINGH, HARDEEP, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618

Effective as of 01-MAY-17

SINGH, HARDEEP, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618

Effective as of 01-OCT-20

SINGH, HARDEEP, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618

Effective as of 01-JUN-23

SINGH, HARDEEP, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618

Effective as of 01-JUN-23

YAP, KONG PENG, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 106

IRVINE, CA 92618

Effective as of 01-JAN-14

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

YU, FANG, MD†

Provider ID: N/A

📍 15825 LAGUNA CANYON
RD STE 106
IRVINE, CA 92618
Effective as of 01-JAN-18

YU, VICTOR, MD†

Provider ID: N/A

📍 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-20

YU, FANG, MD†

Provider ID: N/A

📍 15825 LAGUNA CANYON
RD STE 106
IRVINE, CA 92618
Effective as of 01-JAN-23

YU, VICTOR, MD†

Provider ID: N/A

📍 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-21

YU, VICTOR, MD†

Provider ID: N/A

📍 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-23

YU, FANG, MD†

Provider ID: N/A

📍 15825 LAGUNA CANYON
RD STE 106
IRVINE, CA 92618
Effective as of 01-OCT-23

YU, VICTOR, MD†

Provider ID: N/A

📍 113 WATERWORKS WAY

STE 155
IRVINE, CA 92618
Effective as of 01-OCT-23

YU, VICTOR, MD†

Provider ID: N/A

📍 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JUN-24

YU, VICTOR, MD†

Provider ID: N/A

📍 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-16

YU, VICTOR, MD†

Provider ID: N/A

📍 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-18

GYNECOLOGIC ONCOLOGY

ABAID, LISA, MD†

Provider ID: N/A

📍 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-NOV-18

BECK, TIFFANY, MD†

Provider ID: N/A

📍 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-AUG-22

BECK, TIFFANY, MD†

Provider ID: N/A

📍 16105 SAND CANYON AVE

STE 260
IRVINE, CA 92618
Effective as of 01-AUG-22

LEVINE, MONICA, MD

Provider ID: N/A

📍 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-OCT-23

LEVINE, MONICA, MD

Provider ID: N/A

📍 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-OCT-23

MENDIVIL, ALBERTO, MD†

Provider ID: N/A

📍 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-AUG-22

MENDIVIL, ALBERTO, MD†

Provider ID: N/A

📍 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-AUG-22

MENDIVIL, ALBERTO, MD†

Provider ID: N/A

📍 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-FEB-23

MENDIVIL, ALBERTO, MD†

Provider ID: N/A

📍 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-FEB-23

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

MENDIVIL, ALBERTO, MD†

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-FEB-23

HEMATOLOGY / ONCOLOGY

GOLDENSON, BENJAMIN, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-AUG-23

HOMSI, YASER, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-MAY-24

NANGIA, CHAITALI, MD†

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618*

Effective as of 01-OCT-22

NANGIA, CHAITALI, MD†

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618*

Effective as of 01-OCT-22

PANDIT, LALITA, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Teleservice

Effective as of 01-OCT-21

PANDIT, LALITA, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Teleservice

Effective as of 01-OCT-19

SEERY, TARA, MD†

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-JAN-21

SEERY, TARA, MD†

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-JAN-21

HEPATOLOGY

FONG, TSE LING, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618

Effective as of 01-JAN-24

FONG, TSE LING, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618

Effective as of 01-JAN-24

INFECTIOUS DISEASE

SARAFIAN, FARJAD, MD

Provider ID: N/A

16305 SAND CANYON AVE

STE 220

IRVINE, CA 92618

Effective as of 01-APR-23

SARAFIAN, FARJAD, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-APR-23

SARAFIAN, FARJAD, MD

Provider ID: N/A

16100 SAND CANYON AVE
STE 240
IRVINE, CA 92618

Effective as of 01-AUG-20

SARAFIAN, FARJAD, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAY-23

INTERNAL MEDICINE

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618

Effective as of 01-JAN-20

APPEL, RICHARD, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

BRAVO, ARLENE, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618

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

Effective as of 01-JUL-24

BRAVO, ARLENE, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618

Effective as of 01-JUL-24

CABRERA, JUAN, MD

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

CHENG, CATHY, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Teleservice

Effective as of 01-JUL-23

CHENG, CATHY, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Teleservice

Effective as of 01-JUL-23

CHIEN, JOHN, MD†

Provider ID: N/A

16200 SAND CANYON AVE
IRVINE, CA 92618

Effective as of 01-JAN-18

DANESH, HOUMAN, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618*

Effective as of 01-JAN-18

DAVIS, BARBARA, DO†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

EL-BERSHAWI, AHMED, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 225
IRVINE, CA 92618

Effective as of 01-MAR-21

GEIGER, ERIK, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

GHOSH, SUBRATO, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

HUNG, JENNIFER, DO†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

LEE, RONALD, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

LU, CHRISTIAN, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

MIRSAEID GHAZI, POURYA, MD†

Provider ID: N/A

11 TECHNOLOGY DR

IRVINE, CA 92618

Effective as of 01-JAN-18

NGUYEN, VIET, DO†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

NGUYEN, THUY, DO†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

PEREZ, FRANCISCO, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

SHAHAMIRI, SEAN, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

SHUNE, HONG, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618

Effective as of 01-JAN-20

SYCHANGCO, PAUL, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

TAHERI, NIMA, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

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

YAP, MICHAEL, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

ZAHED, SHAHAB, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

INTERVENTIONAL CARDIOLOGY

BERG, CHRISTOPHER, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-JUN-24

BERG, CHRISTOPHER, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

BERG, CHRISTOPHER, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

BERG, CHRISTOPHER, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

BERG, CHRISTOPHER, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

ESLAMI-FARSANI, MAHMOUD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

ESLAMI-FARSANI, MAHMOUD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

HOWELL, STACEY, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-JUN-24

HOWELL, STACEY, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

HOWELL, STACEY, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

HOWELL, STACEY, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708

IRVINE, CA 92618

Effective as of 01-NOV-23

HOWELL, STACEY, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

KAZEMI, SEPIDEH, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 601
IRVINE, CA 92618

Effective as of 01-JAN-21

NGUYEN, HUY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-JAN-21

NGUYEN, HUY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-SEP-17

NGUYEN, HUY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-SEP-17

SCHACHTER, JESSICA, DO

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

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

Effective as of 01-NOV-23

SCHACHTER, JESSICA, DO

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

SCHACHTER, JESSICA, DO

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

SCHACHTER, JESSICA, DO

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-JUN-24

SCHACHTER, JESSICA, DO

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

WERTMAN, BRETT, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-SEP-17

WERTMAN, BRETT, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-SEP-17

WERTMAN, BRETT, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-JAN-21

YALVAC, ETHAN, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-JAN-21

YALVAC, ETHAN, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

YALVAC, ETHAN, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

**LICENSED CLINICAL
SOCIAL WORKER**

ARZATE, VANESSA, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-MAY-24

ARZATE, VANESSA, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-MAY-24

BOODMAN, SANDRA, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-JUL-24

BOODMAN, SANDRA, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-JUL-24

BOODMAN, SANDRA, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

BOWNES, MARISA, LCSW

Provider ID: N/A

15635 ALTON PKWY
STE 350
IRVINE, CA 92618

Effective as of 01-AUG-24

BOWNES, MARISA, LCSW

Provider ID: N/A

15635 ALTON PKWY
STE 350
IRVINE, CA 92618

Effective as of 01-AUG-24

HUMPHRIES, CORINNE, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

HUMPHRIES, CORINNE, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350

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

IRVINE, CA 92618
Effective as of 01-DEC-23

MARQUEZ, ANTONIO, LCSW

Provider ID: N/A

 15635 ALTON PKWY STE
350

IRVINE, CA 92618
Effective as of 01-JUN-24

PASTERNAK, RACHEL, LCSW

Provider ID: N/A

 15635 ALTON PKWY STE
350

IRVINE, CA 92618
Effective as of 01-JUL-24

PASTERNAK, RACHEL, LCSW

Provider ID: N/A

 15635 ALTON PKWY STE
350

IRVINE, CA 92618
Effective as of 01-JUL-24

PYUN, JEONG, LCSW

Provider ID: N/A

 15635 ALTON PKWY STE
350

IRVINE, CA 92618
Effective as of 01-MAY-24

PYUN, JEONG, LCSW

Provider ID: N/A

 15635 ALTON PKWY STE
350

IRVINE, CA 92618
Effective as of 01-MAY-24

**LICENSED PROFESSIONAL
CLINICAL COUNSELOR**

**KURPIUS-BROCK, MARINDA,
LPCC**

Provider ID: N/A

 15635 ALTON PKWY STE

350
IRVINE, CA 92618
Effective as of 01-MAY-24

**KURPIUS-BROCK, MARINDA,
LPCC**

Provider ID: N/A

 15635 ALTON PKWY STE
350

IRVINE, CA 92618
Effective as of 01-MAY-24

**MARRIAGE FAMILY
THERAPIST**

BLAKEMORE, JASON, MFT

Provider ID: N/A

 15635 ALTON PKWY STE
350

IRVINE, CA 92618
Effective as of 01-MAY-24

BLAKEMORE, JASON, MFT

Provider ID: N/A

 15635 ALTON PKWY STE
350

IRVINE, CA 92618
Effective as of 01-MAY-24

CASEY, CARLEE, MFT

Provider ID: N/A

 15635 ALTON PKWY STE
350

IRVINE, CA 92618
Effective as of 01-MAY-24

CASEY, CARLEE, MFT

Provider ID: N/A

 15635 ALTON PKWY STE
350

IRVINE, CA 92618
Effective as of 01-MAY-24

FATEMI, SEPIDEH, MFT

Provider ID: N/A

 15635 ALTON PKWY STE
350

IRVINE, CA 92618
Effective as of 01-JUN-24

FATEMI, SEPIDEH, MFT

Provider ID: N/A

 15635 ALTON PKWY STE
350

IRVINE, CA 92618
Effective as of 01-JUN-24

HAYDIS, MARIA, MFT

Provider ID: N/A

 15635 ALTON PKWY STE
350

IRVINE, CA 92618
Effective as of 01-JUL-24

HAYDIS, MARIA, MFT

Provider ID: N/A

 15635 ALTON PKWY STE
350

IRVINE, CA 92618
Effective as of 01-JUL-24

JOHNSTON, KARLY, MFT

Provider ID: N/A

 15635 ALTON PKWY STE
350

IRVINE, CA 92618
Effective as of 01-MAY-24

JOHNSTON, KARLY, MFT

Provider ID: N/A

 15635 ALTON PKWY STE
350

IRVINE, CA 92618
Effective as of 01-MAY-24

LIU, CHIA CHI, MFT

Provider ID: N/A

 15635 ALTON PKWY STE
350

IRVINE, CA 92618

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

Effective as of 01-JUL-23

LIU, CHIA CHI, MFT

Provider ID: N/A

☒ 15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-JUL-23

MAJDALANI, KAREN, MFT

Provider ID: N/A

☒ 60 STEPPING STONE
IRVINE, CA 92603

Effective as of 01-JUN-23

MAJDALANI, KAREN, MFT

Provider ID: N/A

☒ 60 STEPPING STONE
IRVINE, CA 92603

Effective as of 01-JUN-23

MCCURRY, LISA, MFT

Provider ID: N/A

☒ 15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-MAY-24

MCCURRY, LISA, MFT

Provider ID: N/A

☒ 15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-MAY-24

MCGUCKIN, RICHARD, MFT

Provider ID: N/A

☒ 31 MORNING GLORY
IRVINE, CA 92603

Effective as of 01-OCT-21

MCINTYRE, SUSAN, MFT

Provider ID: N/A

☒ 15635 ALTON PKWY STE
350

IRVINE, CA 92618

Effective as of 01-DEC-23

MCINTYRE, SUSAN, MFT

Provider ID: N/A

☒ 15635 ALTON PKWY STE
350

IRVINE, CA 92618

Effective as of 01-DEC-23

ONEILL, SEAN, MFT

Provider ID: N/A

☒ 60 STEPPING STONE
IRVINE, CA 92603

Effective as of 01-JUN-23

ONEILL, SEAN, MFT

Provider ID: N/A

☒ 60 STEPPING STONE
IRVINE, CA 92603

Effective as of 01-JUN-23

ROMERO, DIANA, MFT

Provider ID: N/A

☒ 15635 ALTON PKWY STE
350

IRVINE, CA 92618

Effective as of 01-MAY-24

ROMERO, DIANA, MFT

Provider ID: N/A

☒ 15635 ALTON PKWY STE
350

IRVINE, CA 92618

Effective as of 01-MAY-24

SHAH, SALMA, MFT

Provider ID: N/A

☒ 15635 ALTON PKWY STE
350

IRVINE, CA 92618

Effective as of 01-DEC-23

SHAH, SALMA, MFT

Provider ID: N/A

☒ 15635 ALTON PKWY STE
350

IRVINE, CA 92618

Effective as of 01-DEC-23

SHARMA, POOJA, MFT

Provider ID: N/A

☒ 15635 ALTON PKWY STE
350

IRVINE, CA 92618

Effective as of 01-MAY-24

SHARMA, POOJA, MFT

Provider ID: N/A

☒ 15635 ALTON PKWY STE
350

IRVINE, CA 92618

Effective as of 01-MAY-24

MATERNAL AND FETAL MEDICINE

BUSH, MELISSA, MD†

Provider ID: N/A

☒ 15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618

Effective as of 01-SEP-16

BUSH, MELISSA, MD†

Provider ID: N/A

☒ 15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618

Effective as of 01-FEB-21

CHAU, CINDY, MD

Provider ID: N/A

☒ 15785 LAGUNA CANYON
RD STE 360


IRVINE, CA 92618

Effective as of 01-MAY-24

DAY, ROBERT, MD†


Provider ID: N/A

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

 15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618
Effective as of 01-MAY-22


KFIR, MENASHE, MD†

Provider ID: N/A

 15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618
Effective as of 01-SEP-16


KFIR, MENASHE, MD†

Provider ID: N/A

 15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618
Effective as of 01-JAN-23


KFIR, MENASHE, MD†

Provider ID: N/A

 15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618
Effective as of 01-JAN-23


KFIR, MENASHE, MD†

Provider ID: N/A

 15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618
Effective as of 01-JUN-19


KFIR, MENASHE, MD†

Provider ID: N/A

 15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618
Effective as of 01-JAN-23

KFIR, MENASHE, MD†


Provider ID: N/A

 15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-FEB-23

MASAKI, DAMON, MD†


Provider ID: N/A

 15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-DEC-19

MASAKI, DAMON, MD†


Provider ID: N/A

 15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-MAY-19

SHRIVASTAVA, VINEET, MD

Provider ID: N/A


 15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-MAR-23

MEDICAL ONCOLOGY

BECERRA, CARLOS, MD


Provider ID: N/A

 16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-MAR-23

BECERRA, CARLOS, MD


Provider ID: N/A

 16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-MAR-23

HAMOUI, NAHID, MD†


Provider ID: N/A

 16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618

Effective as of 01-SEP-13

KHAGI, SIMON, MD


Provider ID: N/A

 16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-OCT-23

KHAGI, SIMON, MD

Provider ID: N/A

 16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-OCT-23

MITA, MONICA, MD

Provider ID: N/A

 16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-MAY-24

MITA, MONICA, MD


Provider ID: N/A

 16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-MAY-24

PANDIT, LALITA, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618


Teleservice

Effective as of 01-JAN-21

NEPHROLOGY

AHDOOT, JACOB, MD†

Provider ID: N/A

 15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618

Effective as of 01-MAY-12

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

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618
Effective as of 01-JUN-18

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618
Effective as of 01-JAN-20

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618
Effective as of 01-JAN-21

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618
Effective as of 01-JAN-18

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618
Effective as of 01-JAN-14

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618
Effective as of 01-APR-11

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON

RD STE 220
IRVINE, CA 92618
Effective as of 01-OCT-23

JAMES, JOJI, MD

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618
Effective as of 01-AUG-23

MANSOURY, HADI, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

MESBAH, AZITA, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Teleservice

Effective as of 01-MAY-23

SAWHNEY, SAJEET, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JUL-24

SAWHNEY, SAJEET, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-APR-21

YANG, PHILIP, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618

Effective as of 01-MAY-20

YANG, PHILIP, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618
Effective as of 01-JUL-17

YANG, PHILIP, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618
Effective as of 01-JUN-18

YANG, PHILIP, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618
Effective as of 01-OCT-19

YANG, PHILIP, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618
Effective as of 01-OCT-23

NEUROLOGY

CLEEREMANS, BRUCE, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-21

JANKOWSKI, PAWEL, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAY-23

MAHDAD, MEHRDAD, MD†

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

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-JAN-17

MAHDAD, MEHRDAD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-JAN-17

MAHDAD, MEHRDAD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-JAN-14

MAHDAD, MEHRDAD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-APR-08

MAHDAD, MEHRDAD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-OCT-21

MAHDAD, MEHRDAD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-OCT-21

PARK, JAMES, DO

Provider ID: N/A

16305 SAND CANYON AVE
STE 200

IRVINE, CA 92618

Effective as of 01-OCT-22

PARK, JAMES, DO

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-22

PATEL, JAY, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-JAN-20

THAKKAR, SANDEEP, DO†

Provider ID: N/A

16405 SAND CANYON AVE
STE 265
IRVINE, CA 92618

Effective as of 01-AUG-22

THAKKAR, SANDEEP, DO†

Provider ID: N/A

16405 SAND CANYON AVE
STE 265
IRVINE, CA 92618

Effective as of 01-AUG-22

THAKKAR, SANDEEP, DO†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAR-19

THAKKAR, SANDEEP, DO†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAR-18

WHITMAN, GREGORY, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-20

WHITMAN, GREGORY, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-21

NEUROLOGY CHILD

ELBALALESY, NASER, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-AUG-23

ELBALALESY, NASER, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-JUN-19

ELBALALESY, NASER, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-AUG-23

ELBALALESY, NASER, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-AUG-23

ELBALALESY, NASER, MD†

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

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618
Effective as of 01-AUG-23

ELBALALESY, NASER, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618
Effective as of 01-OCT-22

ELBALALESY, NASER, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 350

IRVINE, CA 92618
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618
Effective as of 01-MAR-19

NUCLEAR MEDICINE

REDDY, RYAN, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 215
IRVINE, CA 92618
Effective as of 01-OCT-23

REDDY, RYAN, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 215
IRVINE, CA 92618
Effective as of 01-OCT-23

OBSTETRICS / GYNECOLOGY

AHDOOT, MORRIS, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618
Effective as of 01-FEB-21

AHDOOT, MORRIS, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618
Effective as of 01-FEB-21

AHDOOT, MORRIS, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618
Effective as of 01-APR-20

AHDOOT, MORRIS, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618
Effective as of 01-APR-20

AHDOOT, MORRIS, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618
Effective as of 01-APR-11

AHDOOT, MORRIS, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618
Effective as of 01-MAY-12

AHDOOT, MORRIS, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618
Effective as of 01-JAN-18

AHDOOT, MORRIS, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618
Effective as of 01-JAN-21

AHDOOT, MORRIS, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618

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

Effective as of 01-JUL-12

BARR, JESSICA, DO

Provider ID: N/A

☐ 22 ODYSSEY STE 200
IRVINE, CA 92618

Effective as of 01-DEC-23

BARR, JESSICA, DO

Provider ID: N/A

☐ 22 ODYSSEY STE 200
IRVINE, CA 92618

Effective as of 01-DEC-23

BUSH, MELISSA, MD†

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-MAY-24

COUGH, HEIDI, MD

Provider ID: N/A

☐ 16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-22

DAVIS, STEPHANIE, MD

Provider ID: N/A

☐ 16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-22

HASHEMI, EMAD, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-NOV-20

HASHEMI, EMAD, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE

STE 220

IRVINE, CA 92618

Effective as of 01-NOV-20

KONG, GRACE, MD

Provider ID: N/A

☐ 16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-22

LEE, KATHERINE, MD

Provider ID: N/A

☐ 16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-23

LEE, KATHERINE, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618

Effective as of 01-JUN-23

LIN, JAMES, MD

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 901
IRVINE, CA 92618

Effective as of 01-SEP-15

MARINESCU, CATALIN, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 265
IRVINE, CA 92618

Effective as of 01-JAN-21

MARINESCU, CATALIN, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 265
IRVINE, CA 92618

Effective as of 01-JAN-20

MASAKI, DAMON, MD†

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-JAN-22

MASAKI, DAMON, MD†

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-JAN-22

MENDELSON, SUSAN, MD

Provider ID: N/A

☐ 16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-NOV-23

MILLER, JAMIE, MD

Provider ID: N/A

☐ 16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-NOV-23

PETERS, AMY, DO

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618

Effective as of 01-NOV-23

PETERS, AMY, DO

Provider ID: N/A


☐ 16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-NOV-23

STERNFELD, DANIEL, MD†


Provider ID: N/A

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

 16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618
Effective as of 01-SEP-20


STERNFELD, DANIEL, MD†

Provider ID: N/A

 16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618
Effective as of 01-JUN-24

TANAMAI, VAYA, MD†


Provider ID: N/A

 16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618
Effective as of 01-MAY-20

OPHTHALMOLOGY


GE, NENGJIE, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618
Effective as of 01-JUL-12


GE, NENGJIE, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618
Effective as of 01-JAN-17

GE, NENGJIE, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618
Effective as of 01-JAN-18

GE, NENGJIE, MD†


Provider ID: N/A

 16300 SAND CANYON AVE

STE 608
IRVINE, CA 92618
Effective as of 01-MAR-23


GE, NENGJIE, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618
Effective as of 01-MAR-23


GE, NENGJIE, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618
Effective as of 01-OCT-23


GHIASI, ZAHRA, MD†

Provider ID: N/A

 113 WATERWORKS WAY
STE 245
IRVINE, CA 92618
Effective as of 01-JAN-17


GWYNN, DAVID, MD

Provider ID: N/A

 22 ODYSSEY STE 150
IRVINE, CA 92618
Effective as of 01-MAR-23


LEE, ANDREW, MD

Provider ID: N/A

 18 ENDEAVOR STE 104
IRVINE, CA 92618
Effective as of 01-MAY-23


LEE, JIMMY, MD†

Provider ID: N/A

 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618
Effective as of 01-OCT-23


LEE, ANDREW, MD

Provider ID: N/A

 18 ENDEAVOR STE 104
IRVINE, CA 92618
Effective as of 01-OCT-23


LEE, JIMMY, MD†

Provider ID: N/A

 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618
Effective as of 01-JUL-22


MARVASTI, AMIR, MD

Provider ID: N/A

 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618
Effective as of 01-JAN-23


MARVASTI, AMIR, MD

Provider ID: N/A

 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618
Effective as of 01-OCT-23


NGUYEN, BAO-THU, MD†

Provider ID: N/A

 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618*
Effective as of 01-OCT-23


NGUYEN, BAO-THU, MD†

Provider ID: N/A

 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618
Effective as of 01-MAY-19

NGUYEN, BAO-THU, MD†

Provider ID: N/A

 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

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

Effective as of 01-MAY-19

NGUYEN, BAO-THU, MD†

Provider ID: N/A

📄 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618*

Effective as of 01-JAN-23

OAKEY, ZACKERY, MD

Provider ID: N/A

📄 114 PACIFICA STE 390
IRVINE, CA 92618

Effective as of 01-JUL-24

OAKEY, ZACKERY, MD

Provider ID: N/A

📄 114 PACIFICA STE 390
IRVINE, CA 92618

Effective as of 01-JUL-24

TAYANI, RAMIN, MD

Provider ID: N/A

📄 22 ODYSSEY STE 150
IRVINE, CA 92618

Effective as of 01-MAR-23

VAIDYA, NADEEM, MD†

Provider ID: N/A

📄 16100 SAND CANYON AVE
STE 385
IRVINE, CA 92618

Effective as of 01-MAR-16

VAIDYA, NADEEM, MD†

Provider ID: N/A

📄 16100 SAND CANYON AVE
STE 385
IRVINE, CA 92618

Effective as of 01-OCT-23

VAIDYA, NADEEM, MD†

Provider ID: N/A

📄 16100 SAND CANYON AVE
STE 385

IRVINE, CA 92618

Effective as of 01-JAN-21

VAIDYA, NADEEM, MD†

Provider ID: N/A

📄 16100 SAND CANYON AVE
STE 385

IRVINE, CA 92618

Effective as of 01-FEB-21

VAIDYA, NADEEM, MD†

Provider ID: N/A

📄 16100 SAND CANYON AVE
STE 385

IRVINE, CA 92618

Effective as of 01-FEB-21

OPTOMETRIST

OWYANG, ASHLEY, OD

Provider ID: N/A

📄 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-JAN-23

OWYANG, ASHLEY, OD

Provider ID: N/A

📄 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-OCT-23

TRAN, STEPHANIE, OD

Provider ID: N/A

📄 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-OCT-23

TRAN, STEPHANIE, OD

Provider ID: N/A

📄 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-JAN-23

WANG, STEVEN, OD

Provider ID: N/A

📄 22 ODYSSEY STE 150
IRVINE, CA 92618

Effective as of 01-OCT-23

WANG, MATTHEW, OD†

Provider ID: N/A

📄 22 ODYSSEY STE 150
IRVINE, CA 92618

Effective as of 01-OCT-23

WANG, MATTHEW, OD†

Provider ID: N/A

📄 22 ODYSSEY STE 150
IRVINE, CA 92618

Effective as of 01-JAN-23

WANG, MATTHEW, OD†

Provider ID: N/A

📄 22 ODYSSEY STE 150
IRVINE, CA 92618

Effective as of 01-JAN-18

ORAL MAXILLOFACIAL SURGEON

KALANTARI, OUZHAN, DMD

Provider ID: N/A

📄 114 PACIFICA STE 420
IRVINE, CA 92618

Effective as of 01-NOV-23

OTOLARYNGOLOGY

BALAKER, ASHLEY, MD†

Provider ID: N/A

📄 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-JUN-19

BALAKER, ASHLEY, MD†

Provider ID: N/A

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

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JUN-24

BALAKER, ASHLEY, MD†
Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-MAY-19

BALAKER, ASHLEY, MD†
Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-APR-23

BALAKER, ASHLEY, MD†
Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-APR-23

BUEN, FLOYD, MD†
Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-DEC-20

BUEN, FLOYD, MD†
Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-DEC-20

BUEN, FLOYD, MD†
Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-DEC-20

BUEN, FLOYD, MD†
Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-NOV-20

BUEN, FLOYD, MD†
Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-NOV-20

CHO, MICHAEL, MD†
Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-JAN-15

CHO, MICHAEL, MD†
Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-JAN-15

CROCKETT, DENNIS, MD†
Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JUL-19

CROCKETT, DENNIS, MD†
Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JUL-19

CROCKETT, DENNIS, MD†
Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JAN-18

GE, NORMAN, MD†
Provider ID: N/A

113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-FEB-23

GE, NORMAN, MD†
Provider ID: N/A

113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-OCT-12

GE, NORMAN, MD†
Provider ID: N/A

113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-JAN-23

GE, NORMAN, MD†
Provider ID: N/A

113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-FEB-23

GE, NORMAN, MD†
Provider ID: N/A

113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-JAN-18

GE, NORMAN, MD†
Provider ID: N/A

113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-FEB-23

LUU, QUANG, MD†
Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-OCT-18

LUU, QUANG, MD†
Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618

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

Effective as of 01-OCT-18

MUNDI, JAGMEET, MD†

Provider ID: N/A

☒ 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-MAY-19

MUNDI, JAGMEET, MD†

Provider ID: N/A

☒ 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-JUN-16

MUNDI, JAGMEET, MD†

Provider ID: N/A

☒ 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-JUN-16

PETTIS, ROBERT, MD†

Provider ID: N/A

☒ 16100 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-MAY-20

SUN, JOHN, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-MAR-16

SUN, PAUL, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-NOV-17

SUN, PAUL, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-OCT-23

SUN, JOHN, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-NOV-17

SUN, JOHN, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-NOV-17

SUN, PAUL, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-NOV-17

SUN, JOHN, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-OCT-23

SUN, PAUL, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-FEB-16

SUN, PAUL, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-21

SUN, JOHN, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-17

SUN, PAUL, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100

IRVINE, CA 92618

Effective as of 01-JAN-17

SUN, JOHN, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-21

SUN, JOHN, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-20

SUN, PAUL, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-14

SUN, JOHN, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-14

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

☒ 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-AUG-16

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

☒ 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-AUG-16

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

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

Effective as of 01-FEB-16

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-NOV-17

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-OCT-23

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-NOV-17

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-21

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-14

ZUCKERMAN, KENNETH, MD

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 704
IRVINE, CA 92618

Effective as of 01-JUL-12

PEDIATRICS

SUN, STEVEN, MD

Provider ID: N/A

☞ 22 ODYSSEY STE 230
IRVINE, CA 92618

Effective as of 01-MAY-24

PHYS MED/ REHAB PAIN MEDICINE

PATEL, KETAN, MD

Provider ID: N/A

☞ 113 WATERWORKS WAY
STE 240
IRVINE, CA 92618

Effective as of 01-MAY-24

PHYSICAL MEDICINE / REHABILITATION

LAI, KHANG, DO

Provider ID: N/A

☞ 15701 ROCKFIELD BLVD
IRVINE, CA 92618

Effective as of 01-NOV-14

LAI, KHANG, DO

Provider ID: N/A

☞ 15701 ROCKFIELD BLVD
IRVINE, CA 92618

Effective as of 01-APR-11

LAI, KHANG, DO

Provider ID: N/A

☞ 15701 ROCKFIELD BLVD
IRVINE, CA 92618

Effective as of 01-DEC-14

SEKO, KYLE, DO

Provider ID: N/A

☞ 9080 IRVINE CENTER DR
IRVINE, CA 92618

Effective as of 01-FEB-22

PHYSICIANS ASSISTANT

ALMANZA, MORENNE, PA

Provider ID: N/A

☞ 16105 SAND CANYON AVE

STE 260

IRVINE, CA 92618

Effective as of 01-JUN-24

ALMANZA, MORENNE, PA

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-JUN-24

BOLADIAN, LANA, PA

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-JUN-24

BOLADIAN, LANA, PA

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-JUN-24

BOW, LINDA, PA†

Provider ID: N/A

☞ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

CARR, OLIVIA, PA

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-APR-24

CARR, OLIVIA, PA

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-APR-24

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

CHRISTIE, CAMERON, PA

Provider ID: N/A

8607 IRVINE CENTER DR
IRVINE, CA 92618
Effective as of 01-DEC-23

KIM, MOSES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-APR-21

KISCADEN, LAUREN, PA

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-APR-23

KISCADEN, LAUREN, PA

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-APR-23

PHILLIPS, JOSHUA, PA

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-AUG-24

PHILLIPS, JOSHUA, PA

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-AUG-24

ROUGHLEY, MATTHEW, PA

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-DEC-23

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-NOV-22

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-NOV-22

STONE, MICHELLE, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-FEB-23

STONE, MICHELLE, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JAN-23

STONE, MICHELLE, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JAN-23

STONE, MICHELLE, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JAN-23

STONE, MICHELLE, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-FEB-23

WONG, POLLYANNA, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JAN-23

WONG, POLLYANNA, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JAN-23

WU, VANNA, PA

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JUL-24

WU, VANNA, PA

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JUL-24

WU, VANNA, PA

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

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

Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-MAR-24

PODIATRIST

BATHAEE, FARSHAD, DPM

Provider ID: N/A

113 WATERWORKS WAY
STE 250
IRVINE, CA 92618

Effective as of 01-DEC-21

COYER, MICHAEL, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-JUN-24

COYER, MICHAEL, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-JUL-18

COYER, MICHAEL, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-JAN-20

KOLODENKER, GENNADY, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-JUL-18

KOLODENKER, GENNADY, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-JUN-24

LIN, PARKSON, DPM

Provider ID: N/A

2 HUGHES STE 150
IRVINE, CA 92618

Effective as of 01-JAN-17

ROOHIAN, ARSHIA, DPM

Provider ID: N/A

113 WATERWORKS WAY
STE 250
IRVINE, CA 92618

Effective as of 01-DEC-21

ROOHIAN, ARSHIA, DPM

Provider ID: N/A

113 WATERWORKS WAY
STE 250
IRVINE, CA 92618

Effective as of 01-JUL-20

SOLAR, SARA, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-NOV-22

SOLAR, SARA, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270

IRVINE, CA 92618

Effective as of 01-NOV-22

TIEN, AUDRIS, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-DEC-20

TIEN, AUDRIS, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-DEC-20

TIEN, AUDRIS, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-JUL-21

TIEN, AUDRIS, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-JUL-21

VINCENT, EBONIE, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-JAN-21

VINCENT, EBONIE, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

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

Effective as of 01-AUG-19

VINCENT, EBONIE, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-AUG-19

YANG, ANDREW, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-DEC-20

YANG, ANDREW, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-DEC-20

YANG, DAVID, DPM

Provider ID: N/A

18 ENDEAVOR STE 206
IRVINE, CA 92618

Effective as of 01-OCT-23

YANG, DAVID, DPM

Provider ID: N/A

18 ENDEAVOR STE 206
IRVINE, CA 92618

Effective as of 01-JAN-23

PSYCHIATRY

RITTER, AARON, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-NOV-22

RITTER, AARON, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-NOV-22

RITTER, AARON, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-NOV-22

RITTER, AARON, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-NOV-22

SALO, CLINT, DO†

Provider ID: N/A

2 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-NOV-16

SALO, CLINT, DO†

Provider ID: N/A

2 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-AUG-17

SALO, CLINT, DO†

Provider ID: N/A

2 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-AUG-17

SALO, CLINT, DO†

Provider ID: N/A

2 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-NOV-16

SZPUNAR, MERCEDES, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-MAR-23

SZPUNAR, MERCEDES, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-MAR-23

SZPUNAR, MERCEDES, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-MAR-23

SZPUNAR, MERCEDES, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-MAR-23

PSYCHOLOGIST

ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

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

<p>📄 15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-JUL-24</p> <p>ALEXANDER, DEBORAH, PSYD Provider ID: N/A</p> <p>📄 15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-JUL-24</p> <p>ALEXANDER, DEBORAH, PSYD Provider ID: N/A</p> <p>📄 15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-DEC-23</p> <p>ALEXANDER, DEBORAH, PSYD Provider ID: N/A</p> <p>📄 15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-DEC-23</p> <p>ALEXANDER, DEBORAH, PSYD Provider ID: N/A</p> <p>📄 15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-JUL-24</p> <p>ALEXANDER, DEBORAH, PSYD Provider ID: N/A</p> <p>📄 15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-JUL-24</p> <p>HUFANA, ALYSSA, PhD Provider ID: N/A</p> <p>📄 15635 ALTON PKWY STE 350 IRVINE, CA 92618</p>	<p>Effective as of 01-AUG-24</p> <p>HUFANA, ALYSSA, PhD Provider ID: N/A</p> <p>📄 15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-AUG-24</p> <p>HUFANA, ALYSSA, PhD Provider ID: N/A</p> <p>📄 15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-AUG-24</p> <p>HUFANA, ALYSSA, PhD Provider ID: N/A</p> <p>📄 15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-AUG-24</p> <p>HUFANA, ALYSSA, PhD Provider ID: N/A</p> <p>📄 15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-AUG-24</p> <p>KANG, EILEEN, PhD Provider ID: N/A</p> <p>📄 6 VENTURE IRVINE, CA 92618 Effective as of 01-MAR-20</p> <p>KANG, EILEEN, PhD Provider ID: N/A</p> <p>📄 6 VENTURE IRVINE, CA 92618 Effective as of 01-MAR-20</p> <p>KANG, EILEEN, PhD Provider ID: N/A</p> <p>📄 6 VENTURE IRVINE, CA 92618 Effective as of 01-MAR-20</p> <p>KANG, EILEEN, PhD Provider ID: N/A</p> <p>📄 6 VENTURE IRVINE, CA 92618</p>	<p>Effective as of 01-MAR-20</p> <p>LEHMAN, ERICA, PSYD Provider ID: N/A</p> <p>📄 15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-MAY-24</p> <p>LEHMAN, ERICA, PSYD Provider ID: N/A</p> <p>📄 15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-MAY-24</p> <p>LEHMAN, ERICA, PSYD Provider ID: N/A</p> <p>📄 15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-MAY-24</p> <p>LEHMAN, ERICA, PSYD Provider ID: N/A</p> <p>📄 15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-MAY-24</p> <p>LEHMAN, ERICA, PSYD Provider ID: N/A</p> <p>📄 15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-MAY-24</p> <p>LEHMAN, ERICA, PSYD Provider ID: N/A</p> <p>📄 15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-MAY-24</p> <p>MILLER, ASHLEY, PSYD Provider ID: N/A</p> <p>📄 16405 SAND CANYON AVE STE 220 IRVINE, CA 92618 Effective as of 01-JUL-24</p> <p>MILLER, ASHLEY, PSYD Provider ID: N/A</p> <p>📄 16405 SAND CANYON AVE STE 220 IRVINE, CA 92618 Effective as of 01-JUL-24</p> <p>MILLER, ASHLEY, PSYD</p>
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C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JUL-24

MILLER, ASHLEY, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JUL-24

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-24

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-24

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-24

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-24

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350

IRVINE, CA 92618

Effective as of 01-DEC-23

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-JUL-24

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-JUL-24

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-JUL-24

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-JUL-24

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

PETERSON, JENYFFER, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

PETERSON, JENYFFER, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

PETERSON, JENYFFER, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

PETERSON, JENYFFER, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

PULMONARY DISEASES

EL-BERSHAWI, AHMED, MD[†]

Provider ID: N/A

4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-JUN-22

EL-BERSHAWI, AHMED, MD[†]

Provider ID: N/A

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

 4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-JUN-22

GHAZARIAN, ZERON, MD†

Provider ID: N/A

 16305 SAND CANYON AVE
STE 225
IRVINE, CA 92618

Effective as of 01-MAR-21

GOZZO, YVETTE, MD

Provider ID: N/A

 16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-JAN-21

HARIANAWALA, SALIM, MD†

Provider ID: N/A

 4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-JUN-22

HARIANAWALA, SALIM, MD†

Provider ID: N/A

 4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-JUN-22

RADIATION ONCOLOGY

LIN, KEVIN, MD†

Provider ID: N/A

 16105 SAND CANYON AVE
IRVINE, CA 92618

Effective as of 01-JAN-21

LIN, KEVIN, MD†

Provider ID: N/A


 16105 SAND CANYON AVE
STE 150
IRVINE, CA 92618

Effective as of 01-JAN-20

RADIOLOGY DIAGNOSTIC

ULANER, GARY, MD†

Provider ID: N/A

 16105 SAND CANYON AVE
STE 215
IRVINE, CA 92618

Effective as of 01-OCT-22

ULANER, GARY, MD†

Provider ID: N/A

 16105 SAND CANYON AVE
STE 215
IRVINE, CA 92618

Effective as of 01-OCT-22

SURGERY COLON

SURGERY

MILANCHI, SIAMAK, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618

Effective as of 01-APR-15

MILANCHI, SIAMAK, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618

Effective as of 01-APR-15

MILANCHI, SIAMAK, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618

Effective as of 01-JAN-21

NG, DANIEL, MD

Provider ID: N/A

 16305 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-MAY-24

NG, DANIEL, MD

Provider ID: N/A

 16305 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-MAY-24

SURGERY GENERAL

CHUNG, NATHAN, MD†


Provider ID: N/A

 16405 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-MAR-21

CHUNG, NATHAN, MD†

Provider ID: N/A

 16405 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-MAR-21

COLEMAN, COLLEEN, MD


Provider ID: N/A

 16305 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-JAN-20

FORRESTER, JARED, MD

Provider ID: N/A

 16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-OCT-23

FORRESTER, JARED, MD

Provider ID: N/A

 16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-OCT-23

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

HAMOUI, NAHID, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-DEC-19

HAMOUI, NAHID, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-JAN-21

HAMOUI, NAHID, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-JAN-23

HAMOUI, NAHID, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-JAN-14

HAMOUI, NAHID, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-DEC-19

HURWITZ, MICHAEL, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JAN-20

JENSEN, NATISHA, MD

Provider ID: N/A

16305 SAND CANYON AVE

STE 260

IRVINE, CA 92618

Effective as of 01-AUG-23

KRAFT, ELIZABETH, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 160
IRVINE, CA 92618
Effective as of 01-OCT-23

KRAFT, ELIZABETH, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 160
IRVINE, CA 92618
Effective as of 01-OCT-23

MACDONALD, HEATHER, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 160
IRVINE, CA 92618
Effective as of 01-JAN-21

MILANCHI, SIAMAK, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-JAN-18

NISHANIAN, GARABED, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 350
IRVINE, CA 92618
Effective as of 01-JAN-20

NISHANIAN, GARABED, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 350
IRVINE, CA 92618
Effective as of 01-NOV-15

SHAVER, JOHN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
IRVINE, CA 92618
Effective as of 01-NOV-19

SHAVER, JOHN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
IRVINE, CA 92618
Effective as of 01-NOV-19

WANG, THOMAS, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-MAY-24

WOLF, RONALD, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-NOV-23

SURGERY GENERAL VASCULAR

NISHANIAN, GARABED, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 350
IRVINE, CA 92618
Effective as of 01-JAN-21

NISHANIAN, GARABED, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 350
IRVINE, CA 92618
Effective as of 01-NOV-15

SURGERY

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

NEUROLOGICAL

JANKOWSKI, PAWEL, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAY-23

MEHTA, VIVEK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-21

MEHTA, VIVEK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-21

MEHTA, VIVEK, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 300
IRVINE, CA 92618

Effective as of 01-APR-24

MEHTA, VIVEK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-AUG-21

OZGUR, BURAK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-21

OZGUR, BURAK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-MAR-23

SURGERY ORTHOPEDIC

ALEXANDER, GERALD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-MAR-18

ALEXANDER, GERALD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-MAR-18

ALEXANDER, GERALD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-JAN-21

ALI, RAED, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 240
IRVINE, CA 92618

Effective as of 01-JAN-19

ALI, RAED, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 225
IRVINE, CA 92618

Effective as of 01-JAN-23

ALI, RAED, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 240
IRVINE, CA 92618

Effective as of 01-JAN-23

ALI, RAED, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 240
IRVINE, CA 92618

Effective as of 01-OCT-23

ALI, RAED, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 225
IRVINE, CA 92618

Effective as of 01-OCT-23

AMINIAN, ARASH, MD†


Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618


Effective as of 01-NOV-21

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


AMINIAN, ARASH, MD†

Provider ID: N/A
 22 ODYSSEY STE 205
 IRVINE, CA 92618
 Effective as of 01-NOV-21


AMINIAN, ARASH, MD†

Provider ID: N/A
 22 ODYSSEY STE 205
 IRVINE, CA 92618
 Effective as of 01-NOV-21


AMINIAN, ARASH, MD†

Provider ID: N/A
 22 ODYSSEY STE 205
 IRVINE, CA 92618
 Effective as of 01-MAR-21


AMINIAN, ARASH, MD†

Provider ID: N/A
 22 ODYSSEY STE 205
 IRVINE, CA 92618
 Effective as of 01-DEC-21

AMINIAN, ARASH, MD†

Provider ID: N/A
 22 ODYSSEY STE 205
 IRVINE, CA 92618
 Effective as of 01-FEB-23

AMINIAN, ARASH, MD†

Provider ID: N/A
 22 ODYSSEY STE 205
 IRVINE, CA 92618
 Effective as of 01-SEP-23


DEBOTTIS, DANIEL, MD

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 511
 IRVINE, CA 92618
 Effective as of 01-OCT-23


DEBOTTIS, DANIEL, MD

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 511
 IRVINE, CA 92618
 Effective as of 01-OCT-23


DUNPHY, TAYLOR, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 400
 IRVINE, CA 92618
 Effective as of 01-JAN-21


GITTINGS, DANIEL, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 511
 IRVINE, CA 92618
 Effective as of 01-FEB-22


GITTINGS, DANIEL, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 511
 IRVINE, CA 92618
 Effective as of 01-NOV-21

GITTINGS, DANIEL, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 511
 IRVINE, CA 92618
 Effective as of 01-NOV-21

GITTINGS, DANIEL, MD†


Provider ID: N/A
 16300 SAND CANYON AVE
 STE 511
 IRVINE, CA 92618
 Effective as of 01-FEB-22

GORDON, MICHAEL, MD


Provider ID: N/A
 16300 SAND CANYON AVE
 STE 400

IRVINE, CA 92618
 Effective as of 01-JAN-21

GRAHAM, SCOTT, MD

Provider ID: N/A
 22 ODYSSEY STE 205
 IRVINE, CA 92618
 Effective as of 01-SEP-23


HAGHVERDIAN, BRANDON, MD

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 511
 IRVINE, CA 92618
 Effective as of 01-DEC-23


HAGHVERDIAN, BRANDON, MD

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 511
 IRVINE, CA 92618
 Effective as of 01-DEC-23


HUNTER, MICHAEL, MD

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 400
 IRVINE, CA 92618
 Effective as of 01-MAR-24

HUNTER, MICHAEL, MD

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 400
 IRVINE, CA 92618
 Effective as of 01-OCT-22

JOHNSON, BRYCE, MD†

Provider ID: N/A
 22 ODYSSEY STE 205
 IRVINE, CA 92618
 Effective as of 01-MAR-21

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

JOHNSON, BRYCE, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JUN-24

JOHNSON, BRYCE, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-FEB-21

JOHNSON, BRYCE, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-DEC-21

JOHNSON, BRYCE, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

KADAKIA, NIMISH, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

KADAKIA, NIMISH, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-FEB-21

KADAKIA, NIMISH, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-FEB-17

KADAKIA, NIMISH, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205

IRVINE, CA 92618

Effective as of 01-FEB-21

KADAKIA, NIMISH, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-FEB-17

KADAKIA, NIMISH, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-DEC-21

KADAKIA, NIMISH, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JUL-23

KADAKIA, NIMISH, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-MAR-21

KADAKIA, NIMISH, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JUL-23

KASSAM, HAFIZ, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618
Effective as of 01-FEB-22

KIM, ABRAHAM, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JAN-24

KIM, ABRAHAM, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JAN-24

KIM, ABRAHAM, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JAN-24

KIM, ABRAHAM, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JAN-24

KIM, ABRAHAM, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JAN-23

KIM, ABRAHAM, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JAN-23

KIM, ABRAHAM, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

KIM, ABRAHAM, MD†





Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-OCT-23

LEE, RICHARD, MD

Provider ID: N/A

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

 16300 SAND CANYON AVE STE 400 IRVINE, CA 92618 Effective as of 01-JAN-21	Effective as of 01-SEP-23	 16300 SAND CANYON AVE STE 511 IRVINE, CA 92618 Effective as of 01-DEC-20
LIN, DARIUS, MD† Provider ID: N/A	MOSKOW, LONNIE, MD Provider ID: N/A	PARVARESH, KEVIN, MD† Provider ID: N/A
 22 ODYSSEY STE 270B IRVINE, CA 92618 Effective as of 01-JUN-17	 22 ODYSSEY STE 205 IRVINE, CA 92618 Effective as of 01-SEP-23	 16300 SAND CANYON AVE STE 511 IRVINE, CA 92618 Effective as of 01-DEC-20
MOLHO, DAVID, MD Provider ID: N/A	NIETO, MICHAEL, MD Provider ID: N/A	PATEL, AMAR, MD† Provider ID: N/A
 22 ODYSSEY STE 205 IRVINE, CA 92618 Effective as of 01-JUN-24	 16300 SAND CANYON AVE STE 511 IRVINE, CA 92618 Effective as of 01-JUN-21	 22 ODYSSEY STE 205 IRVINE, CA 92618 Effective as of 01-DEC-21
MOLHO, DAVID, MD Provider ID: N/A	NIETO, MICHAEL, MD Provider ID: N/A	PATEL, AMAR, MD† Provider ID: N/A
 22 ODYSSEY STE 205 IRVINE, CA 92618 Effective as of 01-DEC-23	 16300 SAND CANYON AVE STE 511 IRVINE, CA 92618 Effective as of 01-JUN-21	 22 ODYSSEY STE 205 IRVINE, CA 92618 Effective as of 01-SEP-23
MOLHO, DAVID, MD Provider ID: N/A	NINH, CHRISTOPHER, MD† Provider ID: N/A	PYRKO, PETER, MD Provider ID: N/A
 22 ODYSSEY STE 205 IRVINE, CA 92618 Effective as of 01-DEC-23	 113 WATERWORKS WAY STE 240 IRVINE, CA 92618 Effective as of 01-MAY-21	 22 ODYSSEY STE 205 IRVINE, CA 92618 Effective as of 01-OCT-23
MOLHO, DAVID, MD Provider ID: N/A	NINH, CHRISTOPHER, MD† Provider ID: N/A	SCUDDAY, TRAVIS, MD† Provider ID: N/A
 22 ODYSSEY STE 205 IRVINE, CA 92618 Effective as of 01-DEC-23	 113 WATERWORKS WAY STE 240 IRVINE, CA 92618 Effective as of 01-JAN-23	 16300 SAND CANYON AVE STE 511 IRVINE, CA 92618 Effective as of 01-SEP-18
MOLHO, DAVID, MD Provider ID: N/A	NINH, CHRISTOPHER, MD† Provider ID: N/A	SCUDDAY, TRAVIS, MD† Provider ID: N/A
 22 ODYSSEY STE 205 IRVINE, CA 92618 Effective as of 01-DEC-23	 113 WATERWORKS WAY STE 240 IRVINE, CA 92618 Effective as of 01-OCT-23	 16300 SAND CANYON AVE STE 511 IRVINE, CA 92618 Effective as of 01-SEP-18
MONTGOMERY, ROBERT, MD Provider ID: N/A	PARVARESH, KEVIN, MD† Provider ID: N/A	SCUDDAY, TRAVIS, MD†
 22 ODYSSEY STE 205 IRVINE, CA 92618		

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

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-JAN-21

TING, JAMES, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

Effective as of 01-JAN-21

**VENEZIANO, CHRISTOPHER,
MD**

Provider ID: N/A

22 ODYSSEY STE 210
IRVINE, CA 92618

Effective as of 01-SEP-23

WANG, WILLIAM, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

Effective as of 01-AUG-22

WANG, WILLIAM, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

Effective as of 01-AUG-22

WHITE, JON, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-FEB-03

WHITE, JON, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511

IRVINE, CA 92618

Effective as of 01-AUG-18

WHITE, JON, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-DEC-12

WONG, JEFFREY, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-FEB-20

WONG, JEFFREY, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-FEB-20

WONG, JEFFREY, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-20

WONG, JEFFREY, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-OCT-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-DEC-21

YOUDERIAN, ARI, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-23

ZHANG, JOANNE, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

Effective as of 01-NOV-22

ZHANG, JOANNE, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

Effective as of 01-NOV-22

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

SURGERY THORACIC

KANAAN, SAMER, MD†

Provider ID: N/A

📄 4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-APR-22

KANAAN, SAMER, MD†

Provider ID: N/A

📄 4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-APR-22

KANAAN, SAMER, MD†

Provider ID: N/A

📄 4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-APR-22

KANAAN, SAMER, MD†

Provider ID: N/A

📄 4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-APR-22

KANAAN, SAMER, MD†

Provider ID: N/A

📄 16105 SAND CANYON AVE
IRVINE, CA 92618

Effective as of 01-APR-19

KANAAN, SAMER, MD†

Provider ID: N/A

📄 4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-APR-22

KANAAN, SAMER, MD†

Provider ID: N/A

📄 4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-DEC-23

UROLOGY

BUI, DON, MD†

Provider ID: N/A

📄 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

BUI, DON, MD†

Provider ID: N/A

📄 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

BUI, DON, MD†

Provider ID: N/A

📄 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

BUI, DON, MD†

Provider ID: N/A

📄 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

BUI, DON, MD†

Provider ID: N/A

📄 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-24

BUI, DON, MD†

Provider ID: N/A

📄 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-23

BUI, DON, MD†

Provider ID: N/A

📄 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618*

Effective as of 01-OCT-22

BUI, DON, MD†

Provider ID: N/A

📄 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-23

BUI, DON, MD†

Provider ID: N/A

📄 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-DEC-23

ELKHOURY, FUAD, MD

Provider ID: N/A

📄 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

📄 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

📄 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

📄 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

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

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-23

ELKHOURY, FUAD, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-23

GRUENENFELDER, JENNIFER, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-21

HO, TAMMY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-21

HO, TAMMY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-FEB-22

HO, TAMMY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-DEC-20

HO, TAMMY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-AUG-19

HO, TAMMY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-AUG-19

HO, TAMMY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-AUG-19

HO, TAMMY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-AUG-19

HO, TAMMY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-AUG-19

HO, TAMMY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-23

HO, TAMMY, MD†

Provider ID: N/A

16305 SAND CANYON AVE

STE 200

IRVINE, CA 92618

Effective as of 01-MAY-19

HO, TAMMY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-19

HO, TAMMY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-19

KIM, MOSES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

KIM, MOSES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-23

KIM, MOSES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-23

KIM, MOSES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-SEP-18

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

KIM, MOSES, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-SEP-18

KIM, MOSES, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-DEC-23

KIM, MOSES, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-21

MEAGLIA, JAMES, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-21

MEAGLIA, JAMES, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-24

MEAGLIA, JAMES, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-DEC-19

MEAGLIA, JAMES, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

Effective as of 01-DEC-19

MEAGLIA, JAMES, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-DEC-23

MEAGLIA, JAMES, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-23

MEAGLIA, JAMES, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-23

MEAGLIA, JAMES, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

MEAGLIA, JAMES, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

MEAGLIA, JAMES, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

NAKAMURA, LEAH, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

NAKAMURA, LEAH, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-23

NAKAMURA, LEAH, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-23

NAKAMURA, LEAH, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-APR-21

NAKAMURA, LEAH, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-24

NAKAMURA, LEAH, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-21

SHOURESHI, POONE, MD

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

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-AUG-23

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-DEC-19

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200

IRVINE, CA 92618

Effective as of 01-JUN-24

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-DEC-19

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-21

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-23

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-23

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-23

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-18

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-23

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE

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

STE 200
IRVINE, CA 92618
Effective as of 01-FEB-23

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-24

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-21

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-DEC-19

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-DEC-19

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-APR-21

SU, DANIEL, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-DEC-19

SU, DANIEL, MD†

Provider ID: N/A

16305 SAND CANYON AVE
IRVINE, CA 92618

Effective as of 01-SEP-18

SU, DANIEL, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-SEP-18

SU, DANIEL, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-21

SU, DANIEL, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-23

SU, DANIEL, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-23

TAKESITA, KEN, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618

Effective as of 01-OCT-15

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE

STE 200
IRVINE, CA 92618
Effective as of 01-JAN-23

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-23

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-MAY-21

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-21

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

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-18

TORREY, ROBERT, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JUL-24

TORREY, ROBERT, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JUL-24

ZHAO, HANSON, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-NOV-22

ZHAO, HANSON, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-NOV-22

ALLERGY IMMUNOLOGY

MODENA, BRIAN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-22

MODENA, BRIAN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Teleservice
Effective as of 01-MAY-22

SHARMA, KUSUM, MD

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Effective as of 01-JUN-22

SHARMA, KUSUM, MD

Provider ID: N/A

9834 GENESEE AVE STE
400
LA JOLLA, CA 92037
Effective as of 01-JUL-21

SHARMA, KUSUM, MD

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Effective as of 01-JAN-23

ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

FILIPOVIC, MAYA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

FUNDINGSLAND, BRENT, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-21

NARLA, VINOD, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

NGO, DONALD, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

PARDO, PATRICIA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-24

ROY, KEVIN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

SAHA, DEVJANI, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-24

SUYDAM, STEVEN, MD†

Provider ID: N/A

9300 CAMPUS POINT DR

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

LA JOLLA, CA 92037
Effective as of 01-DEC-21

TULLY, JEFFREY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

TZENG, ERIC, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

VAUGHN, DOUGLAS, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

WANG, MICHELLE, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

ANESTHESIOLOGY

CRITICAL CARE MEDICINE

KRAUSE, MARTIN, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-21

ANESTHESIOLOGY PAIN MANAGEMENT

MADHAV, SANDIP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-MAR-21

MADHAV, SANDIP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-APR-21

AUDIOLOGIST

BAXTER, STEPHANIE, AuD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

BAXTER, STEPHANIE, AuD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

BAXTER, STEPHANIE, AuD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

BAXTER, STEPHANIE, AuD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HARRIS, GENEVIEVE, AuD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

KING, JOHN, AuD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

RUBY, CHARLES, AuD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

SPRIGGS, MEGHAN, AuD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

TSANG, JOYCE, AuD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

WIAN, DEBORAH, AuD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

WILLIAMS, ALICIA, AuD†

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
Effective as of 01-JUL-21

ZETTNER, ERIKA, AuD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

CARDIAC

ELECTROPHYSIOLOGY

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

COHEN, DAVID, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
940
LA JOLLA, CA 92037
Effective as of 01-MAY-20

COHEN, DAVID, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
940
LA JOLLA, CA 92037
Effective as of 01-SEP-21

HAMZEI, ALI, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
780
LA JOLLA, CA 92037
Effective as of 01-JAN-21

MENDENHALL, GEORGE, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
940
LA JOLLA, CA 92037
Effective as of 01-JAN-23

MENDENHALL, GEORGE, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
940
LA JOLLA, CA 92037
Effective as of 01-JUL-18

PATEL, JIGAR, DO[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
810
LA JOLLA, CA 92037
Effective as of 01-JAN-22

WHITWAM, WAYNE, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE

780

LA JOLLA, CA 92037
Effective as of 01-JAN-21

CARDIOVASCULAR DISEASE

AIZIN, VITALI, MD[†]

Provider ID: N/A

📍 9834 GENESEE AVE STE 101
LA JOLLA, CA 92037
Effective as of 01-JAN-23

AIZIN, VITALI, MD[†]

Provider ID: N/A

📍 9834 GENESEE AVE STE 101
LA JOLLA, CA 92037
Effective as of 01-FEB-21

AVALOS, ROY, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
780
LA JOLLA, CA 92037
Effective as of 01-JAN-21

BERMAN, BRETT, MD[†]

Provider ID: N/A

📍 9834 GENESEE AVE STE 101
LA JOLLA, CA 92037
Effective as of 01-FEB-21

CARAZO, MATTHEW, MD[†]

Provider ID: N/A

📍 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
Effective as of 01-NOV-21

CHARLAT, MARTIN, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
780
LA JOLLA, CA 92037
Effective as of 01-JAN-21

COHEN, DAVID, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
940
LA JOLLA, CA 92037
Effective as of 01-JAN-21

COSTELLO, DENNIS, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
430
LA JOLLA, CA 92037
Effective as of 01-JAN-21

COSTELLO, DENNIS, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
430
LA JOLLA, CA 92037
Effective as of 01-JUL-20

DAMANI, SAMIR, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
650
LA JOLLA, CA 92037
Effective as of 01-JUN-22

DURAN, EDWARD, MD

Provider ID: N/A

📍 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

HONG, ERIC, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
780
LA JOLLA, CA 92037
Effective as of 01-JAN-21

KARIMIAN, AMIR, MD

Provider ID: N/A

📍 9434 MEDICAL CENTER DR

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

LA JOLLA, CA 92037
Effective as of 01-DEC-23

KEEN, WILLIAM, MD†

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

KULHANEK, JAN, MD

Provider ID: N/A

9850 GENESEE AVE STE
780
LA JOLLA, CA 92037
Effective as of 01-JUL-23

KUMAR, KRIS, DO

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

MENDENHALL, GEORGE, MD†

Provider ID: N/A

9850 GENESEE AVE STE
940
LA JOLLA, CA 92037
Effective as of 01-JAN-21

PATEL, JIGAR, DO†

Provider ID: N/A

9850 GENESEE AVE STE
810
LA JOLLA, CA 92037
Effective as of 01-MAR-24

RAPEPORT, KEVIN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
940B
LA JOLLA, CA 92037
Effective as of 01-MAR-16

RUSSO, ROBERT, MD†

Provider ID: N/A

9850 GENESEE AVE STE
350
LA JOLLA, CA 92037
Effective as of 01-JAN-21

SAB, SHIV, MD†

Provider ID: N/A

9850 GENESEE AVE STE
780
LA JOLLA, CA 92037
Effective as of 01-DEC-22

SHAPIRO, HILARY, MD

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

SHEREV, DIMITRI, MD

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-SEP-23

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-FEB-24

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

JULIAN, FIDES, LAC

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

JULIAN, FIDES, LAC

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-FEB-24

JULIAN, FIDES, LAC

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

MURRAY, STEVEN, LAC

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

MURRAY, STEVEN, LAC

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-FEB-24

MURRAY, STEVEN, LAC

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

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

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC
Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

CERTIFIED NURSE PRACTITIONER

ASHMAN, ELLEN, NP†
Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

ATILLO, RONALD MAR, NP†
Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

BELL, ANDREA, NP†
Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-22

BIRD, JEREMY, NP
Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

BIRD, JEREMY, NP
Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

BISCHER, MARGARET, NP
Provider ID: N/A

7855 IVANHOE AVE STE 110
LA JOLLA, CA 92037
Effective as of 01-MAR-24

BURNEY, BRAEANNE, NP†
Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

CAMAQUIN, MIA, NP
Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

CAMAQUIN, MIA, NP
Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

CONNER, PAMELA, NP
Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

CONNER, PAMELA, NP
Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

CONNOR, CAROLINE, NP†
Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-JUN-21

CZYPULL, MONICA, NP
Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-21

CZYPULL, MONICA, NP
Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-SEP-21

DE DIOS, SARAH JANE, NP
Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

DRISCOLL, KARRIE, NP†
Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-DEC-21

EVANS, ELISABETH, NP
Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-APR-24

GIOVANNETTI, ERIN, NP†
Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-21

GOMEZ, LESLIE, NP
Provider ID: N/A

3855 HEALTH SCIENCES
DR

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

LA JOLLA, CA 92093
Effective as of 01-MAY-23

GOMEZ, LESLIE, NP

Provider ID: N/A

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GOMEZ, LESLIE, NP

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GOMEZ, LESLIE, NP

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GOSHEN, KIRSTEN, NP†

Provider ID: N/A

📍 9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-JAN-21

GOSHEN, KIRSTEN, NP†

Provider ID: N/A

📍 9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-SEP-22

HADINGER, JANE, NP

Provider ID: N/A

📍 8950 VILLA LA JOLLA DR
STE C129
LA JOLLA, CA 92037

Teleservice

Effective as of 01-DEC-23

HALPERN, DAVID, NP†

Provider ID: N/A

📍 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-JAN-21

HANNA, LINDSAY, NP†

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-OCT-21

HAYS, SHEENA, NPF

Provider ID: N/A

📍 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-24

HEURING, JULIE, NP†

Provider ID: N/A

📍 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-DEC-21

HOEFKE, ANGELA, NPF

Provider ID: N/A

📍 9850 GENESEE AVE
STE 770
LA JOLLA, CA 92037*
Effective as of 01-SEP-24

JENKINS, ERIN, NP

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

JENKINS, ERIN, NP

Provider ID: N/A

📍 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

JONES, CHRISTA, NP†

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-21

JONES, LAILA, NP

Provider ID: N/A

📍 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-JUN-23

JORJADZE, KETEVAN, NP

Provider ID: N/A

📍 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-22

KHUAT, LIEN, NP†

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

KORMANIK, PATRICIA, NP†

Provider ID: N/A

📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JUL-21

LEE, MINDY, NP

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

LEE, MINDY, NP

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

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

LEE, MINDY, NP

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

LEE, MINDY, NP

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

LOWE, ASHLEY, NP

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Teleservice

Effective as of 01-MAY-24

LOWE, ASHLEY, NP

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-23

MATTERA, BETH, NPF

Provider ID: N/A

9898 GENESEE AVE FL 4
LA JOLLA, CA 92037
Effective as of 01-MAY-16

MATTHESS, JANETTE, NP†

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-FEB-22

MATTHESS, JANETTE, NP†

Provider ID: N/A

8910 VILLA LA JOLLA DR

STE 100
LA JOLLA, CA 92037
Effective as of 01-FEB-22

MCCALLION, DANIELLE, NP†

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-OCT-21

MCCALLION, DANIELLE, NP†

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-SEP-22

MCCLAIN, MEGAN, NP†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-AUG-22

MCCLAIN, MEGAN, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

MCPHERSON, SAMANTHA, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice

Effective as of 01-AUG-21

MICHAEL, NICOLE, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-MAY-21

MICK, SHARON, NP

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MOONEY, PATRICIA, NP†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Teleservice

Effective as of 01-JAN-24

MOONEY, PATRICIA, NP†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Teleservice

Effective as of 01-MAY-21

MORENO, MANUEL, NP†

Provider ID: N/A

9850 GENESEE AVE STE

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

320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-22

MULVEY, CAOILFHIONN, NP†

Provider ID: N/A
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-AUG-22

MWAURA, WAIRIMU, NP†

Provider ID: N/A
9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-21

MWAURA, WAIRIMU, NP†

Provider ID: N/A
9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-24

PETREK, MEAGAN, NP†

Provider ID: N/A
9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

PITECK, CAITLIN, NPF

Provider ID: N/A
9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-24

RENFROE, ILANA, NP

Provider ID: N/A
7855 IVANHOE AVE STE 110
LA JOLLA, CA 92037
Teleservice
Effective as of 01-DEC-21

ROLPH, KELLIE, NP

Provider ID: N/A
9888 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-AUG-24

ROSSI, CATHERINE, NP†

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

SALINAS, NIECEL, NP†

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

SETIAWAN, EUGENIE, NPF†

Provider ID: N/A
9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-DEC-21

SILVESTRI, NICOLE, NP

Provider ID: N/A
9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-MAY-21

SOLOMON, AMANDA, NP

Provider ID: N/A
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SRILASAK, MICHELE, NP†

Provider ID: N/A
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JUL-21

TOMICICH, STEPHANIE, NP†

Provider ID: N/A
9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-24

TOMICICH, STEPHANIE, NP†

Provider ID: N/A
9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

TOMICICH, STEPHANIE, NP†

Provider ID: N/A
9834 GENESEE AVE STE
416
LA JOLLA, CA 92037
Effective as of 01-JAN-21

TRAN, RICHARD, NPF

Provider ID: N/A
9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUL-23

TRAN, TRAN, NP†

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

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

TRAN, RICHARD, NPF

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037

Teleservice

Effective as of 01-MAR-24

TRAN, TRAN, NP†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

TREJO, ANA, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUL-24

TREJO, ANA, NP

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-JUL-24

TREJO, ANA, NP

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-JUL-24

TRUJILLO, DALE, NP†

Provider ID: N/A

9350 CAMPUS POINT DR
STE 2B
LA JOLLA, CA 92037

Effective as of 01-APR-21

TUCKER, LANIKA, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUL-24

VIERRA, ERIN, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-MAY-21

WARD, MICHAEL, NP

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

WEIDNER, ANNE, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-MAY-21

WILLEY, MARTI, NP†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-21

WILLEY, MARTI, NP†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

YEO, ALEXANDRIA, NP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

ZUNIGA, VANIA, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-MAY-21

CERTIFIED REGISTERED NURSE ANESTHETIST

CALABRIA, MEGAN, CRNA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

CANTRELL, SARAH, CRNA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

COLE, JASON, CRNA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUL-21

DOLLAND, STEVEN, CRNA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUL-21

DULAY, JOTI, CRNA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

ESTABROOK, LARA, CRNA

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Effective as of 01-JUL-23

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

EVANS, CATHERINE, CRNA

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-23

FIEDLER, DEREK, CRNA

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

GONZALEZ, LISA, CRNA

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

GRIFFIN, SETH, CRNA

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

JOHNSTON, RACHEL, CRNA

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

LAZARUS, ELIZABETH, CRNA

Provider ID: N/A

📄 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JUL-23

POLIKOWSKI, SAMANTHA, CRNA†

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

POLLOM, JESSICA, CRNA†

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-21

RAMIREZ, NICOLE, CRNA†

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

ROADMAN, KEENE, CRNA

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SACKS, BRENT, CRNA†

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-21

SNODGRASS, JULIE, CRNA†

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-21

SOTO, GILBERTO, CRNA†

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-22

CERTIFIED REGISTERED NURSE MIDWIFE

CHOI, NATHALIE, CRNM

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

CORRY, ANDREA, CRNM

Provider ID: N/A

📄 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

ELY-KONOSKE, RACHEL, CRNM

Provider ID: N/A

📄 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

ELY-KONOSKE, RACHEL, CRNM

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

NATHAN, CARLY, CRNM

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-23

CHIROPRACTOR

BERKOFF, GREGORY, DC

Provider ID: N/A

📄 8950 VILLA LA JOLLA DR
STE C129
LA JOLLA, CA 92037
Effective as of 01-MAY-21

CLINICAL NEUROPSYCHOLOGIST

ALASANTRO, LORI, PhD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
470
LA JOLLA, CA 92037
Effective as of 01-FEB-18

KAUP, ALLISON, PhD†

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

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-MAR-21

DERMATOLOGY

BUSCH, HEIDI, MD

Provider ID: N/A

9850 GENESEE AVE STE
410
LA JOLLA, CA 92037

Effective as of 01-JUL-24

CHANG, TIMOTHY, MD†

Provider ID: N/A

9850 GENESEE AVE STE
850
LA JOLLA, CA 92037

Teleservice

Effective as of 01-OCT-21

GONZALES, DARRELL, MD

Provider ID: N/A

9850 GENESEE AVE STE
850
LA JOLLA, CA 92037

Teleservice

Effective as of 01-OCT-21

NASH-GOELITZ, ALYSSA, MD†

Provider ID: N/A

9850 GENESEE AVE STE
850
LA JOLLA, CA 92037

Teleservice

Effective as of 01-OCT-21

SIDDIQUI, FARYAL, MD

Provider ID: N/A

7720 FAY AVE
LA JOLLA, CA 92037

Effective as of 01-MAY-22

EMERGENCY MEDICINE

BLACK, NICHOLAS, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

Effective as of 01-SEP-21

CHEN, ALICE, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Effective as of 01-NOV-21

CHEN, ALICE, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

GALUST, HENRIK, MD

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

HARDIN, JEREMY, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

HERNANDEZ, CRISTINA, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Effective as of 01-MAY-21

HOGUE, BRENNNA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

HOGUE, BRENNNA, MD

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

KUTZ, CRAIG, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

Effective as of 01-AUG-21

KUTZ, CRAIG, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-21

LIOTTA, BENJAMIN, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Effective as of 01-AUG-21

PARK, JAY, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Effective as of 01-NOV-21

PARK, JAY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-21

SELTZER, JUSTIN, MD†

Provider ID: N/A

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

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-AUG-21

SMITH, CASEY, MD

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SUPAT, BENJAMIN, MD

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

YU, ELAINE, DO

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE A
LA JOLLA, CA 92037
Effective as of 01-JUN-23

YU, ELAINE, DO

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

ENDOCRINOLOGY

METABOLISM DIABETES

IYENGAR, RAVI, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

IYENGAR, RAVI, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

MBA, MBA UZOMA, MD

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037
Effective as of 01-DEC-22

NAGELBERG, JODI, MD†

Provider ID: N/A

8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

PETTUS, JEREMY, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

SCHNEIDER, DARIUS, MD

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037
Teleservice
Effective as of 01-OCT-21

SCHNEIDER, DARIUS, MD

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-23

SHAH, NANDI, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

SHAH, NANDI, MD

Provider ID: N/A

9350 CAMPUS POINT DR

LA JOLLA, CA 92037
Effective as of 01-JAN-24

FAMILY PRACTICE

BOYD, JAMES, MD†

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

JOLICOEUR, MEGAN, DO

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

GASTROENTEROLOGY

BORTNIKER, ETHAN, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JUN-23

GOLDKLANG, ROBERT, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-APR-23

GOLDKLANG, ROBERT, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-SEP-22

HASAN, AWS, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

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

Effective as of 01-JUN-23

HASAN, AWS, MD

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

KLAPHEKE, ROBERT, MD†

Provider ID: N/A

📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-21

LAJOIE, ADRIANNE, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Effective as of 01-SEP-22

MAYER, ANDREW, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE
770
LA JOLLA, CA 92037

Effective as of 01-AUG-24

MAYER, ANDREW, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
820
LA JOLLA, CA 92037*

Effective as of 01-NOV-14

MAYER, ANDREW, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
820
LA JOLLA, CA 92037

Effective as of 01-JAN-21

MAYER, ANDREW, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE

770

LA JOLLA, CA 92037

Effective as of 01-JUL-24

PAREDEZ, EDWARD, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
820
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

PAREDEZ, EDWARD, MD

Provider ID: N/A

📄 9850 GENESEE AVE
STE 770
LA JOLLA, CA 92037*

Effective as of 01-SEP-24

PAREDEZ, EDWARD, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
820
LA JOLLA, CA 92037

Teleservice

Effective as of 01-NOV-14

PAREDEZ, EDWARD, MD

Provider ID: N/A

📄 9850 GENESEE AVE
STE 770
LA JOLLA, CA 92037

Effective as of 01-AUG-24

SHAH, SHAILJA, MD†

Provider ID: N/A

📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-21

SHAH, SHAILJA, MD†

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-21

SYAL, GAURAV, MD

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

SYAL, GAURAV, MD

Provider ID: N/A

📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

YOUSSEF, FADY, MD

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

YOUSSEF, FADY, MD

Provider ID: N/A

📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

GENETICS MEDICAL

JONES, MARILYN, MD†

Provider ID: N/A

📄 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037

Effective as of 01-JUN-21

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ, MD†

Provider ID: N/A

📄 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-JUL-21

GYNECOLOGY

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

MARSHALL, CATHARINE, MD

Provider ID: N/A

7301 GIRARD AVE STE 300
LA JOLLA, CA 92037

Effective as of 01-NOV-18

HEMATOLOGY / ONCOLOGY

BANERJEE, PUSHPENDU, MD†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

BANERJEE, PUSHPENDU, MD†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

CHEN, YU-WEI, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-DEC-23

CHEN, YU-WEI, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

SINCLAIR, JAMES, MD†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Effective as of 01-JAN-21

SINCLAIR, JAMES, MD†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Effective as of 01-JUN-18

SINCLAIR, JAMES, MD†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Effective as of 01-JAN-21

SULLIVAN, JESSICA, DO

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-SEP-23

WALLACH, SABINA, MD†

Provider ID: N/A

9850 GENESEE AVE STE
400
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

WALLACH, SABINA, MD†

Provider ID: N/A

9850 GENESEE AVE STE
400
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

HOSPICE AND PALLIATIVE MEDICINE

RUBENSIK, TAMARA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Effective as of 01-FEB-21

SARWAR, NADIA, MD†

Provider ID: N/A

3252 HOLIDAY CT STE 113
LA JOLLA, CA 92037

Effective as of 01-APR-19

HOSPITALIST MD/DO

BADALYAN, SEDA, MD†

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037*

Effective as of 01-AUG-21

COFFLER, ELIANE, MD

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037

Effective as of 01-MAR-23

DJEKIC, KRISTINA, DO†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

DOUGLAS, JASON, MD

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037*

Effective as of 01-JAN-23

FIRESTEIN, CATHERINE, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-21

HAMMOND, CHARLES, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

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

Effective as of 01-APR-21

PAPP, STEPHAN, MD

Provider ID: N/A

📍 9888 GENESEE AVE
LA JOLLA, CA 92037*

Effective as of 01-NOV-22

SCHUETZ, HESTON, MD

Provider ID: N/A

📍 9888 GENESEE AVE
LA JOLLA, CA 92037*

Effective as of 01-APR-24

SHINDO, YURI, MD†

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-21

TONG, ALEXANDER, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUL-23

WILLIAMS, BRANDON, MD†

Provider ID: N/A

📍 9888 GENESEE AVE
LA JOLLA, CA 92037*

Effective as of 01-SEP-21

YANG, BENJAMIN, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

YASSIN, HAZEM, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

INFECTIOUS DISEASE

BARTHEL, ROBERT, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
900

LA JOLLA, CA 92037*

Effective as of 01-JAN-21

KUPPALLI, KRUTIKA, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-23

KUPPALLI, KRUTIKA, MD

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-23

MILLER, H, MD

Provider ID: N/A

📍 9834 GENESEE AVE STE
310

LA JOLLA, CA 92037*

Effective as of 01-FEB-21

RAMIREZ SANCHEZ, CLAUDIA, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUL-23

TANG, MICHAEL, MD

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

INTERNAL MEDICINE

BONAGIRI, PRANAY, DO

Provider ID: N/A

📍 9850 GENESEE AVE

LA JOLLA, CA 92037

Effective as of 01-JUL-24

BORTZ, DAVID, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
570

LA JOLLA, CA 92037*

Teleservice

Effective as of 01-OCT-22

BRAZEL, DANIELLE, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-24

CHETLAPALLI, SURYA, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
900

LA JOLLA, CA 92037*

Effective as of 01-JAN-21

CROWLEY, DOUGLAS, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
900

LA JOLLA, CA 92037*

Effective as of 01-JAN-21

DASHI, ARBEN, MD†

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

GADIYARAM, VARUNA, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

GAN, TERENCE, MD†

Provider ID: N/A

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

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

JEBAIN, JEBAIN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-24

KARNIK, KUSHAL, MD

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-JUN-24

KATSNELSON, MARCELLA, DO

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

LAM, PAMELA, DO[†]

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

LAM, PAMELA, DO[†]

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

LEWIS, GREG, MD[†]

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

LEWIS, GREG, MD[†]

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

LIU, ANDREW, MD

Provider ID: N/A

9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-SEP-23

LIU, ANDREW, MD

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-SEP-23

LUGO, GUSTAVO, MD[†]

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

MARTINEZ, ARMANDO, MD[†]

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

MCCUTCHEON, CLAIRE, MD[†]

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-DEC-22

MIRZA, BASHAR, MD

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-MAR-24

MOOLANI, UJJALA, MD

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MOOLANI, UJJALA, MD

Provider ID: N/A

9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-MAY-23

NOKES, BRANDON, MD[†]

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21

RADWAN, MOHAMED, MD[†]

Provider ID: N/A

9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-JAN-21

RAMOS, JEFFREY, MD[†]

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

RAMOS, JEFFREY, MD[†]

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

SONG, ALEXANDER, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

STEVENS, KENNETH, MD[†]

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

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

STEVENS, KENNETH, MD†

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

TOPPEN, WILLIAM, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

TOROSIAN, KARO, DO†

Provider ID: N/A

9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-SEP-22

TRAN, PHI, DO†

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-JAN-21

TRAN, PHI, DO†

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

TRIVEDI, NAYANA, MD†

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037
Effective as of 01-JAN-21

TRIVEDI, MEHUL, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

YANG, JENNY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

INTERNAL MEDICINE CRITICAL CARE MEDICINE

BOROK, ZEA, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

JAFFE, GILAD, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

JONES, DANIEL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
780
LA JOLLA, CA 92037
Effective as of 01-JAN-21

SULLIVAN, LAUREN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

INTERVENTIONAL CARDIOLOGY

AIZIN, VITALI, MD†

Provider ID: N/A

9834 GENESEE AVE STE 101
LA JOLLA, CA 92037
Effective as of 01-SEP-15

AL KHIAMI, BELAL, MD†

Provider ID: N/A

9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
Effective as of 01-JAN-21

CRUZ RODRIGUEZ, JOSE, MD

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

DAMANI, SAMIR, MD†

Provider ID: N/A

9850 GENESEE AVE STE
650
LA JOLLA, CA 92037
Effective as of 01-NOV-23

GOVEA, ALAYN, MD

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

RAPEPORT, KEVIN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
940B
LA JOLLA, CA 92037
Effective as of 01-JAN-21

WHITWAM, WAYNE, MD†

Provider ID: N/A

9850 GENESEE AVE STE
780
LA JOLLA, CA 92037
Effective as of 01-NOV-20

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

**LICENSED CLINICAL
SOCIAL WORKER**

ELLEDGE, LINDSAY, LCSW

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE 101
LA JOLLA, CA 92037
Effective as of 01-JUL-23

ESTEN, JOHN, LCSW

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-AUG-24

WISHNEK, HANNAH, LCSW†

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

**MARRIAGE FAMILY
THERAPIST**

POZUN, CARA, MFT

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-DEC-23

**MATERNAL AND FETAL
MEDICINE**

EMERUWA, UKACHI, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

MEDICAL ONCOLOGY

BANERJEE, PUSHPENDU, MD†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-18

FLORES, EDNA, MD†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Effective as of 01-JUN-18

FLORES, EDNA, MD†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Effective as of 01-JAN-21

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037

Effective as of 01-MAY-23

CRUZ WHITLEY, JESSICA, MD

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037

Effective as of 01-MAY-23

DAVIS, JASON, MD

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037

Effective as of 01-JUN-23

LAKHERA, YOGITA, MD†

Provider ID: N/A

9834 GENESEE AVE STE
312
LA JOLLA, CA 92037

Teleservice

Effective as of 01-MAR-17

LAKHERA, YOGITA, MD†

Provider ID: N/A

9834 GENESEE AVE STE
312
LA JOLLA, CA 92037

Teleservice

Effective as of 01-MAR-22

LAKHERA, YOGITA, MD†

Provider ID: N/A

9834 GENESEE AVE STE
312
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-22

LAKHERA, YOGITA, MD†

Provider ID: N/A

9834 GENESEE AVE STE
312
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

LAKHERA, YOGITA, MD†

Provider ID: N/A

9834 GENESEE AVE STE
312
LA JOLLA, CA 92037

Teleservice

Effective as of 01-AUG-24

NAMAZY, DAVID, MD

Provider ID: N/A

4225 EXECUTIVE SQ STE
450

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

LA JOLLA, CA 92037
Effective as of 01-JUN-23

STEER, DYLAN, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312

LA JOLLA, CA 92037
Effective as of 01-SEP-15

STEER, DYLAN, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312

LA JOLLA, CA 92037
Effective as of 01-JUL-22

STEER, DYLAN, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312

LA JOLLA, CA 92037
Effective as of 01-JAN-21

STEER, DYLAN, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312

LA JOLLA, CA 92037
Effective as of 01-FEB-05

STEER, DYLAN, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312

LA JOLLA, CA 92037
Effective as of 01-JAN-21

TOROSIAN, KARO, DO†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312

LA JOLLA, CA 92037
Effective as of 01-JAN-21

TOROSIAN, KARO, DO†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312

LA JOLLA, CA 92037
Effective as of 01-DEC-17

TOROSIAN, KARO, DO†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312

LA JOLLA, CA 92037
Effective as of 01-JUL-22

TOROSIAN, KARO, DO†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312

LA JOLLA, CA 92037
Effective as of 01-SEP-20

ZHONG, YAN, MD†

Provider ID: N/A

📄 4225 EXECUTIVE SQ STE
450

LA JOLLA, CA 92037
Effective as of 01-MAR-22

NEUROLOGY

ANSARI, HOSSEIN, MD†

Provider ID: N/A

📄 4180 LA JOLLA VILLAGE
DR STE 240

LA JOLLA, CA 92037
Effective as of 01-MAY-22

CHOUDRY, BILAL, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
470

LA JOLLA, CA 92037
Effective as of 01-FEB-16

CHOUDRY, BILAL, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
470

LA JOLLA, CA 92037
Effective as of 01-FEB-16

DROKER, BRIAN, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE
530

LA JOLLA, CA 92037

Teleservice

Effective as of 01-APR-24

DROKER, BRIAN, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE
530

LA JOLLA, CA 92037*

Teleservice

Effective as of 01-SEP-24

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
470

LA JOLLA, CA 92037

Effective as of 01-FEB-16

GUPTA, VISHAL, DO

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-23

HAAS, RICHARD, MD†

Provider ID: N/A

📄 9350 CAMPUS POINT DR
STE LLB

LA JOLLA, CA 92037

Effective as of 01-OCT-21

KARANJIA, NAVAZ, MD†

Provider ID: N/A

📄 9350 CAMPUS POINT DR

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

LA JOLLA, CA 92037
Effective as of 01-FEB-22

KOCHARIAN, NAIRA, MD†

Provider ID: N/A

9850 GENESEE AVE STE
340

LA JOLLA, CA 92037
Effective as of 01-JAN-21

LUHAR, RIYA, DO

Provider ID: N/A

9850 GENESEE AVE STE
530

LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-23

LUHAR, RIYA, DO

Provider ID: N/A

9850 GENESEE AVE STE
530

LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-24

NIELSEN, AMY, DO†

Provider ID: N/A

9850 GENESEE AVE STE
530

LA JOLLA, CA 92037

Teleservice

Effective as of 01-FEB-21

NIELSEN, AMY, DO†

Provider ID: N/A

9850 GENESEE AVE STE
530

LA JOLLA, CA 92037

Teleservice

Effective as of 01-FEB-21

NIELSEN, AMY, DO†

Provider ID: N/A

9850 GENESEE AVE STE
530

LA JOLLA, CA 92037

Teleservice

Effective as of 01-FEB-21

OH, IRENE, MD†

Provider ID: N/A

9850 GENESEE AVE STE
470

LA JOLLA, CA 92037

Effective as of 01-FEB-16

PADUGA, REMIA, MD†

Provider ID: N/A

9850 GENESEE AVE STE
530

LA JOLLA, CA 92037

Effective as of 01-MAR-21

QAYOUMI, WALI, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLB

LA JOLLA, CA 92037

Effective as of 01-OCT-21

QAYOUMI, WALI, MD†

Provider ID: N/A

9500 GILMAN DR STE 2069
LA JOLLA, CA 92093

Effective as of 01-OCT-21

SADOFF, MARK, MD†

Provider ID: N/A

9850 GENESEE AVE STE
530

LA JOLLA, CA 92037

Effective as of 01-FEB-21

SADOFF, MARK, MD†

Provider ID: N/A

9850 GENESEE AVE STE
470

LA JOLLA, CA 92037

Effective as of 01-FEB-16

SCHIM, JACK, MD†

Provider ID: N/A

9850 GENESEE AVE STE
470

LA JOLLA, CA 92037

Effective as of 01-FEB-16

SCHULTE, JESSICA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Effective as of 01-SEP-21

WANG, CHUNYANG, MD†

Provider ID: N/A

9850 GENESEE AVE STE
470

LA JOLLA, CA 92037

Effective as of 01-FEB-16

WANG, ANCHI, MD†

Provider ID: N/A

9850 GENESEE AVE STE
470

LA JOLLA, CA 92037

Effective as of 01-FEB-16

WANG, CHUNYANG, MD†

Provider ID: N/A

9850 GENESEE AVE STE
470

LA JOLLA, CA 92037

Effective as of 01-FEB-16

WANG, CHUNYANG, MD†

Provider ID: N/A

9850 GENESEE AVE STE
530

LA JOLLA, CA 92037

Effective as of 01-SEP-22

WIEGAND, SARAH, DO†

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

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

NUCLEAR MEDICINE

CHOI, ESTHER, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

GAMIE, SHERIEF, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-24

KIPPER, MICHAEL, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SHARIF TABRIZI, AHMAD, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JUL-21

BONDRE, IOANA, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-OCT-21

CARDENAS, MICHAEL, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

CARDENAS, MICHAEL, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-NOV-21

DELCORE, LAURA, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

DELCORE, LAURA, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

HARVEY, SCOTT, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-21

HARVEY, SCOTT, MD†

Provider ID: N/A

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-MAY-21

HILL, KAITLYN, MD

Provider ID: N/A

9850 GENESEE AVE STE
820
LA JOLLA, CA 92037
Effective as of 01-JAN-24

KURTULUS, MEL, MD

Provider ID: N/A

9850 GENESEE AVE STE
820
LA JOLLA, CA 92037
Effective as of 01-JAN-24

MACKAY, GILLIAN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

MACKAY, GILLIAN, MD

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-DEC-23

MELLENDEZ, ARIANA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

MEURICE, MARIELLE

ERENDIRA LUCILLE, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

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

Effective as of 01-SEP-21

PICKETT, CHARLOTTE, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Effective as of 01-JUL-23

**SPRING-ROBINSON,
CHANDRA, DO†**

Provider ID: N/A

9850 GENESEE AVE STE
770
LA JOLLA, CA 92037

Effective as of 01-JAN-23

**SPRING-ROBINSON,
CHANDRA, DO†**

Provider ID: N/A

9850 GENESEE AVE STE
770
LA JOLLA, CA 92037

Effective as of 01-JAN-21

THOMSON, SAMANTHA, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

Effective as of 01-OCT-21

THOMSON, SAMANTHA, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-OCT-21

OCCUPATIONAL

THERAPIST

MUNCADA, CAESAR, OT†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-APR-22

OPHTHALMOLOGY

ARNETT, JUSTIN, MD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-23

ARNETT, JUSTIN, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

ARNETT, JUSTIN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-NOV-21

BINDER, NICHOLAS, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-NOV-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-DEC-23

BOLO, KYLE, MD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-23

BOLO, KYLE, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

BOLO, KYLE, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

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

Effective as of 01-SEP-23

CHIU, STEPHAN, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Effective as of 01-MAY-22

CHIU, STEPHAN, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Effective as of 01-JUN-23

CHOPLIN, NEIL, MD†

Provider ID: N/A

📍 9834 GENESEE AVE STE
428

LA JOLLA, CA 92037

Effective as of 01-JUL-21

CHOPLIN, NEIL, MD†

Provider ID: N/A

📍 9834 GENESEE AVE STE
428

LA JOLLA, CA 92037

Effective as of 01-AUG-23

CULOTTA, ANTHONY, MD

Provider ID: N/A

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Effective as of 01-FEB-24

ESLANI, MEDI, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

ESLANI, MEDI, MD

Provider ID: N/A

📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-23

ESLANI, MEDI, MD

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

FISH, STEVEN, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Effective as of 01-NOV-22

FISH, STEVEN, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Effective as of 01-APR-23

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Effective as of 01-JAN-21

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Effective as of 01-SEP-22

HENNEIN, LAUREN, MD

Provider ID: N/A

📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-23

HUANG, ALEX, MD†

Provider ID: N/A

📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-DEC-21

HUDSON, HENRY, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Effective as of 01-APR-23

HUDSON, HENRY, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Effective as of 01-APR-22

HUDSON, HENRY, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Effective as of 01-SEP-22

HUDSON, HENRY, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

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

Effective as of 01-MAY-21

LANG, PAUL, MD

Provider ID: N/A

📄 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-23

LANG, PAUL, MD

Provider ID: N/A

📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

LANG, PAUL, MD

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

MCGRAW, JOSEPH, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
428
LA JOLLA, CA 92037

Effective as of 01-NOV-21

MIDTLING, STEPHANIE, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-JUL-24

MORRISON-REYES, JOSHUA, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE

310

LA JOLLA, CA 92037

Effective as of 01-FEB-24

MORTON, ASA, MD

Provider ID: N/A

📄 9834 GENESEE AVE STE
428
LA JOLLA, CA 92037

Effective as of 01-JUL-23

MORTON, ASA, MD

Provider ID: N/A

📄 9834 GENESEE AVE STE
428
LA JOLLA, CA 92037

Effective as of 01-AUG-23

PERRY, ARTHUR, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-FEB-07

PERRY, ARTHUR, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-JAN-21

PERRY, ARTHUR, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-JAN-21

PERRY, ARTHUR, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-OCT-95

PRATT, STEVEN, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-OCT-12

PRATT, STEVEN, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-JAN-21

PRATT, STEVEN, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-JAN-21

PUIG LLANO, MANUEL, MD

Provider ID: N/A

📄 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-JUL-23

ROESKE, RICHMOND, MD

Provider ID: N/A

📄 9834 GENESEE AVE STE
200
LA JOLLA, CA 92037

Effective as of 01-MAR-24

SAMUEL, MICHAEL, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-SEP-22

SATTERFIELD, KELLIE, MD

Provider ID: N/A

📄 9834 GENESEE AVE STE

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

200
LA JOLLA, CA 92037
Effective as of 01-MAR-24

SATTERFIELD, KELLIE, MD

Provider ID: N/A
9415 CAMPUS POINT DR
200
LA JOLLA, CA 92037
Effective as of 01-DEC-23

SCHONBACH, ETIENNE, MD†

Provider ID: N/A
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-21

SHEILS, CATHERINE, MD

Provider ID: N/A
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUN-23

SHEILS, CATHERINE, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SHEILS, CATHERINE, MD

Provider ID: N/A
9834 GENESEE AVE STE
200
LA JOLLA, CA 92037
Effective as of 01-JAN-24

SHOJI, MARISSA, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

SHOJI, MARISSA, MD

Provider ID: N/A
9350 CAMPUS POINT DR

LA JOLLA, CA 92037
Effective as of 01-SEP-23

SHOJI, MARISSA, MD

Provider ID: N/A
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-23

SONG, DELU, MD†

Provider ID: N/A
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-21

SUK, KEVIN, MD

Provider ID: N/A
9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-FEB-24

TOPILOW, NICOLE, MD†

Provider ID: N/A
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-21

WESTEREN, ALAN, MD

Provider ID: N/A
6529 LA JOLLA BLVD
LA JOLLA, CA 92037
Effective as of 01-JAN-23

ZHAO, TAILUN, MD

Provider ID: N/A
9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-JAN-24

ZHAO, TAILUN, MD

Provider ID: N/A
9850 GENESEE AVE STE
310

LA JOLLA, CA 92037
Effective as of 01-JUL-23

ZHAO, TAILUN, MD

Provider ID: N/A
9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-NOV-23

OPTOMETRIST

HOO, PAMELA, OD†

Provider ID: N/A
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-22

JOMOC, CAITLIN, OD

Provider ID: N/A
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUL-23

JOMOC, CAITLIN, OD

Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

JULAZADEH, SARA, OD

Provider ID: N/A
9834 GENESEE AVE STE
428
LA JOLLA, CA 92037
Effective as of 01-SEP-23

KHIEU, TINA, OD

Provider ID: N/A
9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-NOV-23

KHIEU, TINA, OD

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

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-DEC-23

KHIEU, TINA, OD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-MAR-24

KIM, PHILIP, OD†

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAR-22

MARR, RYAN, OD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-JUL-24

MCCLEAN, ESMERALDA, OD†

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-22

TAUNTON, PHILIP, OD†

Provider ID: N/A

9834 GENESEE AVE STE
428
LA JOLLA, CA 92037
Effective as of 01-SEP-21

TAUNTON, PHILIP, OD†

Provider ID: N/A

9834 GENESEE AVE STE
428
LA JOLLA, CA 92037
Effective as of 01-SEP-23

YU, CAROL, OD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

YU, CAROL, OD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

OTOLARYNGOLOGY

BAREISS, ANNA, MD

Provider ID: N/A

4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Teleservice
Effective as of 01-DEC-23

BAREISS, ANNA, MD

Provider ID: N/A

4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Teleservice
Effective as of 01-MAY-23

BRUMUND, KEVIN, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

BRUMUND, KEVIN, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

BRUMUND, KEVIN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

CHANG, ANGELA, MD†

Provider ID: N/A

9834 GENESEE AVE STE 112
LA JOLLA, CA 92037
Effective as of 01-OCT-21

CHANG, ANGELA, MD†

Provider ID: N/A

9834 GENESEE AVE STE 112
LA JOLLA, CA 92037
Effective as of 01-JAN-23

CHANG, ANGELA, MD†

Provider ID: N/A

9834 GENESEE AVE STE 112

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

LA JOLLA, CA 92037
Effective as of 01-JAN-21

CHANG, ANGELA, MD†

Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-20

COFFEY, CHARLES, MD

Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

COFFEY, CHARLES, MD

Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

COFFEY, CHARLES, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

COFFEY, CHARLES, MD

Provider ID: N/A
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

DECONDE, ADAM, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

DECONDE, ADAM, MD†

Provider ID: N/A
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

DECONDE, ADAM, MD†

Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

DECONDE, ADAM, MD

Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

FRIEDMAN, RICK, MD

Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

FRIEDMAN, RICK, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

FRIEDMAN, RICK, MD

Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

FRIEDMAN, RICK, MD

Provider ID: N/A
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD

Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD

Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD†

Provider ID: N/A
9300 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD

Provider ID: N/A
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

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

GUO, THERESA, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GUO, THERESA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GUO, THERESA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GUO, THERESA, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

9350 CAMPUS POINT DR

LA JOLLA, CA 92037
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HUSSEMAN, JACOB, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

KARI, ELINA, MD

Provider ID: N/A

3855 HEALTH SCIENCES

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

DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

KARI, ELINA, MD†

Provider ID: N/A
📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

KARI, ELINA, MD

Provider ID: N/A
📄 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

KARI, ELINA, MD

Provider ID: N/A
📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A
📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A
📄 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A
📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A
📄 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A
📄 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A
📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A
📄 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A
📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

NGUYEN, QUYEN, MD

Provider ID: N/A
📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

NGUYEN, QUYEN, MD

Provider ID: N/A
📄 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

NGUYEN, QUYEN, MD†

Provider ID: N/A
📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

NGUYEN, QUYEN, MD

Provider ID: N/A
📄 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

REUTHER, MARSHA, MD†

Provider ID: N/A
📄 4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Effective as of 01-JAN-21

REUTHER, MARSHA, MD†

Provider ID: N/A
📄 4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Effective as of 01-AUG-23

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A
📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD

Provider ID: N/A
📄 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD

Provider ID: N/A
📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD

Provider ID: N/A
📄 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

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

**VAHABZADEH-HAGH,
ANDREW, MD†**

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

**VAHABZADEH-HAGH,
ANDREW, MD**

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

**VAHABZADEH-HAGH,
ANDREW, MD**

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

**VAHABZADEH-HAGH,
ANDREW, MD**

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

WATSON, DEBORAH, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

WATSON, DEBORAH, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

WATSON, DEBORAH, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

WATSON, DEBORAH, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

WOO, LINDA, MD†

Provider ID: N/A

9834 GENESEE AVE STE 101
LA JOLLA, CA 92037
Effective as of 01-JAN-21

WOO, LINDA, MD†

Provider ID: N/A

9834 GENESEE AVE STE 101

LA JOLLA, CA 92037
Effective as of 01-JUL-22

YAN, CAROL, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

YAN, CAROL, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
Effective as of 01-MAY-23

YAN, CAROL, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

YAN, CAROL, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

PATHOLOGY ANATOMIC CLINICAL

LIN, GRACE, MD†

Provider ID: N/A

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-FEB-22

PEDIATRIC PULMONOLOGY

ANBAR, RAN, MD

Provider ID: N/A

3252 HOLIDAY CT STE 113

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

LA JOLLA, CA 92037
Effective as of 01-NOV-18

PEDIATRIC RADIOLOGY

DWEK, JERRY, MD†

Provider ID: N/A

☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-22

EVORA, DARRYL, MD†

Provider ID: N/A

☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-22

KONING, JEFFREY, MD†

Provider ID: N/A

☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-22

PUGMIRE, BRIAN, MD†

Provider ID: N/A

☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-OCT-21

PEDIATRICS

GROBMAN, LILLIAN, MD†

Provider ID: N/A

☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21

KOOROS, KOOROSH, MD†

Provider ID: N/A

☒ 4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Effective as of 01-FEB-22

PHYSICAL MEDICINE /

REHABILITATION

MADHAV, SANDIP, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

PHYSICIANS ASSISTANT

ABDELWAHHAB, EANAS, PA

Provider ID: N/A

☒ 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-JUN-23

ABRAHAMSEN, KELSEY, PA

Provider ID: N/A

☒ 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-JAN-21

AHN, JORDAN, PA

Provider ID: N/A

☒ 7855 IVANHOE AVE STE 110
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-24

ALBRIGHT, KELSEY, PA†

Provider ID: N/A

☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

ALLERS, JENNA, PA

Provider ID: N/A

☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-23

ARMEEN, GARY, PA†

Provider ID: N/A

☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

BAKER, LINDZEE, PA

Provider ID: N/A

☒ 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Teleservice

Effective as of 01-NOV-22

BECKER, JANTIMA, PA

Provider ID: N/A

☒ 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-DEC-21

CANDARE, VANESSA, PA

Provider ID: N/A

☒ 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-FEB-21

CASO, STEPHEN, PA

Provider ID: N/A

☒ 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-JAN-21

DOUGHERTY, CLARA, PA†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
400
LA JOLLA, CA 92037

Effective as of 01-JAN-21

FELLION, LAUREN, PA

Provider ID: N/A

☒ 9850 GENESEE AVE STE

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

320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-MAY-23

FLORENCE, BRYNA, PA†

Provider ID: N/A
📄 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-21

FREY, LAUREN, PA

Provider ID: N/A
📄 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-OCT-22

GALDAMEZ, ANDREA, PA†

Provider ID: N/A
📄 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-DEC-21

HANSEN, CHRISTINA, PA

Provider ID: N/A
📄 9850 GENESEE AVE STE
210
LA JOLLA, CA 92037
Teleservice
Effective as of 01-OCT-23

HIGGINS, JOSHUA, PA†

Provider ID: N/A
📄 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-JAN-22

HIGGINS, JOSHUA, PA†

Provider ID: N/A
📄 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-JAN-22

HUNTER, JACOB, PA†

Provider ID: N/A
📄 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
Effective as of 01-MAY-21

HUNTER, JACOB, PA

Provider ID: N/A
📄 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HUNTER, JACOB, PA†

Provider ID: N/A
📄 9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
Effective as of 01-FEB-22

HUNTER, JACOB, PA

Provider ID: N/A
📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HUNTER, JACOB, PA

Provider ID: N/A
📄 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

LIU, SHARON, PA

Provider ID: N/A
📄 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice

Effective as of 01-JUN-24

MALLES, CHRISTINA, PA

Provider ID: N/A
📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-24

MARTIN, HALEY, PA

Provider ID: N/A
📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAR-24

MARTIN, HALEY, PA

Provider ID: N/A
📄 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-MAR-24

MARTIN, HALEY, PA

Provider ID: N/A
📄 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAR-24

MATTIOLI, TAYLOR, PA

Provider ID: N/A
📄 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-22


MEGALI, NICOLE, PA

Provider ID: N/A
📄 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Teleservice
Effective as of 01-APR-24

MORDEN, JACQUELINE, PA†


Provider ID: N/A

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

 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-22

MOREO, HUNTER, PA

Provider ID: N/A

 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUL-24


OKADA, MICHELLE, PA†

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-21


OKADA, MICHELLE, PA†

Provider ID: N/A

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-APR-21


PAAMONI, ARIELLE, PA

Provider ID: N/A

 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-22

PELIO, DARREN, PA†

Provider ID: N/A

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-SEP-22

PELIO, DARREN, PA†

Provider ID: N/A

 9400 CAMPUS POINT DR

LA JOLLA, CA 92093
Effective as of 01-SEP-22

PERREAULT, MARK, PA†

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21


PERREAULT, MARK, PA†

Provider ID: N/A

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-AUG-21


RAHIM, ARIANNA, PA

Provider ID: N/A

 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Effective as of 01-OCT-23


SAIKHON, TALIA, PA†

Provider ID: N/A

 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
Effective as of 01-SEP-22


SAINT, MEAGHAN, PA

Provider ID: N/A

 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-DEC-21

SAUNDERS, SARA, PA†

Provider ID: N/A

 9898 GENESEE AVE FL 4
LA JOLLA, CA 92037
Effective as of 01-MAY-16

SHARAF, KAREEM, PA†

Provider ID: N/A

 9434 MEDICAL CENTER DR

LA JOLLA, CA 92037
Effective as of 01-DEC-21


SHARAF, KAREEM, PA†

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21


SHARAF, KAREEM, PA†

Provider ID: N/A

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-DEC-21

SNOWDEN, KELLY, PA

Provider ID: N/A

 7855 IVANHOE AVE STE 110
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21


SPEH, BRIAN, PA

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAR-24


SZABO, HAYLIE, PA

Provider ID: N/A

 9850 GENESEE AVE STE
210
LA JOLLA, CA 92037
Teleservice
Effective as of 01-OCT-22

WAHLIN, TAMARA, PA


Provider ID: N/A

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUN-23

WAHLIN, TAMARA, PA

Provider ID: N/A

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

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JUN-23

WAHLIN, TAMARA, PA

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23


WEIR, JACQUELINE, PA†

Provider ID: N/A

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-21

WRITER, NICOLE, PA


Provider ID: N/A

 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037*
Effective as of 01-FEB-21

PODIATRIST


BERENTER, JAY, DPM†

Provider ID: N/A

 9850 GENESEE AVE STE
510
LA JOLLA, CA 92037
Effective as of 01-OCT-19


BERENTER, JAY, DPM†

Provider ID: N/A

 9850 GENESEE AVE STE
510
LA JOLLA, CA 92037
Effective as of 01-JAN-21

BERGER, COLBY, DPM


Provider ID: N/A

 9850 GENESEE AVE STE
510
LA JOLLA, CA 92037

Effective as of 01-APR-23

BERGER, COLBY, DPM


Provider ID: N/A

 9850 GENESEE AVE STE
510
LA JOLLA, CA 92037

Effective as of 01-JUN-23


KREPS, CHRISTOPHER, DPM†

Provider ID: N/A

 9850 GENESEE AVE STE
510
LA JOLLA, CA 92037
Effective as of 01-MAR-22

KREPS, CHRISTOPHER, DPM†


Provider ID: N/A

 9850 GENESEE AVE STE
510
LA JOLLA, CA 92037
Effective as of 01-SEP-21

PREVENTATIVE MEDICINE GENERAL

STERN, ANNA, MD

Provider ID: N/A

 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037


Teleservice

Effective as of 01-JAN-21

PSYCHIATRY


BRAR, SIMERJEET, MD†

Provider ID: N/A

 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-AUG-21


BRAR, SIMERJEET, MD†

Provider ID: N/A

 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-AUG-21


FINN, DAPHNA, MD†

Provider ID: N/A

 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-SEP-21

FINN, DAPHNA, MD†

Provider ID: N/A

 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-SEP-21


JOSHI, YASH, MD

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

JOSHI, YASH, MD

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

KARANJIA, NAVAZ, MD†

Provider ID: N/A

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-22

KARANJIA, NAVAZ, MD†

Provider ID: N/A

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

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

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-22

LEDBETTER, ALEX, DO

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-JAN-24

LEDBETTER, ALEX, DO

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-JAN-24

LI, XIA, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-21

LI, XIA, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-21

LIU, FRED, MD†

Provider ID: N/A

9300 CAMPUS POINT DR

LA JOLLA, CA 92037

Effective as of 01-NOV-21

LIU, FRED, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

MOORE, SHAVON, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

MOORE, SHAVON, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-NOV-21

MOORE, SHAVON, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

MOORE, SHAVON, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-NOV-21

NICHOLS, ALPHONSO, MD

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-22

QAYOUMI, WALI, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037

Effective as of 01-OCT-21

QAYOUMI, WALI, MD†

Provider ID: N/A

9500 GILMAN DR STE 2069
LA JOLLA, CA 92093

Effective as of 01-OCT-21

QAYOUMI, WALI, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037

Effective as of 01-OCT-21

QAYOUMI, WALI, MD†

Provider ID: N/A

9500 GILMAN DR STE 2069
LA JOLLA, CA 92093

Effective as of 01-OCT-21

REGO KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

REGO KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217

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

LA JOLLA, CA 92037
Effective as of 01-OCT-23

**REGO KEARNEY, JENNIFER,
MD†**

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217

LA JOLLA, CA 92037
Effective as of 01-OCT-23

**REGO KEARNEY, JENNIFER,
MD†**

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217

LA JOLLA, CA 92037
Effective as of 01-OCT-23

**SCHNEEBERGER, ANDRES,
MD†**

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037
Effective as of 01-AUG-22

**SCHNEEBERGER, ANDRES,
MD†**

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037
Effective as of 01-AUG-22

TARVER, LESLIE, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037
Effective as of 01-AUG-22

TARVER, LESLIE, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037
Effective as of 01-AUG-22

PSYCHIATRY CHILD

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9834 GENESEE AVE STE
400

LA JOLLA, CA 92037
Effective as of 01-JUL-21

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9834 GENESEE AVE STE
400

LA JOLLA, CA 92037
Effective as of 01-JUL-21

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710

LA JOLLA, CA 92037
Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710

LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-23

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710

LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9834 GENESEE AVE STE
400

LA JOLLA, CA 92037

Effective as of 01-JUL-21

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9834 GENESEE AVE STE
400

LA JOLLA, CA 92037

Effective as of 01-JUL-21

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710

LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-23

NICHOLS, ALPHONSO, MD

Provider ID: N/A

9850 GENESEE AVE STE
710

LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

9850 GENESEE AVE STE
710

LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-22

**REGO KEARNEY, JENNIFER,
MD†**

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217

LA JOLLA, CA 92037

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

Effective as of 01-OCT-23

REGO KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

REGO KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

REGO KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

***PSYCHIATRY SLEEP
MEDICINE***

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-23

PSYCHOLOGIST

BAILIS, JESSICA, PSYD

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-JUN-23

BAILIS, JESSICA, PSYD

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-JUN-23

BOUTELLE, KERRI, PhD

Provider ID: N/A

3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

BOUTELLE, KERRI, PhD

Provider ID: N/A

3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

CRANDAL, BRENT, PhD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-22

CRANDAL, BRENT, PhD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-22

CUSACK, ANNE, PSYD

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-DEC-23

CUSACK, ANNE, PSYD

Provider ID: N/A

8950 VILLA LA JOLLA DR

STE C101

LA JOLLA, CA 92037

Effective as of 01-DEC-23

EICHEN, DAWN, PhD

Provider ID: N/A

3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

EICHEN, DAWN, PhD

Provider ID: N/A

3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

KAUP, ALLISON, PhD†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-NOV-23

KAUP, ALLISON, PhD†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

KAUP, ALLISON, PhD†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-NOV-23

KAUP, ALLISON, PhD†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

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

Teleservice

Effective as of 01-JAN-24

MINASSIAN, ARPI, PhD[†]

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

MINASSIAN, ARPI, PhD[†]

Provider ID: N/A

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-NOV-21

MINASSIAN, ARPI, PhD[†]

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

MINASSIAN, ARPI, PhD[†]

Provider ID: N/A

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-NOV-21

PARK, JESSIE, PSYD[†]

Provider ID: N/A

📍 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-DEC-21

PARK, JESSIE, PSYD[†]

Provider ID: N/A

📍 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-DEC-21

PELHAM, WILLIAM, PSYD

Provider ID: N/A

📍 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-JUL-24

PELHAM, WILLIAM, PSYD

Provider ID: N/A

📍 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-JUL-24

REED, KRISTIE, PhD[†]

Provider ID: N/A

📍 8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037

Effective as of 01-AUG-22

REED, KRISTIE, PhD

Provider ID: N/A

📍 3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

REED, KRISTIE, PhD[†]

Provider ID: N/A

📍 8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037

Effective as of 01-AUG-22

REED, KRISTIE, PhD

Provider ID: N/A

📍 3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

TARLE, STEPHANIE, PhD

Provider ID: N/A

📍 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-DEC-23

TARLE, STEPHANIE, PhD

Provider ID: N/A

📍 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-DEC-23

PUBLIC HEALTH

PREVENTATIVE MEDICINE

PERLMAN, MONICA, MD

Provider ID: N/A

📍 9850 GENESEE AVE STE
320

LA JOLLA, CA 92037

Effective as of 01-NOV-20

PULMONARY DISEASES

BAILEY, JACOB, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

CORATE, LALAINE, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
370

LA JOLLA, CA 92037

Effective as of 01-JAN-21

CORATE, LALAINE, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
780

LA JOLLA, CA 92037

Effective as of 01-JAN-21

CORATE, LALAINE, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
370

LA JOLLA, CA 92037

Effective as of 01-JUL-20

FE, ALEXANDER, MD[†]

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

Provider ID: N/A

9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-SEP-21

FE, ALEXANDER, MD†

Provider ID: N/A

9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-FEB-23

FRICKS, CARL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-JAN-21

FRICKS, CARL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-JUL-20

GLICKMAN, SAMUEL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-JAN-21

JONES, DANIEL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-JUL-20

MCCAUL, DAVID, MD†

Provider ID: N/A

9850 GENESEE AVE STE
370

LA JOLLA, CA 92037
Effective as of 01-JUL-20

MCCAUL, DAVID, MD†

Provider ID: N/A

9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-JAN-21

MCGUIRE, WILLIAM, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

MUNOZ PINEDA, JORGE, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

PEARCE, ALEX, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

RADWAN, MOHAMED, MD†

Provider ID: N/A

9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-JUL-20

WILTCHIK, ERIN, MD

Provider ID: N/A

9850 GENESEE AVE STE
370
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-24

RADIATION ONCOLOGY

BEAR, JONATHAN, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-APR-23

BRUGGEMAN, ANDREW, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JAN-24

HATTANGADI-GLUTH, JONA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JAN-24

HORN, ADAM, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-APR-23

MACEWAN, IAIN, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JAN-21

TRINGALE, KATHRYN, MD


Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-DEC-23

TRINGALE, KATHRYN, MD


Provider ID: N/A

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

 3960 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-DEC-23

TYE, KAREN, MD

Provider ID: N/A

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JUN-23

YORK, JOHN, MD


Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

RADIOLOGY DIAGNOSTIC


AGANOVIC, LEJLA, MD

Provider ID: N/A

 9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23


AMMIRATI, GIUSEPPE, MD†

Provider ID: N/A

 9834 GENESEE AVE STE 411
LA JOLLA, CA 92037
Effective as of 01-JAN-21

BOLAR, DIVYA, MD

Provider ID: N/A

 9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23


BOSWELL, GILBERT, MD

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23


BRANCH, CODY, MD†

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

BROUHA, SHARON, MD

Provider ID: N/A

 9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

BUI, KEVIN, MD†

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-21


CARSWELL, AIMEE, MD

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23


CHANG, JENNIFER, MD

Provider ID: N/A

 9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

CHENG, KAREN, MD

Provider ID: N/A

 9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23


CHENG, KAREN, MD†

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

CHO, AARON, MD


Provider ID: N/A

 9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23


CHUNG, CHRISTINE, MD

Provider ID: N/A

 9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23


DORROS, STEPHEN, MD

Provider ID: N/A

 9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23


EAJAZI, ALIREZA, MD†

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21


EGHTEDARI, MOHAMMAD, MD

Provider ID: N/A

 9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23


FARID, NIKDOKHT, MD

Provider ID: N/A

 9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23


FAZELI, SOUDABEH, MD

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

FEDERHART, JAY, MD

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-24

FLISZAR, EVELYNE, MD

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

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

FOWLER, KATHRYN, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

GENTILI, AMILCARE, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

HAHN, LEWIS, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

HAHN, MICHAEL, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

HANDWERKER, JASON, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

HAWLEY, DANIEL, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

HOROWITZ, MICHAEL, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

HSIAO, ALBERT, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

HUANG, BRADY, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

JACOBS, KATHLEEN, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

JACOBSON, JON, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

JAFFRAY, PAUL, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

KAROW, DAVID, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

KAROW, DAVID, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

KARUNAMUNI, JENNIFER, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

KIM, ERIC, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

KLIGERMAN, SETH, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

KONDILI, DHIMITER, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

LEE, ROLAND, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

LIM, VIVIAN, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

MAREK BYKOWSKI, JULIE, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

MARKS, ROBERT, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

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

Effective as of 01-JUN-23

MCDONALD, MARIN, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-FEB-22

MCDONALD, MARIN, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

MCNAMEE, CAIRINE, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

MCNAMEE, CAIRINE, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

MURPHY, PAUL, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

NORBASH, ALEXANDER, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

OBOYLE, MARY, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

OBOYLE, MARY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-FEB-22

OJEDA-FOURNIER, HAYDEE, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

PATHRIA, MINI, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

RAKOW-PENNER, REBECCA, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

RESNICK, DONALD, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

RITCHIE, DAVID, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

SADAT, SAYED, DO

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

SAMPATH, SRINATH, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

SAMPATH, SRIHARI, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

SANTILLAN, CYNTHIA, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

SEARLEMAN, ADAM, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

SLATER, JERRY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-21

SMITAMAN, EDWARD, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

SPENGLER, NATHAN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

STEINBERGER, AMANDA, DO

Provider ID: N/A

9850 GENESEE AVE STE
410

LA JOLLA, CA 92037

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

Teleservice

Effective as of 01-JAN-24

STEINBERGER, AMANDA, DO

Provider ID: N/A

9850 GENESEE AVE STE
410
LA JOLLA, CA 92037

Teleservice

Effective as of 01-OCT-23

TAMAYO-MURILLO, DORATHY, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

THOMPSON, COLE, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

UNSDORFER, KYLE, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

VAHDAT, NOUSHIN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUL-23

YORK, VINCENT, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-21

ZAPALA, MATTHEW, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUL-24

REGISTERED DIETITIAN / NUTRITIONIST

CARLSON, STACY, RD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-AUG-24

SALCEDO, ALEXANDRA, RD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-24

REGISTERED PHYSICAL THERAPIST

FERRER, MIRON, PT

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-24

GILLILAND, TYLER, PT

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-JAN-24

HOUSELY, ALEXIS, PT

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

SHARP, SIMPSON, PT

Provider ID: N/A

9350 CAMPUS POINT DR

LA JOLLA, CA 92037

Effective as of 01-JAN-24

TROYER, CORY, PT

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-24

RHEUMATOLOGY

KIM, JANET, MD

Provider ID: N/A

9850 GENESEE AVE STE
420

LA JOLLA, CA 92037

Effective as of 01-SEP-18

KIM, JANET, MD

Provider ID: N/A

9850 GENESEE AVE STE
420

LA JOLLA, CA 92037

Effective as of 01-FEB-17

PATEL, PUJA, DO

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-24

SPEECH PATHOLOGIST

BLUMENFELD, LIZA, SP

Provider ID: N/A

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Effective as of 01-MAY-23

LINNEMEYER-RISSER,

KRISTEN, SP

Provider ID: N/A


9350 CAMPUS POINT DR
STE LLD

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

LA JOLLA, CA 92037
Effective as of 01-MAY-23

LINNEMEYER-RISSER, KRISTEN, SP

Provider ID: N/A

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

NEESE, SUSAN, SP

Provider ID: N/A

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24


SCHIEDERMAYER, BENJAMIN, SP†

Provider ID: N/A

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-APR-22


SCHIEDERMAYER, BENJAMIN, SP†

Provider ID: N/A

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-APR-22

THOMPSON, DANIELLE, SP


Provider ID: N/A

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JAN-24

SURGERY COLON SURGERY


BEIERMEISTER, KEITH, MD†

Provider ID: N/A

 9834 GENESEE AVE STE
201
LA JOLLA, CA 92037
Effective as of 01-JAN-21


BEIERMEISTER, KEITH, MD†

Provider ID: N/A

 9834 GENESEE AVE STE
201
LA JOLLA, CA 92037
Effective as of 01-AUG-13


LOPEZ, NICOLE, MD†

Provider ID: N/A

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-DEC-21

PARRY, LISA, MD†

Provider ID: N/A

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-APR-21


RAMAMOORTHY, SONIA, MD†

Provider ID: N/A

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21


SCHULTZEL, MATTHEW, DO†

Provider ID: N/A

 4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Effective as of 01-JAN-21


WORSEY, MICHAEL, MD†

Provider ID: N/A

 9834 GENESEE AVE STE
201
LA JOLLA, CA 92037
Effective as of 01-JAN-21

WORSEY, MICHAEL, MD†

Provider ID: N/A

 9834 GENESEE AVE STE
201
LA JOLLA, CA 92037
Effective as of 01-AUG-12

SURGERY CRITICAL CARE

ADAMS, LAURA, MD†

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

VENTRO, GEORGE, MD†


Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

SURGERY GENERAL


ARMANI, AVA, MD†

Provider ID: N/A

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JUL-21


BHOYRUL, SUNIL, MD†

Provider ID: N/A

 9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-SEP-22

BHOYRUL, SUNIL, MD†

Provider ID: N/A

 9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-JAN-21

BORTZ, PASCAL, MD†

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

Provider ID: N/A

☐ 9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-AUG-23

BORTZ, PASCAL, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-JAN-21

BORTZ, PASCAL, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-SEP-22

BURGESS, DANIEL, DO†

Provider ID: N/A

☐ 4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Teleservice
Effective as of 01-OCT-23

BURGESS, DANIEL, DO†

Provider ID: N/A

☐ 4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-21

HORGAN, SANTIAGO, MD

Provider ID: N/A

☐ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21

MORELL, MICHAEL, MD

Provider ID: N/A

☐ 9850 GENESEE AVE STE

570

LA JOLLA, CA 92037
Effective as of 01-DEC-23

MORELL, MICHAEL, MD

Provider ID: N/A

☐ 9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-MAR-24

MORELL, MICHAEL, MD

Provider ID: N/A

☐ 9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-MAR-24

OLSON, CHERYL, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
660
LA JOLLA, CA 92037
Effective as of 01-FEB-23

OLSON, CHERYL, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
660
LA JOLLA, CA 92037
Effective as of 01-APR-17

SCHULTZEL, MATTHEW, DO†

Provider ID: N/A

☐ 4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Effective as of 01-JUL-20

SHAPER, EMANUEL, MD

Provider ID: N/A

☐ 9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-MAY-23

SHAPER, EMANUEL, MD

Provider ID: N/A

☐ 9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-FEB-24

SHERMAN, MARK, MD

Provider ID: N/A

☐ 9850 GENESEE AVE STE
660
LA JOLLA, CA 92037
Effective as of 01-FEB-23

SURGERY GENERAL VASCULAR

BUNKE, NISHA, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
410
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

LUCAS, SARAH, MD

Provider ID: N/A

☐ 9850 GENESEE AVE STE
410
LA JOLLA, CA 92037
Effective as of 01-JAN-21

SURGERY HAND

BROWN, RICHARD, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
210
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

DOWNING, KRISTOPHER, MD†

Provider ID: N/A

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

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037
Effective as of 01-MAY-18

***SURGERY HAND
ORTHOPEDIC***

STEPHENSON, SAMUEL, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-OCT-21

STEPHENSON, SAMUEL, MD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-OCT-21

***SURGERY
NEUROLOGICAL***

MURTHY, NIKHIL, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

MURTHY, NIKHIL, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUL-23

OSTRUP, RICHARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
770
LA JOLLA, CA 92037
Effective as of 01-JAN-13

YOO, FRANK, MD

Provider ID: N/A

4150 REGENTS PARK ROW
STE 325
LA JOLLA, CA 92037
Effective as of 01-JUN-24

SURGERY ORTHOPEDIC

ANDRY, JAMES, MD

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037*
Effective as of 01-MAR-24

ANDRY, JAMES, MD

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037
Effective as of 01-MAR-24

BLAIS, MICAH, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUL-23

BUKATA, SUSAN, MD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAR-21

CHOI, JIHOON, MD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-21

CHOI, JIHOON, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

DOWNING, KRISTOPHER, MD†

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037*
Effective as of 01-MAR-24

DOWNING, KRISTOPHER, MD†

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037
Effective as of 01-MAR-24

GOEB, YANNICK, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

GOEB, YANNICK, MD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-21

HACKLEY, DAVID, MD†

Provider ID: N/A

9850 GENESEE AVE STE
210
LA JOLLA, CA 92037
Effective as of 01-JAN-21

KANE, NORMAN, MD

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037
Teleservice
Effective as of 01-APR-24

KUSNEZOV, NICHOLAS, MD

Provider ID: N/A

9834 GENESEE AVE STE
228

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

LA JOLLA, CA 92037
Teleservice
Effective as of 01-APR-24

MARSHALL, STUART, MD

Provider ID: N/A
7301 GIRARD AVE STE 300
LA JOLLA, CA 92037
Effective as of 01-NOV-18

MCKNIGHT, BRADEN, MD

Provider ID: N/A
9834 GENESEE AVE STE
228
LA JOLLA, CA 92037
Teleservice
Effective as of 01-APR-24

MOHLENBROCK, WILLIAM, MD

Provider ID: N/A
9850 GENESEE AVE STE
210
LA JOLLA, CA 92037
Effective as of 01-JAN-21

PALLIA, CHRISTOPHER, MD

Provider ID: N/A
9834 GENESEE AVE STE
228
LA JOLLA, CA 92037
Teleservice
Effective as of 01-APR-24

PALLIA, CHRISTOPHER, MD

Provider ID: N/A
9834 GENESEE AVE STE
228
LA JOLLA, CA 92037*
Teleservice
Effective as of 01-MAR-24

SIROTA, MICHAEL, MD

Provider ID: N/A
9834 GENESEE AVE STE

228
LA JOLLA, CA 92037
Effective as of 01-AUG-24

SWENSON, FRANK, MD†

Provider ID: N/A
9850 GENESEE AVE STE
210
LA JOLLA, CA 92037
Effective as of 01-JAN-21

THUNDER, RICHARD, MD†

Provider ID: N/A
9850 GENESEE AVE STE
210
LA JOLLA, CA 92037
Effective as of 01-JAN-21

WHEATLEY, BENJAMIN, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SURGERY PLASTIC

GOSMAN, AMANDA, MD†

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

MOFID, MEHRDAD, MD†

Provider ID: N/A
4150 REGENTS PARK ROW
STE 300
LA JOLLA, CA 92037
Effective as of 01-SEP-15

MOFID, MEHRDAD, MD†

Provider ID: N/A
4150 REGENTS PARK ROW
STE 300
LA JOLLA, CA 92037
Effective as of 01-MAR-16

MOFID, MEHRDAD, MD†

Provider ID: N/A
4150 REGENTS PARK ROW
STE 300
LA JOLLA, CA 92037
Effective as of 01-JUL-21

MOFID, MEHRDAD, MD†

Provider ID: N/A
4150 REGENTS PARK ROW
STE 300
LA JOLLA, CA 92037*
Effective as of 01-JUL-22

MOFID, MEHRDAD, MD†

Provider ID: N/A
4150 REGENTS PARK ROW
STE 300
LA JOLLA, CA 92037
Effective as of 01-JAN-21

UMANSKY, JEFFREY, MD†

Provider ID: N/A
4150 REGENTS PARK ROW
STE 260
LA JOLLA, CA 92037*
Effective as of 01-JAN-14

SURGERY THORACIC

BARADARIAN, SAM, MD†

Provider ID: N/A
9898 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-NOV-17

BARADARIAN, SAM, MD

Provider ID: N/A
9898 GENESEE AVE FL 3
LA JOLLA, CA 92037
Effective as of 01-JAN-24

HUDSON, JESSICA, MD

Provider ID: N/A
9434 MEDICAL CENTER DR

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

LA JOLLA, CA 92037
Effective as of 01-DEC-23

HUDSON, JESSICA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

HUDSON, JESSICA, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-DEC-23

MOASIS, GHASSAN, MD†

Provider ID: N/A

9898 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-MAY-17

TYNER, JOHN, MD†

Provider ID: N/A

10666 N TORREY PINES RD
STE 209
LA JOLLA, CA 92037
Effective as of 01-SEP-20

TYNER, JOHN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Effective as of 01-SEP-15

WANG, WILLIAM, MD†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Effective as of 01-SEP-15

ZANDER, ASHLEY, DO†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

ZANDER, ASHLEY, DO†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-AUG-22

ZANDER, ASHLEY, DO†

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

SURGICAL ONCOLOGY

MEHTSUN, WINTA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JAN-22

UROLOGY

ANGER, JENNIFER, MD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-OCT-21

BAGRODIA, ADITYA, MD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-DEC-21

BASTUBA, MARTIN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
630
LA JOLLA, CA 92037

Effective as of 01-JAN-21

COHEN, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-21

COHEN, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-21

COHEN, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JUL-22

COHEN, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-OCT-12

COHEN, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-SEP-21

DATO, PAUL, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-24

DICKS, BRIAN, MD

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

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Effective as of 01-FEB-24

JUMA, SAAD, MD

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Effective as of 01-JAN-24

KATZ, JONATHAN, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-JUN-23

KEILLER, DANNY, MD

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Effective as of 01-FEB-24

NAITOH, JOHN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Effective as of 01-SEP-22

NAITOH, JOHN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Effective as of 01-JUL-22

NAITOH, JOHN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Effective as of 01-JAN-21

NAITOH, JOHN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Effective as of 01-JAN-21

NAITOH, JOHN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Effective as of 01-NOV-21

NAITOH, JOHN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Effective as of 01-NOV-98

NEUSTEIN, PAUL, MD

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Effective as of 01-JAN-24

NGUYEN, HUNG, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

NGUYEN, HUNG, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

NGUYEN, HUNG, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Teleservice

Effective as of 01-SEP-19

NGUYEN, HUNG, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Teleservice

Effective as of 01-SEP-21

PE, MARK-RALLY, MD

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Effective as of 01-FEB-24

ROBERTS, JAMES, MD

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Effective as of 01-FEB-24

SHEETZ, TYLER, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-23

SIMON, SCOTT, MD

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

Provider ID: N/A

9834 GENESEE AVE STE
224
LA JOLLA, CA 92037
Effective as of 01-JUN-23

VAPNEK, EVAN, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-24

WANG, LUKE, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUN-23

ANESTHESIOLOGY

CHIEN, SHELBY, MD†

Provider ID: N/A

5360 JACKSON DR STE 100
LA MESA, CA 91942
Effective as of 01-JAN-21

VERDOLIN, MICHAEL, MD

Provider ID: N/A

7051 ALVARADO RD STE 101
LA MESA, CA 91942
Effective as of 01-FEB-16

VERDOLIN, MICHAEL, MD

Provider ID: N/A

7051 ALVARADO RD STE 101
LA MESA, CA 91942
Effective as of 01-JAN-23

VERDOLIN, MICHAEL, MD

Provider ID: N/A

7051 ALVARADO RD STE 101
LA MESA, CA 91942
Effective as of 01-JAN-21

**ANESTHESIOLOGY PAIN
MANAGEMENT**

BROWNLOW, ROY, MD

Provider ID: N/A

5360 JACKSON DR STE 100
LA MESA, CA 91942
Effective as of 01-APR-24

COHEN, ZACHARY, MD

Provider ID: N/A

5360 JACKSON DR STE 100
LA MESA, CA 91942
Effective as of 01-FEB-24

LEE, INSUN, MD†

Provider ID: N/A

5360 JACKSON DR STE 100
LA MESA, CA 91942
Teleservice
Effective as of 01-APR-24

VERDOLIN, MICHAEL, MD

Provider ID: N/A

7051 ALVARADO RD STE 101
LA MESA, CA 91942
Effective as of 01-MAR-22

AUDIOLOGIST

SHASKY, GARY, AuD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 153
LA MESA, CA 91942
Effective as of 01-JAN-21

SHASKY, GARY, AuD

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 463
LA MESA, CA 91942
Effective as of 01-FEB-24

**CARDIAC
ELECTROPHYSIOLOGY**

DAWOOD, FARAH, MD†

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-DEC-20

**CARDIOVASCULAR
DISEASE**

AZIMI, NASSIR, MD

Provider ID: N/A

8911 LA MESA BLVD STE 101
LA MESA, CA 91942
Effective as of 01-JUN-24

AZIMI, NASSIR, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3 STE 444
LA MESA, CA 91942
Effective as of 01-JAN-21

BELOTT, PETER, MD†

Provider ID: N/A

8851 CENTER DR STE 305
LA MESA, CA 91942
Effective as of 01-APR-17

DAWOOD, FARAH, MD†

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-AUG-21

FERNANDEZ, GENARO, MD†

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-AUG-21

KIM, JAMES, MD

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

Provider ID: N/A

5358 JACKSON DR STE 1
LA MESA, CA 91942

Teleservice

Effective as of 01-AUG-23

KIM, JAMES, MD

Provider ID: N/A

5358 JACKSON DR STE 1
LA MESA, CA 91942

Teleservice

Effective as of 01-JUN-23

KOTHA, PURUSHOTHAM, MD†

Provider ID: N/A

8860 CENTER DR STE 400
LA MESA, CA 91942

Effective as of 01-JAN-21

MEHRANPOUR, PAYAM, MD†

Provider ID: N/A

8851 CENTER DR STE 405
LA MESA, CA 91942

Teleservice

Effective as of 01-JAN-21

SHEREV, DIMITRI, MD

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942

Effective as of 01-APR-23

CERTIFIED NURSE

PRACTITIONER

DWYER, ERIN, NP

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942

Effective as of 01-JAN-24

MCCALLION, DANIELLE, NP

Provider ID: N/A

8851 CENTER DR STE 505

LA MESA, CA 91942

Effective as of 01-AUG-23

MCCALLION, DANIELLE, NP

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-AUG-23

MEGERT, SONYA, NP†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-SEP-22

TOMICICH, STEPHANIE, NP

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942

Effective as of 01-JAN-24

WOLF, ELI, NP

Provider ID: N/A

7339 EL CAJON BLVD STE 1
LA MESA, CA 91942

Effective as of 01-OCT-23

**HEARING AID DEALER /
SUPPLIER**

ANDERSON, ELAINE, MA†

Provider ID: N/A

5565 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-SEP-22

**HEMATOLOGY /
ONCOLOGY**

BATRA, REEMA, MD†

Provider ID: N/A

5555 GROSSMONT

CENTER DR

LA MESA, CA 91942*

Effective as of 01-JAN-14

BATRA, REEMA, MD†

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JAN-21

BODKIN, DAVID, MD†

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JAN-21

MEDIC, IGOR, MD†

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JAN-21

MEDIC, IGOR, MD†

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942*

Effective as of 01-FEB-18

ZU, KAI, MD†

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942*

Teleservice

Effective as of 01-JAN-14

ZU, KAI, MD†

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

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

Teleservice

Effective as of 01-JAN-21

INFECTIOUS DISEASE

HADDAD, FADI, MD

Provider ID: N/A

8860 CENTER DR STE 320
LA MESA, CA 91942

Effective as of 01-JUN-23

INTERNAL MEDICINE

FADDA, GEORGE, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-NOV-23

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-SEP-14

FERNANDEZ, GENARO, MD†

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942

Effective as of 01-SEP-22

KOTHA, ROSHAN, MD†

Provider ID: N/A

8860 CENTER DR STE 400
LA MESA, CA 91942

Effective as of 01-SEP-15

LEININGER, DANIEL, DO†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Teleservice

Effective as of 01-NOV-22

LIU, ANDREW, MD

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-SEP-23

MOOLANI, UJJALA, MD

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-MAY-23

POKALA, SATHYA, MD†

Provider ID: N/A

8860 CENTER DR STE 240
LA MESA, CA 91942

Effective as of 01-JAN-14

REDDY, REDDIWANDLA, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 202
LA MESA, CA 91942

Teleservice

Effective as of 01-JAN-21

INTERVENTIONAL CARDIOLOGY

FERNANDEZ, GENARO, MD†

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942

Effective as of 01-DEC-20

MEHRANPOUR, PAYAM, MD†

Provider ID: N/A

8851 CENTER DR STE 405
LA MESA, CA 91942

Teleservice

Effective as of 01-JAN-19

NAGHI, JESSE, MD†

Provider ID: N/A

8851 CENTER DR STE 304

LA MESA, CA 91942

Effective as of 01-JUL-22

NAGHI, JESSE, MD†

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942

Effective as of 01-JAN-24

NGUYEN, BRYANT, MD†

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942

Effective as of 01-JAN-21

REDDY, REDDIWANDLA, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 202
LA MESA, CA 91942

Teleservice

Effective as of 01-SEP-22

TAGHIZADEH, BEHZAD, MD†

Provider ID: N/A

8851 CENTER DR STE 405
LA MESA, CA 91942

Effective as of 01-SEP-22

TAGHIZADEH, BEHZAD, MD†

Provider ID: N/A

8851 CENTER DR STE 405
LA MESA, CA 91942

Effective as of 01-SEP-22

YELLEN, LAURENCE, MD†

Provider ID: N/A

8851 CENTER DR STE 405
LA MESA, CA 91942

Effective as of 01-SEP-22

NEPHROLOGY

AL-DAHAN, ZAID, MD

Provider ID: N/A

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

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-MAY-23

DO, LUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-14

DO, LUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

DO, LUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

DO, LUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JUL-22

DO, LUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-SEP-20

FADDA, GEORGE, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JUL-22

FADDA, GEORGE, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

FADDA, GEORGE, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-AUG-16

FADDA, GEORGE, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-AUG-16

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-AUG-14

LEININGER, DANIEL, DO†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Teleservice
Effective as of 01-AUG-22

LEININGER, DANIEL, DO†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Teleservice
Effective as of 01-SEP-22

LEININGER, DANIEL, DO†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Teleservice
Effective as of 01-OCT-22

LEININGER, DANIEL, DO†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Teleservice

Effective as of 01-SEP-22

MILLER, LUCY, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-SEP-20

MILLER, LUCY, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JUL-22

MILLER, LUCY, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-APR-15

MILLER, LUCY, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

MILLER, LUCY, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

SAEED, ODAY, MD

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-MAY-24

SAEED, ODAY, MD

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-MAR-24

THOMPSON, JOHN, MD†

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

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-MAY-15

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JUL-22

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

NEUROLOGY

MOHAMMAD, AHMAD SHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942*
Effective as of 01-JAN-21

MOHAMMAD, AHMAD SHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942
Effective as of 01-SEP-22

MOHAMMAD, AHMAD SHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942
Effective as of 01-JAN-21

MOHAMMAD, AHMAD SHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942
Effective as of 01-JAN-21

MOHAMMAD, AHMAD SHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942
Effective as of 01-JAN-14

OBSTETRICS / GYNECOLOGY

PAPA, RHETT, DO†

Provider ID: N/A

8851 CENTER DR STE 210
LA MESA, CA 91942
Effective as of 01-APR-21

OCCUPATIONAL THERAPIST

BERNALES-MENDEZ, DEZARINA, OT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-AUG-23

BERNALES-MENDEZ, DEZARINA, OT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-JAN-23

BERNALES-MENDEZ, DEZARINA, OT

Provider ID: N/A

4700 SPRING ST STE 180
LA MESA, CA 91942
Effective as of 01-NOV-23

PORTER, EILEEN, OT

Provider ID: N/A

4700 SPRING ST STE 180
LA MESA, CA 91942
Effective as of 01-NOV-23

PORTER, EILEEN, OT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-AUG-23

PORTER, EILEEN, OT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-JAN-22

SHIH, LYNN, OT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-DEC-23

SHIH, LYNN, OT

Provider ID: N/A

4700 SPRING ST STE 180
LA MESA, CA 91942
Effective as of 01-DEC-23

OPHTHALMOLOGY

BARNARD, LUKE, MD

Provider ID: N/A

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

<p>5565 GROSSMONT CENTER DR STE 551 LA MESA, CA 91942* Effective as of 01-SEP-24</p>	<p>LA MESA, CA 91942 Effective as of 01-DEC-23</p>	<p>8851 CENTER DR STE 406 LA MESA, CA 91942 Effective as of 01-SEP-22</p>
<p>BINDER, NICHOLAS, MD† Provider ID: N/A</p>	<p>CARRABY, ARNETT, MD† Provider ID: N/A</p>	<p>DELENGOCKY, TAYSON, DO† Provider ID: N/A</p>
<p>5565 GROSSMONT CENTER DR STE 3 BLDG 2 LA MESA, CA 91942 Effective as of 01-SEP-22</p>	<p>8851 CENTER DR STE 406 LA MESA, CA 91942 Effective as of 01-JUL-22</p>	<p>8851 CENTER DR STE 406 LA MESA, CA 91942 Effective as of 01-JUL-22</p>
<p>BINDER, NICHOLAS, MD† Provider ID: N/A</p>	<p>CARRABY, ARNETT, MD† Provider ID: N/A</p>	<p>FISH, STEVEN, MD Provider ID: N/A</p>
<p>7339 EL CAJON BLVD STE J AND K LA MESA, CA 91942 Effective as of 01-SEP-22</p>	<p>8851 CENTER DR STE 406 LA MESA, CA 91942 Effective as of 01-SEP-22</p>	<p>7339 EL CAJON BLVD STE J-K LA MESA, CA 91942 Effective as of 01-APR-23</p>
<p>BINDER, NICHOLAS, MD† Provider ID: N/A</p>	<p>CHIU, STEPHAN, MD† Provider ID: N/A</p>	<p>FISH, STEVEN, MD† Provider ID: N/A</p>
<p>5565 GROSSMONT CENTER DR STE 3 BLDG 2 LA MESA, CA 91942 Effective as of 01-NOV-23</p>	<p>5565 GROSSMONT CENTER DR STE 551 LA MESA, CA 91942 Effective as of 01-JUN-23</p>	<p>5565 GROSSMONT CENTER DR STE 551 LA MESA, CA 91942 Effective as of 01-JUN-22</p>
<p>BINDER, NICHOLAS, MD† Provider ID: N/A</p>	<p>CHIU, STEPHAN, MD† Provider ID: N/A</p>	<p>GOLLOGLY, HEIDRUN, MD† Provider ID: N/A</p>
<p>7339 EL CAJON BLVD STE J AND K LA MESA, CA 91942 Effective as of 01-MAR-22</p>	<p>5565 GROSSMONT CENTER DR STE 551 LA MESA, CA 91942 Effective as of 01-MAY-22</p>	<p>5565 GROSSMONT CENTER DR STE 551 LA MESA, CA 91942 Effective as of 01-JUN-23</p>
<p>BINDER, NICHOLAS, MD† Provider ID: N/A</p>	<p>CHIU, STEPHAN, MD† Provider ID: N/A</p>	<p>GOLLOGLY, HEIDRUN, MD† Provider ID: N/A</p>
<p>5565 GROSSMONT CENTER DR STE 3 BLDG 2 LA MESA, CA 91942 Effective as of 01-APR-22</p>	<p>5565 GROSSMONT CENTER DR STE 551 LA MESA, CA 91942 Effective as of 01-FEB-23</p>	<p>7339 EL CAJON BLVD STE J AND K LA MESA, CA 91942 Effective as of 01-MAR-22</p>
<p>BINDER, NICHOLAS, MD† Provider ID: N/A</p>	<p>COCKERHAM, KIMBERLY, MD Provider ID: N/A</p>	<p>GOLLOGLY, HEIDRUN, MD† Provider ID: N/A</p>
<p>7339 EL CAJON BLVD STE J AND K</p>	<p>5525 GROSSMONT CENTER DR STE 602 LA MESA, CA 91942 Effective as of 01-MAY-24</p>	<p>5565 GROSSMONT CENTER DR STE 3 BLDG 2 LA MESA, CA 91942 Effective as of 01-SEP-22</p>
	<p>DELENGOCKY, TAYSON, DO† Provider ID: N/A</p>	

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

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-SEP-22

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-SEP-22

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-APR-23

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-JAN-21

HAIGHT, BRUCE, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
551
LA MESA, CA 91942

Effective as of 01-JAN-21

HAIGHT, BRUCE, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
551
LA MESA, CA 91942

Effective as of 01-JAN-22

HAIGHT, BRUCE, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
551
LA MESA, CA 91942

Effective as of 01-SEP-22

HAIGHT, BRUCE, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 2-3
LA MESA, CA 91942

Effective as of 01-SEP-22

HAIGHT, BRUCE, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-SEP-22

HAIGHT, BRUCE, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

HSU, CHRISTOPHER, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

HSU, CHRISTOPHER, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-MAY-22

HSU, CHRISTOPHER, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J

AND K

LA MESA, CA 91942

Effective as of 01-APR-22

HUDSON, HENRY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-APR-23

HUDSON, HENRY, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-APR-23

HUDSON, HENRY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-MAY-21

HUDSON, HENRY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-MAY-24

HUDSON, HENRY, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

HUDSON, HENRY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-MAR-23

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

HUDSON, HENRY, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942
Effective as of 01-MAR-23

HUDSON, HENRY, MD†

Provider ID: N/A

5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-SEP-22

KATZMAN, BARRY, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

KATZMAN, BARRY, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942
Effective as of 01-APR-22

MANI, MAJID, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-JUL-22

MANI, MAJID, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J AND K

LA MESA, CA 91942
Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

5565 GROSSMONT CENTER DR BLDG 2 STE 3
LA MESA, CA 91942
Effective as of 01-JAN-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942
Effective as of 01-APR-23

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

5565 GROSSMONT CENTER DR BLDG 2 STE 3
LA MESA, CA 91942
Effective as of 01-APR-22

MORRISON-REYES, JOSHUA, MD

Provider ID: N/A

7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942

Effective as of 01-FEB-24

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

5565 GROSSMONT CENTER DR STE 551 BLDG 3
LA MESA, CA 91942
Effective as of 01-MAR-23

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

5565 GROSSMONT CENTER DR STE 551 BLDG 3
LA MESA, CA 91942
Effective as of 01-SEP-22

NAJAFI, DAVID, MD

Provider ID: N/A

8262 UNIVERSITY AVE
LA MESA, CA 91942
Effective as of 01-JAN-23

PAPASTERGIU, GEORGIOS, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-JAN-21

PAPASTERGIU, GEORGIOS, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-AUG-20

PAPASTERGIU, GEORGIOS, MD†

Provider ID: N/A

8851 CENTER DR STE 406

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

LA MESA, CA 91942
Effective as of 01-SEP-22

PATEL, GITANE, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-SEP-22

PATEL, SARJAN, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-SEP-22

PATEL, GITANE, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

PATEL, SARJAN, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

PATEL, SARJAN, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-DEC-23

PATEL, GITANE, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-DEC-23

PEAIRS, JAMES, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-AUG-20

PEAIRS, JAMES, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

PERRY, ARTHUR, MD

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-APR-23

PERRY, ARTHUR, MD

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-APR-22

PRABHU, SUJATA, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3 BLDG 2
LA MESA, CA 91942
Effective as of 01-APR-22

PRABHU, SUJATA, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
551
LA MESA, CA 91942
Effective as of 01-DEC-20

PRABHU, SUJATA, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K

LA MESA, CA 91942
Effective as of 01-DEC-23

PRABHU, SUJATA, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-SEP-22

PRABHU, SUJATA, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

PRATT, STEVEN, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

RAJSBAUM, MARTIN, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-JUL-22

SAMUEL, MICHAEL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-FEB-21

SAMUEL, MICHAEL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-MAR-21

SASSANI, PATRICK, MD

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

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-FEB-24

SCHER, BARRY, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

SKAF, AYHAM, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

SKAF, AYHAM, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-JAN-21

SKAF, AYHAM, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-AUG-20

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3
LA MESA, CA 91942
Effective as of 01-JAN-21

OPTOMETRIST

AOTO, KIM, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

AOTO, KIM, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-SEP-22

DEAN, MOENA, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-JAN-24

DEAN, MOENA, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

DYER, SHARON, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

DYER, SHARON, OD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A

5565 GROSSMONT

CENTER DR STE 551

LA MESA, CA 91942

Effective as of 01-SEP-22

HAN, SUL KI, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE
J/K
LA MESA, CA 91942
Effective as of 01-DEC-22

KHALIL, VADY, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE
J-K
LA MESA, CA 91942
Effective as of 01-NOV-22

KHALIL, VADY, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE
J-K
LA MESA, CA 91942
Effective as of 01-NOV-22

MARR, RYAN, OD

Provider ID: N/A

7339 EL CAJON BLVD STE
JK
LA MESA, CA 91942
Effective as of 01-JUL-24

MARR, RYAN, OD

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-JUL-24

TONNU, ANH, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

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

TONNU, ANH, OD

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-AUG-24

VINH, JOHN, OD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-SEP-20

VINH, JOHN, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

VINH, JOHN, OD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-JAN-21

ZVANUT, DONALD, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

ZVANUT, DONALD, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-AUG-22

ZVANUT, DONALD, OD

Provider ID: N/A

5565 GROSSMONT
CENTER DR
BLDG 3 STE 551
LA MESA, CA 91942
Effective as of 01-AUG-24

OTOLARYNGOLOGY

BUSINO, ROWLEY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-SEP-22

BUSINO, ROWLEY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-JAN-21

BUSINO, ROWLEY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-JAN-21

BUSINO, ROWLEY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942
Effective as of 01-JAN-21

BUSINO, ROWLEY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-JUL-22

BUSINO, ROWLEY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-APR-21

BUSINO, ROWLEY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-DEC-15

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-DEC-15

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-APR-21

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-JUL-22

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-JAN-21

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

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

Effective as of 01-JAN-21

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-SEP-22

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-NOV-22

MOSHTAGHI, OMID, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-OCT-23

MOSHTAGHI, OMID, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JAN-24

MOSHTAGHI, OMID, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-JUL-24

MOSHTAGHI, OMID, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-JUL-24

PATSIAS, ALEXIS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942

Effective as of 01-JAN-21

PATSIAS, ALEXIS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942

Effective as of 01-JUN-20

PATSIAS, ALEXIS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942

Effective as of 01-JUN-24

PATSIAS, ALEXIS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942

Effective as of 01-MAY-21

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-NOV-22

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-JAN-21

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-JAN-21

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-JAN-21

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-AUG-16

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-APR-21

SAEZ, NEIL, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-JUL-24

SAEZ, NEIL, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

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

Effective as of 01-JUL-24

SAEZ, NEIL, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JAN-24

SAEZ, NEIL, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3
LA MESA, CA 91942

Effective as of 01-NOV-23

SAEZ, NEIL, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-FEB-24

SAID, MENA, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3-101
LA MESA, CA 91942

Effective as of 01-JUL-24

SAID, MENA, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3-154
LA MESA, CA 91942

Effective as of 01-JUL-24

SAID, MENA, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-JUL-24

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-JUL-22

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3
LA MESA, CA 91942

Effective as of 01-MAY-21

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3
LA MESA, CA 91942

Effective as of 01-JAN-21

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-OCT-22

SKELTON, SEAN, DO†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-SEP-22

SKELTON, SEAN, DO†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-MAY-21

SKELTON, SEAN, DO†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-APR-21

PEDIATRICS

SHAHBAZ, MAJID, MD

Provider ID: N/A

8851 CENTER DR STE 408
LA MESA, CA 91942

Teleservice

Effective as of 01-MAR-18

PHYS MED/ REHAB PAIN MEDICINE

KATZEN, SETH, DO

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-MAY-23

PHYSICAL MEDICINE / REHABILITATION

KATZEN, SETH, DO

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-NOV-22

PHYSICIANS ASSISTANT

FERRARA, SAMANTHA, PA

Provider ID: N/A

7339 EL CAJON BLVD STE 1
LA MESA, CA 91942

Teleservice

Effective as of 01-JUL-23

GUTH, CARA, PA

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

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-JAN-24

HINKLE, CORINNE, PA

Provider ID: N/A

7339 EL CAJON BLVD STE 1
LA MESA, CA 91942
Teleservice
Effective as of 01-MAR-24

KHALEGHI, MANI, PA†

Provider ID: N/A

5360 JACKSON DR STE 100
LA MESA, CA 91942
Effective as of 01-JAN-21

MOORMAN, KRISTA, PA

Provider ID: N/A

7339 EL CAJON BLVD STE 1
LA MESA, CA 91942
Effective as of 01-MAY-22

PYLE, ALEXANDRA, PA

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-JAN-24

SMITH, KRISTIN, PA†

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-21

TAYLOR, RYAN, PA

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-JAN-24

WHITE, KYLE, PA

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-MAY-23

WHITE, KYLE, PA

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3
LA MESA, CA 91942
Teleservice
Effective as of 01-MAR-23

WHITE, KYLE, PA

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-NOV-23

PODIATRIST

CAINE, SAMUEL, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942
Teleservice
Effective as of 01-DEC-23

CAINE, SAMUEL, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942
Teleservice
Effective as of 01-DEC-23

CAINE, SAMUEL, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-JUL-24

CAINE, SAMUEL, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942
Teleservice
Effective as of 01-APR-24

COLLINS, MICHAEL, DPM†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-JAN-21

COLLINS, MICHAEL, DPM†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-AUG-23

COX, KEVIN, DPM

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-JUN-24

KRIGER, STEPHEN, DPM†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942
Teleservice
Effective as of 01-JAN-22

NGUYEN, HAN, DPM


Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942
Effective as of 01-JAN-24

NGUYEN, HAN, DPM


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

Provider ID: N/A

 5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942
Effective as of 01-DEC-23


NGUYEN, HAN, DPM

Provider ID: N/A

 5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942
Effective as of 01-JUN-23


NGUYEN, HAN, DPM

Provider ID: N/A

 5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942
Effective as of 01-JUL-23


TSAI, GRACE, DPM

Provider ID: N/A

 5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942
Effective as of 01-APR-23


TSAI, GRACE, DPM

Provider ID: N/A

 5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942
Effective as of 01-FEB-23


TSAI, GRACE, DPM

Provider ID: N/A

 5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942
Effective as of 01-AUG-24


TSAI, GRACE, DPM

Provider ID: N/A

 5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942
Effective as of 01-SEP-23


XU, DIXON, DPM†

Provider ID: N/A

 5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942
Effective as of 01-AUG-24


XU, DIXON, DPM†

Provider ID: N/A

 5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942
Effective as of 01-MAR-24

XU, DIXON, DPM†


Provider ID: N/A

 5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942
Effective as of 01-SEP-22

PSYCHIATRY


MILLER, BRIAN, MD

Provider ID: N/A

 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JUL-23

MILLER, BRIAN, MD


Provider ID: N/A

 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JUL-23

PULMONARY DISEASES


AL-NASER, RAED, MD

Provider ID: N/A

 5525 GROSSMONT
CENTER DR STE 609
LA MESA, CA 91942
Effective as of 01-AUG-23

POKALA, SATHYA, MD


Provider ID: N/A

 8851 CENTER DR STE 304
LA MESA, CA 91942
Teleservice
Effective as of 01-JUN-24

RADIATION ONCOLOGY


BRUGGEMAN, ANDREW, MD

Provider ID: N/A

 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-24


CARMONA, RUBEN, MD

Provider ID: N/A

 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-24


COLEMAN, LORI, MD†

Provider ID: N/A

 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-21

JABBARI, SIAVASH, MD†

Provider ID: N/A

 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-OCT-22

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

PEJAVAR, SUNANDA, MD†

Provider ID: N/A

8860 CENTER DR STE 400
LA MESA, CA 91942

Effective as of 01-JAN-21

VOLPP, PAUL, MD†

Provider ID: N/A

8860 CENTER DR STE 100
LA MESA, CA 91942

Effective as of 01-JAN-21

RADIOLOGY DIAGNOSTIC

MOORE, BRIAN, MD†

Provider ID: N/A

8860 CENTER DR STE 100
LA MESA, CA 91942

Effective as of 01-JAN-21

VENKATESH, VIJAY, MD†

Provider ID: N/A

8860 CENTER DR STE 100
LA MESA, CA 91942

Effective as of 01-SEP-22

REGISTERED PHYSICAL THERAPIST

ALLOS, ALEXANDER, PT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942

Effective as of 01-NOV-23

CONCHA URDAY ZAA, JANNY, PT

Provider ID: N/A

5266 BALTIMORE DR
LA MESA, CA 91942

Effective as of 01-JAN-23

NGUYEN, STEVEN, PT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942

Effective as of 01-MAY-22

NGUYEN, STEVEN, PT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942

Effective as of 01-AUG-23

PAPA, AMY, PT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942

Effective as of 01-NOV-21

PAPA, AMY, PT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942

Effective as of 01-AUG-23

SAHATDJIAN, EVA, PT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942

Effective as of 01-DEC-21

SAHATDJIAN, EVA, PT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942

Effective as of 01-AUG-23

THOMAS, KAITLIN, PT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942

Effective as of 01-NOV-23

RHEUMATOLOGY

KOTHA, AKTHER, MD†

Provider ID: N/A

8860 CENTER DR STE 400
LA MESA, CA 91942
Effective as of 01-SEP-15

KOTHA, ROSHAN, MD†

Provider ID: N/A

8860 CENTER DR STE 400
LA MESA, CA 91942

Effective as of 01-AUG-20

KOTHA, ROSHAN, MD†

Provider ID: N/A

8860 CENTER DR STE 400
LA MESA, CA 91942

Effective as of 01-JAN-21

KOTHA, AKTHER, MD†

Provider ID: N/A

8860 CENTER DR STE 400
LA MESA, CA 91942

Effective as of 01-JAN-21

KOTHA, AKTHER, MD†

Provider ID: N/A

8860 CENTER DR STE 400
LA MESA, CA 91942

Effective as of 01-DEC-23

SURGERY GENERAL

DICKINSON, PHILLIP, MD†

Provider ID: N/A

8554 LA MESA BLVD
LA MESA, CA 91942

Effective as of 01-JAN-14

DICKINSON, PHILLIP, MD†

Provider ID: N/A

8554 LA MESA BLVD
LA MESA, CA 91942

Effective as of 01-JAN-24

DICKINSON, PHILLIP, MD†

Provider ID: N/A

8554 LA MESA BLVD

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

LA MESA, CA 91942
Effective as of 01-JUL-22

KHARAZI, ALEXANDRA, MD

Provider ID: N/A

8851 CENTER DR STE 500
LA MESA, CA 91942

Effective as of 01-MAY-23

SURGERY HAND

RICKARDS, ENASS, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-21

SURGERY

NEUROLOGICAL

KURESHI, SOHAIB, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 210
LA MESA, CA 91942

Effective as of 01-JAN-21

OSTRUP, RICHARD, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 210
LA MESA, CA 91942

Effective as of 01-JAN-21

OSTRUP, RICHARD, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 210
LA MESA, CA 91942

Effective as of 01-MAR-21

ZACHARIAH, MARCUS, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 1 STE 210

LA MESA, CA 91942
Effective as of 01-MAY-23

SURGERY ORTHOPEDIC

HENDERSON, RODNEY, MD

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-14

KIMBALL, MICHAEL, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-OCT-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JUL-23

KIMBALL, MICHAEL, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-MAR-16

RICKARDS, ENASS, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JUL-23

RICKARDS, ENASS, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-SEP-22

RICKARDS, ENASS, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-21

RICKARDS, ENASS, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-APR-23

TAYYAB, NEIL, MD

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-AUG-23

SURGERY THORACIC

KOUMJIAN, MICHAEL, MD†

Provider ID: N/A

5525 GROSSMONT
CENTER DR STE 609
LA MESA, CA 91942

Effective as of 01-FEB-07

KOUMJIAN, MICHAEL, MD†

Provider ID: N/A

5525 GROSSMONT
CENTER DR STE 609
LA MESA, CA 91942

Effective as of 01-JAN-21

UROLOGY

BUTLER, PHILIP, MD

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

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

COHEN, EDWARD, MD

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

DICKS, BRIAN, MD

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

JAVIER-DESLOGES, JUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Teleservice
Effective as of 01-JAN-23

JAVIER-DESLOGES, JUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Teleservice
Effective as of 01-JUL-23

JAVIER-DESLOGES, JUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Teleservice
Effective as of 01-DEC-22

JUMA, SAAD, MD

Provider ID: N/A

8851 CENTER DR STE 501

LA MESA, CA 91942

Effective as of 01-JAN-24

KEARSE, WILFRED, MD†

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-DEC-21

NEUSTEIN, PAUL, MD

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

NGUYEN, HUNG, MD

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

PE, MARK-RALLY, MD

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

ROBERTS, JAMES, MD

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

SALMASI, AMIRALI, MD†

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JUL-23

VAPNEK, EVAN, MD

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

CARDIAC

ELECTROPHYSIOLOGY

MITIKU, TEFERI, MD†

Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-FEB-22

MITIKU, TEFERI, MD†

Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-FEB-22

CARDIOVASCULAR DISEASE

NGUYEN, HUY, MD†

Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-JAN-20

WERTMAN, BRETT, MD

Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-JAN-20

WERTMAN, BRETT, MD

Provider ID: N/A

333 CORPORATE DR STE
102

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

LADERA RANCH, CA 92694
Effective as of 01-JAN-21

***CERTIFIED NURSE
PRACTITIONER***

PASICOLAN, MARI, NP

Provider ID: N/A

25612 CROWN VALLEY
PKWY
LADERA RANCH, CA 92694
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

25612 CROWN VALLEY
PKWY
LADERA RANCH, CA 92694
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

25612 CROWN VALLEY
PKWY
LADERA RANCH, CA 92694
Effective as of 01-DEC-22

DERMATOLOGY

BINGHAM, LUCAS, MD

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-DEC-18

BINGHAM, LUCAS, MD

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-DEC-18

BINGHAM, LUCAS, MD

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-MAY-22

LANDER, JEFFREY, MD†

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-MAY-20

LANDER, JEFFREY, MD†

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-MAY-20

LANDER, JEFFREY, MD†

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-MAY-20

LANDER, JEFFREY, MD†

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-FEB-20

LANDER, JEFFREY, MD†

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-OCT-23

PETERSON, SAMUEL, MD†

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694

Effective as of 01-DEC-21

PETERSON, SAMUEL, MD†

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-MAY-22

EMERGENCY MEDICINE

KENNEDY, GREGORY, MD†

Provider ID: N/A

777 CORPORATE DR STE
250
LADERA RANCH, CA 92694
Effective as of 01-MAY-24

TIMBOE, JENNA, MD

Provider ID: N/A

777 CORPORATE DR
LADERA RANCH, CA 92694
Effective as of 01-OCT-23

WAINWRIGHT, MITCHELL, MD

Provider ID: N/A

800 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-SEP-18

***INTERVENTIONAL
CARDIOLOGY***

NGUYEN, HUY, MD†

Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-DEC-17

NGUYEN, HUY, MD†

Provider ID: N/A

333 CORPORATE DR STE
102

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

LADERA RANCH, CA 92694
Effective as of 01-JAN-21

NGUYEN, HUY, MD†

Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-DEC-17

WERTMAN, BRETT, MD

Provider ID: N/A

333 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-JAN-16

WERTMAN, BRETT, MD

Provider ID: N/A

333 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-DEC-15

NEUROLOGY

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-JUN-22

NEUROLOGY CHILD

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-OCT-19

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE

110
LADERA RANCH, CA 92694
Effective as of 01-OCT-19

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-JUN-24

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-DEC-20

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-JUL-21

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-JUL-21

OTOLARYNGOLOGY

KAUFMAN, AVRUM, DO

Provider ID: N/A

800 CORPORATE DR STE
290
LADERA RANCH, CA 92694
Effective as of 01-JAN-18

PEDIATRICS

DWINELL, LAUREN, MD

Provider ID: N/A

777 CORPORATE DR STE
250
LADERA RANCH, CA 92694
Effective as of 01-JUL-23

PHYSICIANS ASSISTANT

RUMMEL, LAURA, PA†

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-DEC-22

RUMMEL, LAURA, PA†

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-JUN-24

PODIATRIST

RODRIGUEZ, NITZA, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694
Effective as of 01-NOV-19

RODRIGUEZ, NITZA, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694
Effective as of 01-NOV-19

RODRIGUEZ, NITZA, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694
Effective as of 01-SEP-19

SPENCER, ROBERT, DPM†

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

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694
Effective as of 01-SEP-19

SPENCER, ROBERT, DPM†

Provider ID: N/A
333 CORPORATE DR STE
230
LADERA RANCH, CA 92694
Effective as of 01-MAY-24

SPENCER, ROBERT, DPM†

Provider ID: N/A
333 CORPORATE DR STE
230
LADERA RANCH, CA 92694
Effective as of 01-SEP-19

SPENCER, ROBERT, DPM†

Provider ID: N/A
333 CORPORATE DR STE
230
LADERA RANCH, CA 92694
Effective as of 01-SEP-19

PSYCHIATRY

BORECKY, ADAM, MD

Provider ID: N/A
333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JAN-24

BORECKY, ADAM, MD

Provider ID: N/A
333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JAN-24

KINBACK, KEVIN, MD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JAN-19

KINBACK, KEVIN, MD

Provider ID: N/A
333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JAN-19

KINBACK, KEVIN, MD

Provider ID: N/A
333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JAN-19

KINBACK, KEVIN, MD

Provider ID: N/A
333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JAN-19

LAW, LINDSEY, MD

Provider ID: N/A
333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-DEC-20

LAW, LINDSEY, MD

Provider ID: N/A
333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-DEC-20

LAW, LINDSEY, MD

Provider ID: N/A
333 CORPORATE DR STE
260
LADERA RANCH, CA 92694

Effective as of 01-DEC-20

LAW, LINDSEY, MD

Provider ID: N/A
333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-DEC-20

PSYCHOLOGIST

OKONSKI, MICHELE, PSYD

Provider ID: N/A
333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JUN-19

OKONSKI, MICHELE, PSYD

Provider ID: N/A
333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JUN-19

OKONSKI, MICHELE, PSYD

Provider ID: N/A
333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JUN-19

OKONSKI, MICHELE, PSYD

Provider ID: N/A
333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JUN-19

SURGERY GENERAL

QURESHI, ALI, MD

Provider ID: N/A
800 CORPORATE DR STE
280

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

LADERA RANCH, CA 92694
Effective as of 01-FEB-24

QURESHI, ALI, MD

Provider ID: N/A

800 CORPORATE DR STE
280
LADERA RANCH, CA 92694
Effective as of 01-FEB-24

SURGERY PLASTIC

DOEZIE, ALLEN, MD†

Provider ID: N/A

777 CORPORATE DR STE 110
LADERA RANCH, CA 92694
Effective as of 01-SEP-10

DOEZIE, ALLEN, MD†

Provider ID: N/A

777 CORPORATE DR STE 110
LADERA RANCH, CA 92694
Effective as of 01-SEP-10

CERTIFIED NURSE

PRACTITIONER

BINAVI, HOWNAZ, NP†

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA BEACH, CA 92677
Effective as of 01-JUL-21

INFECTIOUS DISEASE

HAMIDI ASL, KAMRAN, MD

Provider ID: N/A

31852 COAST HWY STE 302
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

OPHTHALMOLOGY

HENRICK, ANDREW, MD

Provider ID: N/A

31852 COAST HWY
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-23

HENRICK, ANDREW, MD

Provider ID: N/A

31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-23

JOSON, PETER, MD

Provider ID: N/A

25200 LA PAZ RD STE 100
LAGUNA BEACH, CA 92653
Effective as of 01-JUL-24

PRENDIVILLE, PAUL, MD

Provider ID: N/A

31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-23

PRENDIVILLE, PAUL, MD

Provider ID: N/A

31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-23

SPANGGORD, HOLLY, MD†

Provider ID: N/A

31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-19

SPANGGORD, HOLLY, MD†

Provider ID: N/A

31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-23

PEDIATRIC CRITICAL CARE MEDICINE

REDA, ZACHARIA, MD†

Provider ID: N/A

31862 COAST HWY STE 302
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-23

PEDIATRIC

PULMONOLOGY

REDA, ZACHARIA, MD†

Provider ID: N/A

31862 COAST HWY STE 203
LAGUNA BEACH, CA 92651
Effective as of 01-JUN-22

REDA, ZACHARIA, MD†

Provider ID: N/A

31862 COAST HWY STE 203
LAGUNA BEACH, CA 92651
Effective as of 01-JUN-22

REDA, ZACHARIA, MD†

Provider ID: N/A

31862 COAST HWY STE 203
LAGUNA BEACH, CA 92651
Effective as of 01-JUN-22

PODIATRIST

YETTER, MARCUS, DPM†

Provider ID: N/A

31852 COAST HWY STE 105
LAGUNA BEACH, CA 92651
Effective as of 01-MAR-20

YETTER, MARCUS, DPM†

Provider ID: N/A

31852 COAST HWY STE 105
LAGUNA BEACH, CA 92651
Effective as of 01-MAR-20

YETTER, MARCUS, DPM†

Provider ID: N/A

31852 COAST HWY STE 105
LAGUNA BEACH, CA 92651
Effective as of 01-JUL-19

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

PULMONARY DISEASES

SHAHINIAN, GEORGE, MD†

Provider ID: N/A

☒ 31852 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-15

SHAHINIAN, GEORGE, MD†

Provider ID: N/A

☒ 31852 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-JUL-23

SHAHINIAN, GEORGE, MD†

Provider ID: N/A

☒ 31852 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-NOV-23

SURGERY GENERAL

CHANG, STEVEN, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-DEC-11

CHANG, STEVEN, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-APR-12

CHANG, STEVEN, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

CHANG, STEVEN, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651

Effective as of 01-SEP-13

COCCIA, MICHAEL, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-APR-12

COCCIA, MICHAEL, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

COCCIA, MICHAEL, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-NOV-14

SURGERY ORTHOPEDIC

ABDOLLAHI, KARIM, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-NOV-14

ABDOLLAHI, KARIM, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-SEP-10

ABDOLLAHI, KARIM, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

ASHKENAZE, DAVID, MD†

Provider ID: N/A

☒ 31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-13

ASHKENAZE, DAVID, MD†

Provider ID: N/A

☒ 31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-13

ASHKENAZE, DAVID, MD†

Provider ID: N/A

☒ 31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

GILLMAN, MICHAEL, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

GILLMAN, MICHAEL, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-APR-16

GILLMAN, MICHAEL, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-NOV-14

GILLMAN, MICHAEL, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-SEP-10

ALLERGY IMMUNOLOGY

LIAO, OTTO, MD†

Provider ID: N/A

☒ 25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

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

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-17

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-21

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-22

ANESTHESIOLOGY

ALIKHANI, SHAHRIAR, MD†

Provider ID: N/A

23025 MILL CREEK DR
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

BARNHILL, JOSHUA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 204
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-24

BARNHILL, JOSHUA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 204
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-24

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

HO, ALAN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 7A
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

ANESTHESIOLOGY PAIN MANAGEMENT

ALSHARIF, KAIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-18

ALSHARIF, KAIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

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

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-15

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA

STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 7A
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-17

HO, ALAN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 7A
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

KUO, DENNIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-19

KUO, DENNIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-21

KUO, DENNIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-21

MESSIHA, ANDREW, MD†

Provider ID: N/A

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

23521 PASEO DE VALENCIA
STE 204
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

MOUSAVI, SHAHRYAR, MD
Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-16

MOUSAVI, SHAHRYAR, MD
Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

MOUSAVI, SHAHRYAR, MD
Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-16

MOUSAVI, SHAHRYAR, MD
Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-16

MOUSAVI, SHAHRYAR, MD
Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

MOUSAVI, SHAHRYAR, MD
Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-22

MOUSAVI, SHAHRYAR, MD
Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

POURADIB, AMIR, MD†
Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-18

POURADIB, AMIR, MD†
Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

POURADIB, AMIR, MD†
Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

SHAHBAZIAN, MICHAEL, MD†
Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SHAHBAZIAN, MICHAEL, MD†
Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-22

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SHAHBAZIAN, MICHAEL, MD†
Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-16

SHAHBAZIAN, MICHAEL, MD†
Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-20

SHAHBAZIAN, MICHAEL, MD†
Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

AUDIOLOGIST

NIAVARANY, PIRAYEH, AuD
Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

NIAVARANY, PIRAYEH, AuD
Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

**CARDIAC
ELECTROPHYSIOLOGY**

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

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

GUJRAL, INDERPAL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 30A
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

GUJRAL, INDERPAL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 30A
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

SARCON, ANNAHITA, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

SARCON, ANNAHITA, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

**CARDIOVASCULAR
DISEASE**

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-SEP-23

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-SEP-23

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-AUG-23

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-AUG-23

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-SEP-23

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA

STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JUN-24

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JUL-24

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JAN-24

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JUN-24

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JUN-24

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JUN-24

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

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JUN-24

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JUN-24

BAHADORANI, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-19

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

FEINER, JEFFREY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-12

GIM, RONALD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-12

GUJRAL, INDERPAL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 30A
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-17

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500

LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-17

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

LAMONT, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

LE, DAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

LE, DAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-21

LE, DAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

LE, DAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-21

LYLE, DOUGLAS, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

PARISE, CHARLES, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA

STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-20

PATEL, MILAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-19

PATEL, MILAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

PATEL, MILAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

ROSANIO, SALVATORE, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-SEP-23

ROSANIO, SALVATORE, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-SEP-23

ROSANIO, SALVATORE, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500

LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-SEP-23

ROSANIO, SALVATORE, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-AUG-23

ROSANIO, SALVATORE, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-AUG-23

ROSANIO, SALVATORE, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JUN-24

ROSANIO, SALVATORE, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JUN-24

ROSANIO, SALVATORE, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-MAR-24

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

VAN, HO HAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

VAN, HO HAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

VAN, HO HAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

VAN, HO HAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-20

VAN, HO HAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

VAN, HO HAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

ZAREMBA, MARK, MD†

Provider ID: N/A

25401 CABOT RD STE 107

LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

ZAREMBA, MARK, MD†

Provider ID: N/A

25401 CABOT RD STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-14

ZAREMBA, MARK, MD†

Provider ID: N/A

25401 CABOT RD STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-13

CERTIFIED

ACUPUNCTURIST

OMIDI, SHOHREH, LAC

Provider ID: N/A

24422 AVENIDA DE LA
CARLOTA STE 105
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

OMIDI, SHOHREH, LAC

Provider ID: N/A

24422 AVENIDA DE LA
CARLOTA STE 105
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

SHE, WU, LAC†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 7C
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

CERTIFIED NURSE PRACTITIONER

CARASQUERO, ANDREA, NP

Provider ID: N/A

23121 PLAZA POINTE DR
STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

CHANG KIMES, AUDREY, NP†

Provider ID: N/A

24422 AVENIDA DE LA
CARLOTA STE 130
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CHANG KIMES, AUDREY, NP†

Provider ID: N/A

24422 AVENIDA DE LA
CARLOTA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CHANG KIMES, AUDREY, NP†

Provider ID: N/A

24422 AVENIDA DE LA
CARLOTA STE 130
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

KHAN, KHADEER, NP

Provider ID: N/A

23121 PLAZA POINTE DR
STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

KHURANA, ANIL, NP

Provider ID: N/A

23121 PLAZA POINTE DR
STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

MCDANIEL-DAVIS, SHAYNA, NP

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200

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

LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

MCDANIEL-DAVIS, SHAYNA, NP

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

NGUYEN, MARICEL, NP

Provider ID: N/A

📍 23181 VERDUGO DR STE
103A

LAGUNA HILLS, CA 92653*

Effective as of 01-APR-23

NGUYEN, MARICEL, NP

Provider ID: N/A

📍 23181 VERDUGO DR STE
103A

LAGUNA HILLS, CA 92653*

Effective as of 01-APR-23

PARK, NURI, NP

Provider ID: N/A

📍 23181 VERDUGO DR STE
103A

LAGUNA HILLS, CA 92653

Effective as of 01-MAR-15

PARK, SE, NP

Provider ID: N/A

📍 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

PARK, SE, NP

Provider ID: N/A

📍 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

📍 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

📍 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

📍 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-23

CERTIFIED REGISTERED NURSE MIDWIFE

MOLINSKI, ALLISON, CRNM

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 620

LAGUNA HILLS, CA 92653

Effective as of 01-FEB-24

SAJADI, ALISA, CRNM

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-23

VIVALDA, JULIE, CRNM

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

VIVALDA, JULIE, CRNM

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 620

LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

VIVALDA, JULIE, CRNM

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 620

LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

VIVALDA, JULIE, CRNM

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 620

LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

CHIROPRACTOR

COSTALES, STEPHEN, DC

Provider ID: N/A

📍 24741 ALICIA PKWY STE D
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-17

COSTALES, STEPHEN, DC

Provider ID: N/A

📍 24741 ALICIA PKWY STE D
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

LANIER, TIMOTHY, DC†

Provider ID: N/A

📍 23412 MOULTON PKWY
STE 100

LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

MCHONE, PATRICIA, DC†

Provider ID: N/A

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

24741 ALICIA PKWY STE D
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

MCHONE, PATRICIA, DC†
Provider ID: N/A

24741 ALICIA PKWY STE D
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

DERMATOLOGY

ATHALYE, LEELA, DO
Provider ID: N/A

24012 CALLE DE LA PLATA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-24

ATHALYE, LEELA, DO
Provider ID: N/A

24012 CALLE DE LA PLATA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-24

LANDER, JEFFREY, MD†
Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

LANDER, JEFFREY, MD†
Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-19

LANDER, JEFFREY, MD†
Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

LANDER, JEFFREY, MD†
Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-16

LANDER, JEFFREY, MD†
Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

LEE, KATHERINE, MD†
Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

LEE, KATHERINE, MD†
Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-14

LEE, KATHERINE, MD
Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LEE, KATHERINE, MD†
Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LEE, KATHERINE, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-14

LEE, KATHERINE, MD†
Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

NAMI, NAVID, DO
Provider ID: N/A

24012 CALLE DE LA PLATA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-24

NAMI, NAVID, DO
Provider ID: N/A

24012 CALLE DE LA PLATA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-24

EMERGENCY MEDICINE

BLAND, HOWARD, MD
Provider ID: N/A

23595 MOULTON PKWY
STE E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

GEE, KELLY, DO†
Provider ID: N/A

23521 PASEO DE VALENCIA
STE 311
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-22

ENDOCRINOLOGY

METABOLISM DIABETES


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

<p>BANDUKWALA, RAHIL, DO† Provider ID: N/A 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-JUN-19</p>	<p>24321 AVENIDA DE LA CARLOTA LAGUNA HILLS, CA 92653 Effective as of 01-NOV-22</p>	<p>Effective as of 01-JUN-22 FARJOU DI, FARHAD, MD† Provider ID: N/A</p>
<p>BANDUKWALA, RAHIL, DO† Provider ID: N/A 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-23</p>	<p>CHANG, KU JUEY, MD Provider ID: N/A 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-JUN-19</p>	<p>23521 PASEO DE VALENCIA STE 108 LAGUNA HILLS, CA 92653 Effective as of 01-MAY-22 FARJOU DI, FARHAD, MD† Provider ID: N/A</p>
<p>BANDUKWALA, RAHIL, DO† Provider ID: N/A 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-JUL-16</p>	<p>CHANG, KU JUEY, MD Provider ID: N/A 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-23</p>	<p>23521 PASEO DE VALENCIA STE 108 LAGUNA HILLS, CA 92653 Effective as of 01-MAY-22 KRISHNAN, PRIYANKA, MD Provider ID: N/A</p>
<p>BANDUKWALA, RAHIL, DO† Provider ID: N/A 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-JUN-24</p>	<p>CHANG, KU JUEY, MD Provider ID: N/A 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-AUG-21</p>	<p>23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-JUN-19 KRISHNAN, PRIYANKA, MD Provider ID: N/A</p>
<p>BANDUKWALA, RAHIL, DO† Provider ID: N/A 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-23</p>	<p>CHANG, KU JUEY, MD Provider ID: N/A 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-NOV-16</p>	<p>23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-JUL-16 KRISHNAN, PRIYANKA, MD Provider ID: N/A</p>
<p>CHAN, JESSICA, MD† Provider ID: N/A 24321 AVENIDA DE LA CARLOTA LAGUNA HILLS, CA 92653 Effective as of 01-APR-23</p>	<p>FARJOU DI, FARHAD, MD† Provider ID: N/A 23521 PASEO DE VALENCIA STE 106 LAGUNA HILLS, CA 92653 Effective as of 01-JUN-22</p>	<p>23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-JUN-24 KRISHNAN, PRIYANKA, MD Provider ID: N/A</p>
<p>CHAN, JESSICA, MD† Provider ID: N/A</p>	<p>FARJOU DI, FARHAD, MD† Provider ID: N/A 23521 PASEO DE VALENCIA STE 106 LAGUNA HILLS, CA 92653</p>	<p>23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653</p>

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


Teleservice
Effective as of 01-APR-18

KRISHNAN, PRIYANKA, MD

Provider ID: N/A
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653


Teleservice
Effective as of 01-FEB-16

KRISHNAN, PRIYANKA, MD

Provider ID: N/A
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653


Teleservice
Effective as of 01-OCT-23

KRISHNAN, PRIYANKA, MD

Provider ID: N/A
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653


Teleservice
Effective as of 01-AUG-21

MARKMAN, LISA, MD

Provider ID: N/A
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653


Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A
 23141 MOULTON PKWY STE


102
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653


Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653


Effective as of 01-OCT-23

MARKMAN, LISA, MD

Provider ID: N/A
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653


Effective as of 01-JAN-23

MEHTA, SHILPA, MD†

Provider ID: N/A
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Teleservice
Effective as of 01-NOV-19

MEHTA, SHILPA, MD†

Provider ID: N/A
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653


Teleservice
Effective as of 01-NOV-19

MEHTA, SHILPA, MD†

Provider ID: N/A
 23141 MOULTON PKWY STE
102


LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-NOV-19

MEHTA, SHILPA, MD†

Provider ID: N/A
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653


Teleservice
Effective as of 01-NOV-19

MEHTA, SHILPA, MD†

Provider ID: N/A
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653


Teleservice
Effective as of 01-JUN-24

MEHTA, SHILPA, MD†

Provider ID: N/A
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653


Teleservice
Effective as of 01-JAN-23

MEHTA, SHILPA, MD†

Provider ID: N/A
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Teleservice
Effective as of 01-OCT-23

MEHTA, SHILPA, MD†

Provider ID: N/A
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Teleservice
Effective as of 01-JUN-19

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

MEHTA, SHILPA, MD†

Provider ID: N/A

23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JUN-19

POURBABAK, SAM, MD

Provider ID: N/A

23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-OCT-23

TRAN, NEIL, MD

Provider ID: N/A

24321 AVENIDA DE LA CARLOTA
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

ENDOCRINOLOGY

REPRODUCTIVE

FREDERICK, JANE, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 541
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-13

FREDERICK, JANE, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 503
LAGUNA HILLS, CA 92653*

Effective as of 01-JUN-19

FREDERICK, JANE, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 541

LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

FAMILY PRACTICE

LEISH, BRIAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR STE 460
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

RIZNIS, TENGIS, MD†

Provider ID: N/A

24451 HEALTH CENTER DR STE 620
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

FAMILY PRACTICE

GERIATRIC MEDICINE

PATEL, NEHAL, MD†

Provider ID: N/A

23141 VERDUGO DR STE 201
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-DEC-20

PATEL, NEHAL, MD†

Provider ID: N/A

23141 VERDUGO DR STE 201
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-AUG-24

PATEL, NEHAL, MD†

Provider ID: N/A

23141 VERDUGO DR STE 201
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-DEC-20

FEMALE PELVIC MED AND

RECONSTRUCTIVE SURG

MWESIGWA, PATRICIA, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-22

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-23

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-23

GASTROENTEROLOGY

JALALI, FARID, MD†

Provider ID: N/A

24221 CALLE DE LA LOUISA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-19

JALALI, FARID, MD†

Provider ID: N/A

24221 CALLE DE LA LOUISA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-19

NGO, CATHERINE, MD

Provider ID: N/A

26671 ALISO CREEK RD STE 301
LAGUNA HILLS, CA 92656

Effective as of 01-DEC-22

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

NGO, CATHERINE, MD

Provider ID: N/A

26671 ALISO CREEK RD STE 301
LAGUNA HILLS, CA 92656
Effective as of 01-DEC-22

SHAH, KETAN, MD

Provider ID: N/A

24221 CALLE DE LA LOUISA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

SHAH, KETAN, MD

Provider ID: N/A

24221 CALLE DE LA LOUISA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-16

SHAH, KETAN, MD

Provider ID: N/A

24221 CALLE DE LA LOUISA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-16

SHAH, KETAN, MD

Provider ID: N/A

24221 CALLE DE LA LOUISA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-16

SY, THEODORE, MD†

Provider ID: N/A

26538 MOULTON PKWY STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-18

SY, THEODORE, MD†

Provider ID: N/A

26538 MOULTON PKWY STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-18

SY, THEODORE, MD†

Provider ID: N/A

26538 MOULTON PKWY STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

SY, THEODORE, MD†

Provider ID: N/A

26538 MOULTON PKWY STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

GENERAL PRACTICE

SHAW, BRIAN, DO†

Provider ID: N/A

23265 S POINTE DR STE 100
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-15

**HEMATOLOGY /
ONCOLOGY**

CHENG, HOWARD, MD†

Provider ID: N/A

24953 PASEO DE VALENCIA STE 25B
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-08

CHENG, HOWARD, MD†

Provider ID: N/A

24953 PASEO DE VALENCIA STE 25B
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

CHENG, HOWARD, MD†

Provider ID: N/A

24953 PASEO DE VALENCIA STE 25B
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

HASSAN, SARAH, MD

Provider ID: N/A

24411 HEALTH CENTER DR STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

**MALEKIRAD, JACQUELINE,
MD†**

Provider ID: N/A

24411 HEALTH CENTER DR STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

**MALEKIRAD, JACQUELINE,
MD†**

Provider ID: N/A

24411 HEALTH CENTER DR STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

MULTANI, GURPREET, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

PATHAK, BHAVANA, MD

Provider ID: N/A

24401 HEALTH CENTER DR STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

PATHAK, BHAVANA, MD

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

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

PATHAK, BHAVANA, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

PATHAK, BHAVANA, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

PATHAK, BHAVANA, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 420
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 420
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 420

LAGUNA HILLS, CA 92653

Effective as of 01-JUN-22

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 420
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 501
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

RAO, AMOL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

SALIMI-TARI, PEYMAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 501
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

SU, DERRICK, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 501
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

VU, COLLIN, MD†

Provider ID: N/A

25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

VU, COLLIN, MD†

Provider ID: N/A

25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

VU, COLLIN, MD†

Provider ID: N/A

25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

VU, COLLIN, MD†

Provider ID: N/A

25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-22

VU, COLLIN, MD†

Provider ID: N/A

25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-22

VU, COLLIN, MD†

Provider ID: N/A

25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-22

HOSPITALIST MD/DO

ABCEDE, GAIL FRANCES LIEZL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 7C
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-SEP-22

SINGH, DEEPIJOT, MD

Provider ID: N/A

24451 HEALTH CENTER DR
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

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

INFECTIOUS DISEASE

KOPACZ, JOANNA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KOPACZ, JOANNA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

KOPACZ, JOANNA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KOPACZ, JOANNA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KOPACZ, JOANNA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KOPACZ, JOANNA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

KOPACZ, JOANNA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

WHITE, ALAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 460
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

INTERNAL MEDICINE

BAE, CHAY, DO[†]

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

BAE, CHAY, DO[†]

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

BAE, CHAY, DO[†]

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

BAE, CHAY, DO[†]

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-FEB-24

LO, ALAN, MD

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

NGUYEN, AN, DO[†]

Provider ID: N/A

23181 VERDUGO DR STE
103A
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

POURBABAK, SAM, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

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

Teleservice

Effective as of 01-JAN-23

SOONG, YEN-HUI, MD†

Provider ID: N/A

23141 MOULTON PKWY STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-22

SOONG, YEN-HUI, MD†

Provider ID: N/A

23141 MOULTON PKWY STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-22

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

VOVAN, THOMAS, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

**INTERVENTIONAL
CARDIOLOGY**

ALLAM, SHAMILI, MD

Provider ID: N/A

24022 CALLE DE LA PLATA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

ALLAM, SHAMILI, MD

Provider ID: N/A

24022 CALLE DE LA PLATA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

ALLAM, SHAMILI, MD

Provider ID: N/A

24022 CALLE DE LA PLATA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-20

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-20

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-APR-20

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA STE 500

LAGUNA HILLS, CA 92653

Effective as of 01-AUG-20

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

FEINER, JEFFREY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

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

FRUMIN, HOWARD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

GAULT, MICHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

GIM, RONALD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

GUJRAL, INDERPAL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 30A
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-11

KARROWNI, WASSEF, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LAMONT, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR

STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

LYLE, DOUGLAS, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

MASTERS, ROBERT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

PARISE, CHARLES, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

PARISE, CHARLES, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

PARISE, CHARLES, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

PARISE, CHARLES, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

PARISE, CHARLES, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

PATEL, MILAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

PATEL, MILAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

PATEL, MILAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

PATEL, MILAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

TURIY, YULIYA, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-21

TURIY, YULIYA, MD†

Provider ID: N/A

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

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-21

TURIY, YULIYA, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-21

VAN, HO HAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

VAN, HO HAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

VAN, HO HAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

VAN, HO HAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

VAN, HO HAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

WALTERS, DANIEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

WALTERS, DANIEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

WALTERS, DANIEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

WALTERS, DANIEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

**LICENSED CLINICAL
SOCIAL WORKER**

DOWNES, SAIGE, LCSW

Provider ID: N/A

23461 S POINTE DR STE 240
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-22

DOWNES, SAIGE, LCSW

Provider ID: N/A

23461 S POINTE DR STE 240
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-22

HAYDEN, SANDRA, LCSW

Provider ID: N/A

25255 CABOT RD STE 210
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-21

HAYDEN, SANDRA, LCSW

Provider ID: N/A

25255 CABOT RD STE 210
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-21

MACIEL, MARLA, LCSW

Provider ID: N/A

23121 PLAZA POINTE DR
STE 107
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-24

**ZARGARBASHI, STEFANIE,
LCSW†**

Provider ID: N/A

24321 AVENIDA DE LA
CARLOTA
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

**MARRIAGE FAMILY
THERAPIST**

MOORE, CANDACE, MFT

Provider ID: N/A

23461 S POINTE DR
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-22

MOORE, CANDACE, MFT

Provider ID: N/A

23461 S POINTE DR
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-22

**MATERNAL AND FETAL
MEDICINE**

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

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 260
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 260
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 260
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 260
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-04

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-11

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-16

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 260
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

CHAU, CINDY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

CHAU, CINDY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

CHAU, CINDY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

CHAU, CINDY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

CHAU, CINDY, MD†

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

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

DAY, ROBERT, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

KFIR, MENASHE, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KFIR, MENASHE, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KFIR, MENASHE, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KFIR, MENASHE, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

MASAKI, DAMON, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653

Effective as of 01-DEC-19

MASAKI, DAMON, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-19

MILLS, MARLIN, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 540
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

MILLS, MARLIN, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 540
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

MILLS, MARLIN, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 540
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

MILLS, MARLIN, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 540
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SHRIVASTAVA, VINEET, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

SHRIVASTAVA, VINEET, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

MEDICAL ONCOLOGY

VU, COLLIN, MD†

Provider ID: N/A

☐ 25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

NEONATAL / PERINATAL MEDICINE

BUSH, MELISSA, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

MASAKI, DAMON, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-19

NEPHROLOGY

HAFTBARADARAN

MOHAMMADI, AFSANEH, MD

Provider ID: N/A


☐ 25411 CABOT RD STE 105
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

HAFTBARADARAN

MOHAMMADI, AFSANEH, MD


Provider ID: N/A

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

 25411 CABOT RD STE 105
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23


JAMES, JOJI, MD

Provider ID: N/A

 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

MANSOURY, HADI, MD


Provider ID: N/A

 23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

NEUROLOGY


BANDARI, DANIEL, MD†

Provider ID: N/A

 24012 CALLE DE LA PLATA
STE 210
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20


CHOAN, CAROLINE, MD

Provider ID: N/A

 24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JUN-24

LOC, KIET, MD†

Provider ID: N/A

 24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

LOC, KIET, MD†


Provider ID: N/A

 24012 CALLE DE LA PLATA

STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18


LOC, KIET, MD†

Provider ID: N/A

 24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24


MAASUMI, KASRA, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21


MAASUMI, KASRA, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21


MAASUMI, KASRA, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21


MAASUMI, KASRA, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21


MAASUMI, KASRA, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21


RAPOPORT, ZHANNA, MD

Provider ID: N/A

 24953 PASEO DE
VALENCIA STE 8A
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20


RAPOPORT, ZHANNA, MD

Provider ID: N/A

 24953 PASEO DE
VALENCIA STE 8A
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19


RAPOPORT, ZHANNA, MD

Provider ID: N/A

 24953 PASEO DE
VALENCIA STE 8A
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19


RAPOPORT, ZHANNA, MD

Provider ID: N/A

 24953 PASEO DE
VALENCIA STE 8A
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19


RAPOPORT, ZHANNA, MD

Provider ID: N/A

 24953 PASEO DE
VALENCIA STE 8A
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

SHEN, MICHAEL, MD

Provider ID: N/A

 24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

SHEN, MICHAEL, MD

Provider ID: N/A

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

24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-16

SHEN, MICHAEL, MD

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-16

SHEN, MICHAEL, MD

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-16

***OBSTETRICS /
GYNECOLOGY***

AL-AZAWI, HIND, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

AL-AZAWI, HIND, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

CHUNG, LINDA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-APR-20

CHUNG, LINDA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

COUGH, HEIDI, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

COUGH, HEIDI, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

COUGH, HEIDI, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

DAVIS, STEPHANIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

DAVIS, STEPHANIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

DAY, ROBERT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

DEJBAKHSH, SHEILA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

EDMUNDSON, MORIAH, DO†

Provider ID: N/A

24321 AVENIDA DE LA
CARLOTA
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

FREDERICK, JANE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 503
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

FREDERICK, JANE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 503
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

JOHNSON, SUSAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

KONG, GRACE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

KONG, GRACE, MD

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

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

KONG, GRACE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

KRYCHMAN, MICHAEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

KRYCHMAN, MICHAEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-24

KRYCHMAN, MICHAEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

KRYCHMAN, MICHAEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

LAM, KIM, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LAM, KIM, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

LEE, KATHERINE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

LEE, KATHERINE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

LO, PATRICIA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

LOPEZ, RACHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

LOPEZ, RACHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

LOPEZ, RACHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

LOPEZ, RACHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

LOPEZ, RACHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

MASAKI, DAMON, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
LAGUNA HILLS, CA 92653
Effective as of 01-APR-19

MASAKI, DAMON, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-22

MASAKI, DAMON, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-22

MENDELSON, SUSAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200

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

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

MENDELSON, SUSAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

MENDELSON, SUSAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

MILLER, JAMIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

O TOOLE, MARY, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

O TOOLE, MARY, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

PATEL, MITA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-JUL-19

PETERS, AMY, DO

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

PETERS, AMY, DO†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

PRIESTLEY, ANGELIKA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

STERNFELD, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

STERNFELD, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

STERNFELD, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

STERNFELD, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR

STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-MAY-20

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-19

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

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

VICENS-VILLAFANA, JOSE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-23

VICENS-VILLAFANA, JOSE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-23

WINTER, MARC, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

YU, MIAO, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

YU, MIAO, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

YU, MIAO, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-20

OPHTHALMOLOGY

AHMAD, ASHRAF, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

AHMAD, ASHRAF, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-23

AHMAD, ASHRAF, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-23

AHMAD, ASHRAF, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-22

BANUELOS, LYDIA, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-22

BANUELOS, LYDIA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 309
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

BROOKMAN, MYLES, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305

LAGUNA HILLS, CA 92653

Effective as of 01-MAY-23

BROOKMAN, MYLES, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-23

CHEN, SANFORD, MD†

Provider ID: N/A

23521 PASEO VALENCIA
309
LAGUNA HILLS, CA 92653

Effective as of 01-APR-13

CHOI, DAVID, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

CHOI, DAVID, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

CHOI, DAVID, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

CHOI, DAVID, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

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

DHOOT, SONIA, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-22

DHOOT, SONIA, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

DHOOT, SONIA, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-19

DHOOT, SONIA, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-19

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-20

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-20

EIFRIG, CHARLES WILLIAM,

MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-18

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-22

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-18

GUJRAL, SATVINDER, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-22

GUJRAL, SATVINDER, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

GUJRAL, SATVINDER, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

GUJRAL, SATVINDER, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-22

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-22

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-20

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-20

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA

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

STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-20

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-20

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-20

GWYNN, DAVID, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

HENRICK, ANDREW, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

HENRICK, ANDREW, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

HENRICK, ANDREW, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-14

HENRICK, ANDREW, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-14

HENRICK, ANDREW, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

HWANG, JOHN, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-18

HWANG, JOHN, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

HWANG, JOHN, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

HWANG, JOHN, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

HWANG, JOHN, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-16

JACOBS, JEFFREY, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

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

Effective as of 01-APR-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-22

JOSON, PETER, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 309
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-22

JOSON, PETER, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 309
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-17

KELLER, CHARLES, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

KELLER, CHARLES, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-22

KERSTEN, DIANA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

KERSTEN, DIANA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

KERSTEN, DIANA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

KERSTEN, DIANA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

KHAN, SAMIRA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

KHAN, SAMIRA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

KIM, JANET, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305

LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KIM, JANET, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KIM, JANET, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KIM, ESTHER, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 745
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-22

KIM, EDWARD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-22

KIM, JANET, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

KIM, JANET, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

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

KIM, JANET, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

KIM, BRIAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

KIM, BRIAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

KIM, BRIAN, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

KIM, BRIAN, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

KIM, EDWARD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

KIM, BRIAN, MD†

Provider ID: N/A

23961 CALLE DE LA

MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

KIM, ESTHER, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 745
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

MCGUIRE, DESMOND, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

NOGUCHI, JONATHAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

PATEL, ALPA, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

PATEL, ALPA, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-22

PERRY, ANGELA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

PERRY, ANGELA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

PERRY, ANGELA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

PRENDIVILLE, PAUL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

PRENDIVILLE, PAUL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

PRENDIVILLE, PAUL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

PRENDIVILLE, PAUL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-14

PRENDIVILLE, PAUL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-14

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

RATHOD, RAJIV, MD†

Provider ID: N/A

23521 PASEO VALENCIA
309
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-15

RATHOD, RAJIV, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

RATHOD, RAJIV, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

RATHOD, RAJIV, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

RATHOD, RAJIV, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

RATHOD, RAJIV, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

RATHOD, RAJIV, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA

STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

ROUHANI, BEHNAZ, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

ROUHANI, BEHNAZ, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

ROUHANI, BEHNAZ, MD

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

ROUHANI, BEHNAZ, MD

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

ROUHANI, BEHNAZ, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

SALEHI-HAD, HANI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 309
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-21

SALEHI-HAD, HANI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 309
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-21

SALIB, GEORGE, MD†

Provider ID: N/A

24422 AVENIDA DE LA
CARLOTA STE 110
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-21

SALIB, GEORGE, MD†

Provider ID: N/A

24422 AVENIDA DE LA
CARLOTA STE 110
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-20

SALIB, GEORGE, MD†

Provider ID: N/A

24422 AVENIDA DE LA
CARLOTA STE 110
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-18

SPANGGORD, HOLLY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SPANGGORD, HOLLY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

SPANGGORD, HOLLY, MD†

Provider ID: N/A

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

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-14

SPANGGORD, HOLLY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

SPANGGORD, HOLLY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-19

TAI, AUDREY, DO

Provider ID: N/A

25200 LA PAZ RD STE 100
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-24

TAYANI, RAMIN, MD

Provider ID: N/A

25200 LA PAZ RD STE 100
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-24

TAYANI, RAMIN, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-14

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

TOMPKINS, BRETT, DO

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

TOMPKINS, BRETT, DO

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-23

TOMPKINS, BRETT, DO

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-24

TOMPKINS, BRETT, DO

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

WANG, YE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

WANG, YE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

WANG, YE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

WANG, YE, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

WANG, YE, MD†

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

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

WILLIAMS, MARK, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

WILLIAMS, MARK, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

WILLIAMS, MARK, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

WILLIAMS, MARK, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

WILLIAMS, MARK, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

YOU, TIMOTHY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475

LAGUNA HILLS, CA 92653

Effective as of 01-FEB-16

YOU, TIMOTHY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

YOU, TIMOTHY, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-05

OPTOMETRIST

CHOI-SIRITARATIWAT, ISABELL, OD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

CHOI-SIRITARATIWAT, ISABELL, OD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

CHOI-SIRITARATIWAT, ISABELL, OD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

CHOI-SIRITARATIWAT, ISABELL, OD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

CHOI-SIRITARATIWAT, ISABELL, OD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

GRATTAN, ANNE, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

GRATTAN, ANNE, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

GRATTAN, ANNE, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

GRATTAN, ANNE, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

GRATTAN, ANNE, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305

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

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

HUYNH, ANTHONY, OD†

Provider ID: N/A

📍 23521 PASEO DE VALENCIA
STE 305

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

HUYNH, ANTHONY, OD†

Provider ID: N/A

📍 23521 PASEO DE VALENCIA
STE 305

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

HUYNH, ANTHONY, OD†

Provider ID: N/A

📍 23521 PASEO DE VALENCIA
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-23

HUYNH, ANTHONY, OD†

Provider ID: N/A

📍 23521 PASEO DE VALENCIA
STE 305

LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

HUYNH, ANTHONY, OD†

Provider ID: N/A

📍 23521 PASEO DE VALENCIA
STE 305

LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

HUYNH, ANTHONY, OD†

Provider ID: N/A

📍 23521 PASEO DE VALENCIA
STE 305

LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

LEI, SHARON, OD

Provider ID: N/A

📍 23521 PASEO DE VALENCIA
STE 325

LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

LEIGHT, TERRA, OD†

Provider ID: N/A

📍 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

LEIGHT, TERRA, OD†

Provider ID: N/A

📍 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-22

LEUNG, CHRISTINA, OD†

Provider ID: N/A

📍 25260 LA PAZ RD STE G
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-16

MONTANA-COLLINS, CLAUDIA, OD†

Provider ID: N/A

📍 23961 CALLE DE LA
MAGDALENA STE 412
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

MULICK, STEPHANIE, OD

Provider ID: N/A

📍 25200 LA PAZ RD STE 100
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-24

NG, REBECCA, OD

Provider ID: N/A

📍 25200 LA PAZ RD STE 100
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-24

NG, REBECCA, OD

Provider ID: N/A

📍 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-23

PHAN, MIMI, OD†

Provider ID: N/A

📍 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-21

PLECHOT, ERIQ, OD

Provider ID: N/A

📍 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-APR-24

PLECHOT, ERIQ, OD

Provider ID: N/A

📍 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-APR-24

PLECHOT, ERIQ, OD

Provider ID: N/A

📍 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-APR-24

PLECHOT, ERIQ, OD

Provider ID: N/A

📍 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-APR-24

PLECHOT, ERIQ, OD

Provider ID: N/A

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

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

SKVARNA, KAREN, OD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

SKVARNA, KAREN, OD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

SKVARNA, KAREN, OD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

TERADA, SEIJU, OD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

TERADA, SEIJU, OD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

TERADA, SEIJU, OD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-22

OTOLARYNGOLOGY

ABEDI ASL, ESRAFIL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 430
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-13

ABEDI ASL, ESRAFIL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 430
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

ABEDI ASL, ESRAFIL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 430
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

ABEDI ASL, ESRAFIL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 430
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

BALAKER, ASHLEY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

BALAKER, ASHLEY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-19

BALAKER, ASHLEY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

BALAKER, ASHLEY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

BALAKER, ASHLEY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

BUEN, FLOYD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

BUEN, FLOYD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

BUEN, FLOYD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

CHO, MICHAEL, MD†

Provider ID: N/A


24411 HEALTH CENTER DR

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

STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18


CHO, MICHAEL, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24


JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24


JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22


MUNDI, JAGMEET, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24


SUN, PAUL, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24


SUN, PAUL, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-12


SUN, JOHN, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-12


SUN, JOHN, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24


SUN, PAUL, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23


SUN, JOHN, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23


SUN, JOHN, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-16


SUN, JOHN, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12


SUN, JOHN, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14


SUN, PAUL, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14


SUN, PAUL, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-11


SUN, JOHN, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-11


SUN, PAUL, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

SUN, PAUL, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-07

SUN, PAUL, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

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

Effective as of 01-APR-11

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-APR-11

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-16

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-07

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-17

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-14

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-14

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-17

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-20

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-20

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600

LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-12

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-14

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-17

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-07

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-16

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

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-APR-11

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-11

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-14

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-12

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR

STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

PEDIATRIC CARDIOLOGY

DENNY-BROWN, SINAN, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

DENNY-BROWN, SINAN, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

***PHYS MED/ REHAB PAIN
MEDICINE***

HANNA, ANDREW, DO

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-23

HANNA, ANDREW, DO

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-23

HANNA, ANDREW, DO

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-23

***PHYSICAL MEDICINE /
REHABILITATION***

ALSHARIF, KAIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-21

ALSHARIF, KAIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-21

HILAL, TARIQ, DO†

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

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

HILAL, TARIQ, DO[†]

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

HILAL, TARIQ, DO[†]

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

HILAL, TARIQ, DO[†]

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

KUO, DENNIS, MD[†]

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-20

LYNN, KENNETH, MD[†]

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 460
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-19

POURADIB, AMIR, MD[†]

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120

LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

POURADIB, AMIR, MD[†]

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

POURADIB, AMIR, MD[†]

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-22

POURADIB, AMIR, MD[†]

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-22

PHYSICIANS ASSISTANT

BYNON, KRISTEN, PA

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

BYNON, KRISTEN, PA

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

BYNON, KRISTEN, PA

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-23

CARDENAS, RICARDO, PA[†]

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 250
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CARDENAS, RICARDO, PA[†]

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 250
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CARR, OLIVIA, PA

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

CARR, OLIVIA, PA

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

DINH, Y NHA THI, PA[†]

Provider ID: N/A

23181 VERDUGO DR STE
103A
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-15

KIM, MOSES, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

KISCADEN, LAUREN, PA

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

Provider ID: N/A

24411 HEALTH CENTER DR
STE 208
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

KISCADEN, LAUREN, PA

Provider ID: N/A

24411 HEALTH CENTER DR
STE 208
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

NAGEL, IRENE, PA†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

OWEN, LISA, PA

Provider ID: N/A

23181 VERDUGO DR STE
103A
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

PALMER, VIVIENNE, PA

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

PALMER, VIVIENNE, PA

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

PALMER, VIVIENNE, PA

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680

LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

SHARAF, KAREEM, PA

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-24

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

WANG, LILLIAN, PA†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-FEB-22

PODIATRIST

ARJOMANDI, NEDA, DPM†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 410
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

ARJOMANDI, NEDA, DPM†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 410
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

23141 MOULTON PKWY STE
109
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

23141 MOULTON PKWY STE
109
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

23141 MOULTON PKWY STE
109
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-20

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

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

23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-20

LEAMING, ROBERT, DPM

Provider ID: N/A

23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-FEB-24

LEAMING, ROBERT, DPM

Provider ID: N/A

23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-FEB-24

MCCANN, JAN, DPM

Provider ID: N/A

24012 CALLE DE LA PLATA STE 135
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-20

MCCANN, JAN, DPM

Provider ID: N/A

24012 CALLE DE LA PLATA STE 135
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-20

NOSRATI, SAM, DPM†

Provider ID: N/A

23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-16

NOSRATI, SAM, DPM†

Provider ID: N/A

23141 MOULTON PKWY STE

109
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

NOSRATI, SAM, DPM†

Provider ID: N/A

23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-16

POLISKIE, MICHAEL, DPM†

Provider ID: N/A

23521 PASEO DE VALENCIA STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-18

POLISKIE, MICHAEL, DPM†

Provider ID: N/A

23521 PASEO DE VALENCIA STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-22

YETTER, MARCUS, DPM†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 143
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

PSYCHIATRY

CHU, WEIMING, MD†

Provider ID: N/A

24953 PASEO DE VALENCIA STE 7C
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-21

CHU, WEIMING, MD†

Provider ID: N/A

24953 PASEO DE VALENCIA STE 7C

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-21

EAGAN, TERRY, MD

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 424
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

EAGAN, TERRY, MD

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 424
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

PULMONARY DISEASES

CHANG, WILLIAM, DO†

Provider ID: N/A

23141 MOULTON PKWY STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-23

CHANG, WILLIAM, DO†

Provider ID: N/A

23141 MOULTON PKWY STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-23

CHANG, WILLIAM, DO†

Provider ID: N/A

23141 MOULTON PKWY STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

CHANG, WILLIAM, DO†

Provider ID: N/A

23141 MOULTON PKWY STE 108
LAGUNA HILLS, CA 92653

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

Effective as of 01-MAR-23	Provider ID: N/A	LAGUNA HILLS, CA 92653
CHANG, WILLIAM, DO†	 24411 HEALTH CENTER DR STE 560	Effective as of 01-JAN-23
Provider ID: N/A	LAGUNA HILLS, CA 92653	KADIFA, FADY, MD†
 23141 MOULTON PKWY STE 108	Effective as of 01-JAN-18	Provider ID: N/A
LAGUNA HILLS, CA 92653	ESPELETA, VIDAL, MD†	 24411 HEALTH CENTER DR STE 560
Effective as of 01-JUN-24	Provider ID: N/A	LAGUNA HILLS, CA 92653
CHANG, WILLIAM, DO†	 24411 HEALTH CENTER DR STE 560	Effective as of 01-NOV-19
Provider ID: N/A	LAGUNA HILLS, CA 92653	KADIFA, FADY, MD†
 23141 MOULTON PKWY STE 108	Effective as of 01-MAY-22	Provider ID: N/A
LAGUNA HILLS, CA 92653	ESPELETA, VIDAL, MD†	 24411 HEALTH CENTER DR STE 560
Effective as of 01-NOV-22	Provider ID: N/A	LAGUNA HILLS, CA 92653
CHANG, WILLIAM, DO†	 24411 HEALTH CENTER DR STE 560	Effective as of 01-JAN-23
Provider ID: N/A	LAGUNA HILLS, CA 92653	KADIFA, FADY, MD†
 23141 MOULTON PKWY STE 108	Effective as of 01-OCT-23	Provider ID: N/A
LAGUNA HILLS, CA 92653	ESPELETA, VIDAL, MD†	 24411 HEALTH CENTER DR STE 560
Effective as of 01-NOV-22	Provider ID: N/A	LAGUNA HILLS, CA 92653
ESPELETA, VIDAL, MD†	 24411 HEALTH CENTER DR STE 560	Effective as of 01-JUN-24
Provider ID: N/A	LAGUNA HILLS, CA 92653	KADIFA, FADY, MD†
 24411 HEALTH CENTER DR STE 560	Effective as of 01-AUG-23	Provider ID: N/A
LAGUNA HILLS, CA 92653	ESPELETA, VIDAL, MD†	 24411 HEALTH CENTER DR STE 560
Effective as of 01-JAN-17	Provider ID: N/A	LAGUNA HILLS, CA 92653
ESPELETA, VIDAL, MD†	 24411 HEALTH CENTER DR STE 560	Effective as of 01-MAY-12
Provider ID: N/A	LAGUNA HILLS, CA 92653	KADIFA, FADY, MD†
 24411 HEALTH CENTER DR STE 560	Effective as of 01-JUN-24	Provider ID: N/A
LAGUNA HILLS, CA 92653	ESPELETA, VIDAL, MD†	 24411 HEALTH CENTER DR STE 560
Effective as of 01-AUG-23	Provider ID: N/A	LAGUNA HILLS, CA 92653
ESPELETA, VIDAL, MD†	 24411 HEALTH CENTER DR STE 560	Effective as of 01-NOV-19
Provider ID: N/A	LAGUNA HILLS, CA 92653	KADIFA, FADY, MD†
 24411 HEALTH CENTER DR STE 560	Effective as of 01-JUN-17	Provider ID: N/A
LAGUNA HILLS, CA 92653	KADIFA, FADY, MD†	 24411 HEALTH CENTER DR STE 560
Effective as of 01-JAN-17	Provider ID: N/A	LAGUNA HILLS, CA 92653
ESPELETA, VIDAL, MD†	 24411 HEALTH CENTER DR STE 560	Effective as of 01-APR-11

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

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

KOHLI, SANJIVAN, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KOHLI, SANJIVAN, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

KOHLI, SANJIVAN, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

KOHLI, SANJIVAN, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

SHAHINIAN, GEORGE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR

STE 620

LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

SINGH, SAMARJIT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-19

SINGH, SAMARJIT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-22

SINGH, SAMARJIT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

SINGH, SAMARJIT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SOONG, YEN-HUI, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

SOONG, YEN-HUI, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

SOONG, YEN-HUI, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

VO, BRYAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-18

VO, BRYAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

VO, BRYAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-12

VO, BRYAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

VO, BRYAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

VO, BRYAN, MD

Provider ID: N/A

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

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

VO, BRYAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

VOVAN, THOMAS, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

VOVAN, THOMAS, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

VOVAN, THOMAS, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

VOVAN, THOMAS, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

VOVAN, THOMAS, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

RADIATION ONCOLOGY

CHAN, LINDA, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

CHAN, LINDA, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

CHAN, LINDA, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

CHAN, LINDA, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

CHAN, LINDA, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

HARSOLIA, ASIF, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

HARSOLIA, ASIF, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

HARSOLIA, ASIF, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

HARSOLIA, ASIF, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

KABOLIZADEH, PEYMAN, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

KABOLIZADEH, PEYMAN, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

LEE, SHARON, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

LEE, SHARON, MD†

Provider ID: N/A

24302 PASEO DE

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

VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

LEE, SHARON, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

LEE, SHARON, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

LEE, SHARON, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

MOYSES, HARRY, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

MOYSES, HARRY, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

RHEUMATOLOGY

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

25411 CABOT RD STE 112

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-21

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-19

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-18

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-15

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

KOOKOOTSEDES, GAYLE, MD

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

Provider ID: N/A

☐ 25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JUL-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

☐ 25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JUL-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

☐ 25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-APR-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

☐ 25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-APR-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

☐ 25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

☐ 25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

☐ 25411 CABOT RD STE 112

LAGUNA HILLS, CA 92653

Effective as of 01-SEP-23

SURGERY COLON

SURGERY

BRADY, MATTHEW, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653

Effective as of 01-MAR-21

BRADY, MATTHEW, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653

Effective as of 01-MAR-21

BRADY, MATTHEW, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653

Effective as of 01-MAR-21

BRADY, MATTHEW, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653

Effective as of 01-MAR-21

SYN, GENE, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 231

LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

SYN, GENE, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 417

LAGUNA HILLS, CA 92653

Effective as of 01-FEB-21

SURGERY GENERAL

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

ASHLEY, BLAKE, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

ASHLEY, BLAKE, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653

Effective as of 01-APR-11

ASHLEY, BLAKE, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653

Effective as of 01-DEC-19

ASHLEY, BLAKE, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653

Effective as of 01-MAY-12

ASHLEY, BLAKE, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653

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

Effective as of 01-MAY-14

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-19

BACON, LOUISE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

BACON, LOUISE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

DEARING, DAVID, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

DEARING, DAVID, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-18

DEARING, DAVID, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-23

DEARING, DAVID, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-19

DEARING, DAVID, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-19

HOLNESS, RONALD, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-19

KLAUSE, ELVIRA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417

LAGUNA HILLS, CA 92653

Effective as of 01-JUN-23

KLAUSE, ELVIRA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-23

KLAUSE, ELVIRA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

KLAUSE, ELVIRA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-23

KLAUSE, ELVIRA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-23

KLAUSE, ELVIRA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653*

Effective as of 01-JUN-23

KLAUSE, ELVIRA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-23

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

KUSHNER, KENNETH, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KUSHNER, KENNETH, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

PHAM, ALEXANDER, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

PHAM, ALEXANDER, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

PHAM, ALEXANDER, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

RAHNEMA, CYRUS, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

RAHNEMA, CYRUS, MD

Provider ID: N/A

23521 PASEO DE VALENCIA

STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

RAHNEMA, CYRUS, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

RAHNEMA, CYRUS, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

ROBERTSON, ELSIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

ROBERTSON, ELSIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

ROBERTSON, ELSIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

ROBERTSON, ELSIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

ROBERTSON, ELSIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

ROBERTSON, ELSIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

ROBERTSON, ELSIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

RONA, KAIS, MD

Provider ID: N/A

11 MAREBLU STE 200
LAGUNA HILLS, CA 92656*
Effective as of 01-FEB-23

SHARMA, RAHUL, DO†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

SHARMA, RAHUL, DO†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

SHAVER, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR

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

STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

SHAVER, JOHN, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SHAVER, JOHN, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

SHAVER, JOHN, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

TENG, WANG, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

TUNG, SHAWNDEEP, MD

Provider ID: N/A
24401 CALLE DE LA LOUISA
STE 102
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

TUNG, SHAWNDEEP, MD

Provider ID: N/A
24401 CALLE DE LA LOUISA
STE 102
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

TUNG, SHAWNDEEP, MD

Provider ID: N/A
24401 CALLE DE LA LOUISA
STE 102
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

TUNG, SHAWNDEEP, MD

Provider ID: N/A
24401 CALLE DE LA LOUISA
STE 102
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

WALLACE, WILLIAM, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

WALLACE, WILLIAM, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

WALLACE, WILLIAM, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

WALLACE, WILLIAM, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

WALLACE, WILLIAM, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-13

WALLACE, WILLIAM, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

WALLACE, WILLIAM, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

WALLACE, WILLIAM, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

WATANABE, BRIAN, MD†

Provider ID: N/A
24953 PASCO DE
VALENCIA
STE 15C
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-21

WATANABE, BRIAN, MD†

Provider ID: N/A
24953 PASCO DE
VALENCIA

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

STE 15C
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-21

WATANABE, BRIAN, MD†

Provider ID: N/A
24953 PASCO DE
VALENCIA
STE 15C
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-21

WONG, JASON, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

WONG, JASON, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-12

WONG, JASON, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-12

WONG, JASON, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

WONG, JASON, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

WONG, JASON, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-20

WONG, JASON, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-20

WONG, JASON, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

***SURGERY GENERAL
VASCULAR***

DEARING, DAVID, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-18

DEARING, DAVID, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

DEARING, DAVID, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-15

DEARING, DAVID, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-19

SHARMA, RAHUL, DO†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-APR-19

SHARMA, RAHUL, DO†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-APR-19

SHARMA, RAHUL, DO†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SHARMA, RAHUL, DO†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-18

SHARMA, RAHUL, DO†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SHARMA, RAHUL, DO†

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

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-19

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-12

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

SURGERY HAND ORTHOPEDIC

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-NOV-20

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-NOV-20

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-NOV-20

SURGERY

NEUROLOGICAL

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

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

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-23

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

JACKSON, ROBERT, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-23

JACKSON, ROBERT, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-23

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-19

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA

MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-19

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-19

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-19

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 504
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-21

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 504
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-21

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 504
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-18

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-APR-22

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JUN-24

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JAN-21

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JAN-21

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-MAY-20

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-MAY-20

SURGERY ORTHOPEDIC

GREENBAUM, BRADLEY, MD

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

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

GREENBAUM, BRADLEY, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415

LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-SEP-23

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-JAN-22

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-MAY-22

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-JUL-21

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-NOV-22

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-NOV-22

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-DEC-21

SURGERY THORACIC

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

GRIFFITH, PATRICK, MD

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

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

HARGROVE, RACHEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

HARGROVE, RACHEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

HARGROVE, RACHEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-22

HARGROVE, RACHEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

HARGROVE, RACHEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

HARGROVE, RACHEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KANAAN, SAMER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-17

KANAAN, SAMER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-17

LAM, TUAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-APR-19

POWELL, LEDFORD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653
Effective as of 01-APR-16

POWELL, LEDFORD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

POWELL, LEDFORD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-14

POWELL, LEDFORD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

POWELL, LEDFORD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-20

POWELL, LEDFORD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-16

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

SURGICAL ONCOLOGY

BREMNER, AMY, MD

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

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

BREMNER, AMY, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

BREMNER, AMY, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

BREMNER, AMY, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

BREMNER, AMY, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 102
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-21

UROLOGY

BUI, DON, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA

MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

ELKHOURY, FUAD, MD†

Provider ID: N/A

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

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

ELKHOORY, FUAD, MD†
Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

ELKHOORY, FUAD, MD†
Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

ELKHOORY, FUAD, MD†
Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-22

ELKHOORY, FUAD, MD†
Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-22

**GRUENENFELDER, JENNIFER,
MD**

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

HO, TAMMY, MD†
Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

HO, TAMMY, MD†
Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

HO, TAMMY, MD†
Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

HO, TAMMY, MD†
Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

HO, TAMMY, MD†
Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

HO, TAMMY, MD†
Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

HO, TAMMY, MD†
Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

HO, TAMMY, MD†
Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

HO, TAMMY, MD†
Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

HO, TAMMY, MD†
Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-22

HO, TAMMY, MD†
Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

KIM, MOSES, MD†
Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

KIM, MOSES, MD†
Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

KIM, MOSES, MD†
Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500

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

LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-19

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA

MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

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

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO VALENCIA7C
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-15

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO VALENCIA7C
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-12

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-21

PASIN, ERIK, MD

Provider ID: N/A

24321 AVENIDA DE LA
CARLOTA STE H7
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

PASIN, ERIK, MD

Provider ID: N/A

24321 AVENIDA DE LA
CARLOTA STE H7
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA

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

MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

SPITZ, AARON, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

SPITZ, AARON, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-14

SPITZ, AARON, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-14

SPITZ, AARON, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA

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

MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SU, DANIEL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SU, DANIEL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SU, DANIEL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

SU, DANIEL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SU, DANIEL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SU, DANIEL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SU, DANIEL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

SU, DANIEL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SU, DANIEL, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

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

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-17

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-21

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

ALLERGY IMMUNOLOGY

DYER, MARC, MD

Provider ID: N/A

30131 TOWN CENTER DR
STE 120
LAGUNA NIGUEL, CA 92677

Effective as of 01-JAN-13

DYER, MARC, MD

Provider ID: N/A

30131 TOWN CENTER DR
STE 120
LAGUNA NIGUEL, CA 92677
Effective as of 01-JAN-18

DYER, MARC, MD

Provider ID: N/A

30131 TOWN CENTER DR
STE 120
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-14

AUDIOLOGIST

ABRAMSON, MARIA, AuD†

Provider ID: N/A

28985 GOLDEN LANTERN
STE B105
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-21

ABRAMSON, MARIA, AuD†

Provider ID: N/A

28985 GOLDEN LANTERN
STE B105
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-21

CERTIFIED

ACUPUNCTURIST

PARK, ERIC, LAC†

Provider ID: N/A

30101 TOWN CENTER DR
STE 112
LAGUNA NIGUEL, CA 92677
Effective as of 01-OCT-22

DERMATOLOGY

KLEIN, LORRIE, MD†

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

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677
Effective as of 01-JAN-23

KLEIN, LORRIE, MD†

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677
Effective as of 01-JUL-21

KLEIN, LORRIE, MD†

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677
Effective as of 01-OCT-23

KLEIN, LORRIE, MD†

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677
Effective as of 01-SEP-19

KLEIN, LORRIE, MD†

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677
Effective as of 01-SEP-19

LANDER, JEFFREY, MD†

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677
Effective as of 01-OCT-22

LANDER, JEFFREY, MD†

Provider ID: N/A

30201 GOLDEN LANTERN
STE B

LAGUNA NIGUEL, CA 92677

Effective as of 01-JAN-23

LANDER, JEFFREY, MD†

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677
Effective as of 01-OCT-23

NAMI, NAVID, DO†

Provider ID: N/A

30281 GOLDEN LANTERN
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAR-22

ENDOCRINOLOGY

METABOLISM DIABETES

HAMIDI, AFSHIN, MD

Provider ID: N/A

28202 CABOT RD STE 300
LAGUNA NIGUEL, CA 92677
Effective as of 01-JUL-24

HAMIDI, AFSHIN, MD

Provider ID: N/A

28202 CABOT RD STE 300
LAGUNA NIGUEL, CA 92677
Effective as of 01-JUL-24

NEMATI, MARYAM, MD

Provider ID: N/A

30281 GOLDEN LANTERN
LAGUNA NIGUEL, CA 92677
Effective as of 01-SEP-23

GASTROENTEROLOGY

ARGUELLO, JUAN, MD

Provider ID: N/A

30131 TOWN CENTER DR
STE 215
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-17

ARGUELLO, JUAN, MD

Provider ID: N/A

30131 TOWN CENTER DR
STE 215
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-17

GENERAL PRACTICE

PATEL, JYOTINKUMAR, MD†

Provider ID: N/A

30281 GOLDEN LANTERN
LAGUNA NIGUEL, CA 92677
Effective as of 01-SEP-22

INTERNAL MEDICINE

SHAHIM, ZAHRA, MD

Provider ID: N/A

32341 GOLDEN LANTERN
STE D
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-23

MEDICAL ONCOLOGY

WAGNER, EDWARD, MD

Provider ID: N/A

25500 RANCHO NIGUEL
RD STE 240
LAGUNA NIGUEL, CA 92677
Teleservice
Effective as of 01-OCT-12

NEUROLOGY CHILD

GARFINKLE, REBECCA, DO

Provider ID: N/A

30131 TOWN CENTER DR
STE 245
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAY-24

GARFINKLE, REBECCA, DO

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

Provider ID: N/A

30131 TOWN CENTER DR
STE 245
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAY-24

GARFINKLE, REBECCA, DO

Provider ID: N/A

30131 TOWN CENTER DR
STE 245
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAY-14

GARFINKLE, REBECCA, DO

Provider ID: N/A

30131 TOWN CENTER DR
STE 245
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-14

MCINTOSH, ANDREW, MD†

Provider ID: N/A

30131 TOWN CENTER DR
STE 195
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-14

MCINTOSH, ANDREW, MD†

Provider ID: N/A

30131 TOWN CENTER DR
STE 195
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-13

MCINTOSH, ANDREW, MD†

Provider ID: N/A

30131 TOWN CENTER DR
STE 195
LAGUNA NIGUEL, CA 92677
Effective as of 01-JAN-21

MCINTOSH, ANDREW, MD†

Provider ID: N/A

30131 TOWN CENTER DR
STE 195

LAGUNA NIGUEL, CA 92677
Effective as of 01-MAR-21

**PRZEKLASA AUTH, MELISSA,
MD†**

Provider ID: N/A

30131 TOWN CENTER DR
STE 237
LAGUNA NIGUEL, CA 92677
Effective as of 01-SEP-19

**PRZEKLASA AUTH, MELISSA,
MD†**

Provider ID: N/A

30131 TOWN CENTER DR
STE 237
LAGUNA NIGUEL, CA 92677
Effective as of 01-SEP-19

**PEDIATRIC ALLERGY /
IMMUNOLOGY**

DYER, MARC, MD

Provider ID: N/A

30131 TOWN CENTER DR
STE 120
LAGUNA NIGUEL, CA 92677
Effective as of 01-JAN-21

PODIATRIST

COX, MATTHEW, DPM

Provider ID: N/A

30001 TOWN CENTER DR
STE E2
LAGUNA NIGUEL, CA 92677
Effective as of 01-JAN-18

PSYCHOLOGIST

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

30100 CROWN VALLEY
PKWY STE 17C
LAGUNA NIGUEL, CA 92677

Effective as of 01-OCT-23

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

30131 TOWN CENTER DR
STE 268
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAR-15

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

30131 TOWN CENTER DR
STE 268
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAR-15

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

30100 CROWN VALLEY
PKWY STE 17C
LAGUNA NIGUEL, CA 92677
Effective as of 01-OCT-23

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

30100 CROWN VALLEY
PKWY STE 17C
LAGUNA NIGUEL, CA 92677
Effective as of 01-OCT-23

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

30100 CROWN VALLEY
PKWY STE 17C
LAGUNA NIGUEL, CA 92677
Effective as of 01-OCT-23

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

30131 TOWN CENTER DR
STE 268
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAR-15

ENGELMAN, SUZANNE, PhD

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

Provider ID: N/A
 30131 TOWN CENTER DR
 STE 268
 LAGUNA NIGUEL, CA 92677
 Effective as of 01-MAR-15

**FAMILY PRACTICE
SPORTS MEDICINE**

GRAHAM, SCOTT, MD†
 Provider ID: N/A
 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-FEB-22

**VENEZIANO, CHRISTOPHER,
MD†**
 Provider ID: N/A

24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-OCT-23

**VENEZIANO, CHRISTOPHER,
MD†**
 Provider ID: N/A

24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-FEB-23

PHYSICIANS ASSISTANT

BOW, LINDA, PA†
 Provider ID: N/A
 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-SEP-23

NGUYEN, TONY, PA†
 Provider ID: N/A
 24331 EL TORO RD STE 200

LAGUNA WOODS, CA
 92637
 Effective as of 01-AUG-22

NGUYEN, TONY, PA†
 Provider ID: N/A
 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-AUG-22

PODIATRIST

BATHAEE, FARSHAD, DPM
 Provider ID: N/A
 24331 EL TORO RD STE 370
 LAGUNA WOODS, CA
 92637
 Effective as of 01-JAN-18

BATHAEE, FARSHAD, DPM
 Provider ID: N/A
 24331 EL TORO RD STE 370
 LAGUNA WOODS, CA
 92637
 Effective as of 01-JAN-17

BATHAEE, FARSHAD, DPM
 Provider ID: N/A
 24331 EL TORO RD STE 370
 LAGUNA WOODS, CA
 92637
 Effective as of 01-DEC-21

ROOHIAN, ARSHIA, DPM
 Provider ID: N/A
 24331 EL TORO RD STE 370
 LAGUNA WOODS, CA
 92637
 Effective as of 01-DEC-21

ROOHIAN, ARSHIA, DPM
 Provider ID: N/A
 24331 EL TORO RD STE 370
 LAGUNA WOODS, CA

92637
 Effective as of 01-JUL-20

**REGISTERED PHYSICAL
THERAPIST**

FRESHMAN, JANELLE, PT†
 Provider ID: N/A
 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-OCT-23

FRESHMAN, JANELLE, PT†
 Provider ID: N/A
 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-FEB-23

PARK, JOSEPH, PT
 Provider ID: N/A
 24361 EL TORO RD STE 140
 LAGUNA WOODS, CA
 92637
 Effective as of 01-OCT-23

**SURGERY HAND
ORTHOPEDIC**

KIM, ABRAHAM, MD†
 Provider ID: N/A
 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-MAY-22

SURGERY ORTHOPEDIC

AMINIAN, ARASH, MD†
 Provider ID: N/A
 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-NOV-14

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

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAY-12

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-22

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-22

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-11

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-14

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-18

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JUN-24

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-22

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

Effective as of 01-JUN-24

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-24

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-24

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-24

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-24

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

GRAHAM, SCOTT, MD†

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

Provider ID: N/A	92637	JOHNSON, BRYCE, MD†
☐ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Effective as of 01-MAR-21	Provider ID: N/A
Effective as of 01-FEB-22	JOHNSON, BRYCE, MD†	☐ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637
GRAHAM, SCOTT, MD†	Provider ID: N/A	Effective as of 01-FEB-21
Provider ID: N/A	☐ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	KADAKIA, NIMISH, MD†
☐ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Effective as of 01-JUN-24	Provider ID: N/A
Effective as of 01-JAN-18	JOHNSON, BRYCE, MD†	☐ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637
GURBANI, AJAY, MD	Provider ID: N/A	Effective as of 01-DEC-21
Provider ID: N/A	☐ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	KADAKIA, NIMISH, MD†
☐ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Effective as of 01-SEP-23	Provider ID: N/A
Effective as of 01-AUG-23	JOHNSON, BRYCE, MD†	☐ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637
GURBANI, AJAY, MD	Provider ID: N/A	Effective as of 01-SEP-23
Provider ID: N/A	☐ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	KADAKIA, NIMISH, MD†
☐ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Effective as of 01-DEC-21	Provider ID: N/A
Effective as of 01-AUG-23	JOHNSON, BRYCE, MD†	☐ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637
GURBANI, AJAY, MD	Provider ID: N/A	Effective as of 01-JUN-24
Provider ID: N/A	☐ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	KIM, ABRAHAM, MD†
☐ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Effective as of 01-MAY-24	Provider ID: N/A
Effective as of 01-AUG-23	JOHNSON, BRYCE, MD†	☐ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637
GURBANI, AJAY, MD	Provider ID: N/A	Effective as of 01-JUN-23
Provider ID: N/A	☐ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	KIM, ABRAHAM, MD†
☐ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Effective as of 01-MAY-24	Provider ID: N/A
Effective as of 01-SEP-23	JOHNSON, BRYCE, MD†	☐ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637
JOHNSON, BRYCE, MD†	Provider ID: N/A	Effective as of 01-JUN-23
Provider ID: N/A	☐ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	KIM, ABRAHAM, MD†
☐ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Effective as of 01-JAN-18	Provider ID: N/A
Effective as of 01-JAN-18		☐ 24331 EL TORO RD STE 200

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

LAGUNA WOODS, CA
92637
Effective as of 01-JUN-24

KIM, ABRAHAM, MD†
Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-SEP-20

KIM, ABRAHAM, MD†
Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-SEP-23

KIM, ABRAHAM, MD†
Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-SEP-20

KIM, ABRAHAM, MD†
Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-SEP-18

KIM, ABRAHAM, MD†
Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-OCT-23

KIM, ABRAHAM, MD†
Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-DEC-18

KIM, ABRAHAM, MD†
Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-AUG-18

KIM, ABRAHAM, MD†
Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-JAN-23

KIM, ABRAHAM, MD†
Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-JAN-24

KIM, ABRAHAM, MD†
Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-JAN-24

KIM, ABRAHAM, MD†
Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-JAN-24

KIM, ABRAHAM, MD†
Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-JAN-24

MOLHO, DAVID, MD
Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Teleservice
Effective as of 01-JAN-24

MOLHO, DAVID, MD
Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Teleservice
Effective as of 01-JAN-24

MOLHO, DAVID, MD
Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Teleservice
Effective as of 01-JAN-24

MOLHO, DAVID, MD
Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Teleservice
Effective as of 01-JAN-24

MOLHO, DAVID, MD
Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Teleservice
Effective as of 01-APR-24

MOLHO, DAVID, MD
Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Teleservice

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

Effective as of 01-APR-24

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-JUN-24

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JUN-24

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-11

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-APR-11

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAY-22

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAY-22

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAY-12

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-18

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

PATEL, AMAR, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

PATEL, AMAR, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

PATEL, AMAR, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

PATEL, AMAR, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

PYRKO, PETER, MD

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

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-23

TOCCI, STEPHEN, MD†

Provider ID: N/A

24310 MOULTON PKWY
STE O563
LAGUNA WOODS, CA
92637

Effective as of 01-JUL-12

TOCCI, STEPHEN, MD†

Provider ID: N/A

24310 MOULTON PKWY
STE O563
LAGUNA WOODS, CA
92637

Effective as of 01-JUL-12

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JUN-24

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-21

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-21

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-21

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-11

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-23

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-23

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

WONG, JEFFREY, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

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

WONG, JEFFREY, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-19

WONG, JEFFREY, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

WONG, JEFFREY, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

YOUDERIAN, ARI, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

YOUDERIAN, ARI, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-18

YOUDERIAN, ARI, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

YOUDERIAN, ARI, MD†

Provider ID: N/A

24331 EL TORO RD STE 200

LAGUNA WOODS, CA
92637

Effective as of 01-FEB-15

YOUDERIAN, ARI, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-15

YOUDERIAN, ARI, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-16

YOUDERIAN, ARI, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-16

**CARDIOVASCULAR
DISEASE**

QASQAS, SHADI, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 228
LAKE ELSINORE, CA 92532

Effective as of 01-JAN-17

QASQAS, SHADI, MD†

Provider ID: N/A

31571 CANYON ESTATES DR

STE 228

LAKE ELSINORE, CA 92532

Effective as of 01-MAR-21

QASQAS, SHADI, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 228
LAKE ELSINORE, CA 92532

Effective as of 01-JUN-17

QASQAS, SHADI, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 228
LAKE ELSINORE, CA 92532

Effective as of 01-JUL-21

QASQAS, SHADI, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 228
LAKE ELSINORE, CA 92532

Effective as of 01-JUL-21

QASQAS, SHADI, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 228
LAKE ELSINORE, CA 92532

Effective as of 01-MAY-15

QASQAS, SHADI, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 228
LAKE ELSINORE, CA 92532

Effective as of 01-MAY-15

**CERTIFIED NURSE
PRACTITIONER**

AGORRILLA, MARIA, NP

Provider ID: N/A

31736 MISSION TRL STE G

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

LAKE ELSINORE, CA 92530
Effective as of 01-OCT-23

VALENZUELA, CANDACE, NP

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-24

CHIROPRACTOR

HERNANDEZ, MARCO, DC

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-FEB-24

HERNANDEZ, MARCO, DC

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-FEB-24

HERNANDEZ, MARCO, DC

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-FEB-24

HERNANDEZ, MARCO, DC

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-FEB-24

HERNANDEZ, MARCO, DC

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-FEB-24

JU, NATHANIEL, DC†

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530

Effective as of 01-JUL-22

**FEMALE PELVIC MED AND
RECONSTRUCTIVE SURG**

KAAKI, BILAL, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-22

INTERNAL MEDICINE

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-OCT-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-NOV-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-NOV-20

MAHESHWARI, ANOOP, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 219
LAKE ELSINORE, CA 92532
Effective as of 01-MAY-15

YU, JERRY, MD†

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-DEC-23

YU, JERRY, MD†

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

YU, JERRY, MD†

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

YU, JERRY, MD†

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

**INTERVENTIONAL
CARDIOLOGY**

ATTIA, NADER, DO†

Provider ID: N/A

31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532
Effective as of 01-JAN-19

MESSENGER, BRADLEY, MD†

Provider ID: N/A

31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532
Effective as of 01-JAN-19

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A

31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532
Effective as of 01-JAN-19

SANGODKAR, SANDEEP, DO†

Provider ID: N/A

31581 CANYON ESTATES
DR

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

LAKE ELSINORE, CA 92532
Effective as of 01-JAN-19

NEPHROLOGY

AKPOROTU, AKPOBO, MD

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-24

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-FEB-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-JAN-20

CHANG, DAVID, MD†

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

CHANG, DAVID, MD†

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

CHANG, DAVID, MD†

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530

Effective as of 01-AUG-18

**OBSTETRICS /
GYNECOLOGY**

FRANCIS, LARRY, MD†

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-DEC-22

FRANCIS, LARRY, MD†

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-DEC-22

FRANCIS, LARRY, MD

Provider ID: N/A

31361 RIVERSIDE DR
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-24

FRANCIS, LARRY, MD†

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

141 N MAIN ST
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-21

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

141 N MAIN ST
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-21

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530

Effective as of 01-JUL-24

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-21

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-21

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24

KAAKI, BILAL, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-24

REY, RODOLFO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-SEP-23

REY, RODOLFO, MD†

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

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-NOV-22

REY, RODOLFO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24

REY, RODOLFO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24

REY, RODOLFO, MD†

Provider ID: N/A

141 N MAIN ST
LAKE ELSINORE, CA 92530
Effective as of 01-JAN-21

VADAPARAMPIL, JANET, MD†

Provider ID: N/A

141 N MAIN ST
LAKE ELSINORE, CA 92530
Effective as of 01-JAN-21

VADAPARAMPIL, JANET, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24

VADAPARAMPIL, JANET, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24

VADAPARAMPIL, JANET, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530

Effective as of 01-APR-24

VADAPARAMPIL, JANET, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JAN-21

VADAPARAMPIL, JANET, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-24

OPTOMETRIST

GEE, JENNIFER, OD

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

MORA, WENDY, OD

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

RICH, RYAN, OD

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

TAM, EMILY, OD

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

PHYSICIANS ASSISTANT

FATHI, NAGHMEH, PA

Provider ID: N/A

31581 CANYON ESTATES

DR

LAKE ELSINORE, CA 92532
Effective as of 01-MAY-19

RUIZ-FLORES, ROSE, PA

Provider ID: N/A

425 DIAMOND DR STE 105
LAKE ELSINORE, CA 92530
Effective as of 01-SEP-23

PULMONARY DISEASES

MAHESHWARI, ANOOP, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 219
LAKE ELSINORE, CA 92532
Effective as of 01-JUL-24

MAHESHWARI, ANOOP, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 219
LAKE ELSINORE, CA 92532
Effective as of 01-MAY-15

MAHESHWARI, ANOOP, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 219
LAKE ELSINORE, CA 92532
Effective as of 01-AUG-13

MAHESHWARI, ANOOP, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 219
LAKE ELSINORE, CA 92532
Effective as of 01-AUG-14

REGISTERED PHYSICAL THERAPIST

CASTELLON, SHAWN, PT

Provider ID: N/A

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

425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-23

CASTELLON, SHAWN, PT
Provider ID: N/A

425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-23

DUPLECHAN, LAWRENCE, PT
Provider ID: N/A

425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-MAY-23

DUPLECHAN, LAWRENCE, PT
Provider ID: N/A

425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-MAY-23

EDDOW, JIM, PT†
Provider ID: N/A

425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-20

EDDOW, JIM, PT†
Provider ID: N/A

425 DIAMOND DR
LAKE ELSINORE, CA 92530
Effective as of 01-MAY-17

EDDOW, JIM, PT†
Provider ID: N/A

425 DIAMOND DR
LAKE ELSINORE, CA 92530
Effective as of 01-MAY-17

PLASTER, WHITNEY, PT
Provider ID: N/A

425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-MAR-23

PLASTER, WHITNEY, PT
Provider ID: N/A

425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-MAR-23

TSAI, CHIAHONG, PT
Provider ID: N/A

425 DIAMOND DR STE
101ST
LAKE ELSINORE, CA 92530
Effective as of 01-NOV-23

TSAI, CHIAHONG, PT
Provider ID: N/A

425 DIAMOND DR STE
101ST
LAKE ELSINORE, CA 92530
Effective as of 01-NOV-23

VARGHESE, ROSHAN, PT
Provider ID: N/A

425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-MAY-24

VARGHESE, ROSHAN, PT
Provider ID: N/A

425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-MAY-24

**CERTIFIED
ACUPUNCTURIST**

KIM, ILWHA, LAC
Provider ID: N/A

23331 EL TORO RD STE 107
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

WEON, SUK KYENG, LAC
Provider ID: N/A

23361 EL TORO RD STE 112

LAKE FOREST, CA 92630
Effective as of 01-FEB-22

**CERTIFIED NURSE
PRACTITIONER**

DO, JOCELYN, NP
Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-MAY-24

TRAN, STEPHANIE, NP
Provider ID: N/A

26501 RANCHO PKWY S
STE 301
LAKE FOREST, CA 92630
Effective as of 01-MAY-24

TRAN, STEPHANIE, NP
Provider ID: N/A

26501 RANCHO PKWY S
STE 301
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

TRAN, STEPHANIE, NP
Provider ID: N/A

26501 RANCHO PKWY S
STE 301
LAKE FOREST, CA 92630
Effective as of 01-MAR-24


DERMATOLOGY

BELL, IRA, MD†
Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22


BELL, IRA, MD†
Provider ID: N/A

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

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-NOV-18


BELL, IRA, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22


BELL, IRA, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22


BELL, IRA, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22


BELL, IRA, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BELL, IRA, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BELL, IRA, MD†


Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630

Effective as of 01-DEC-18


BELL, IRA, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18


BELL, IRA, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-APR-23


BENIK, KAREN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-FEB-19


BENIK, KAREN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18


BENIK, KAREN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-APR-23


BENIK, KAREN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-DEC-18


BENIK, KAREN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21


BENIK, KAREN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21


BENIK, KAREN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21


BENIK, KAREN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21


BENIK, KAREN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

BENIK, KAREN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-NOV-18

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210

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

LAKE FOREST, CA 92630
Effective as of 01-NOV-18

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210

LAKE FOREST, CA 92630
Effective as of 01-JUL-21

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210

LAKE FOREST, CA 92630
Effective as of 01-JUL-21

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210

LAKE FOREST, CA 92630
Effective as of 01-JUL-21

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210

LAKE FOREST, CA 92630
Effective as of 01-JUL-21

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210

LAKE FOREST, CA 92630
Effective as of 01-JUL-21

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210

LAKE FOREST, CA 92630
Effective as of 01-DEC-18

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 220

LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210

LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 220

LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 220

LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210

LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 220

LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD

STE 210

LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210

LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210

LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210

LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210

LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210

LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210

LAKE FOREST, CA 92630
Effective as of 01-NOV-18

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

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-SEP-22

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-OCT-18

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-NOV-19

EMERGENCY MEDICINE

KENNEDY, GREGORY, MD

Provider ID: N/A

23321 EL TORO RD STE F
LAKE FOREST, CA 92630
Effective as of 01-MAY-24

ENDOCRINOLOGY

METABOLISM DIABETES

KRISHNAN, PRIYANKA, MD

Provider ID: N/A

23331 EL TORO RD STE 102
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

KRISHNAN, PRIYANKA, MD

Provider ID: N/A

23331 EL TORO RD STE 102
LAKE FOREST, CA 92630
Effective as of 01-AUG-21

GASTROENTEROLOGY

ASHRAF, HEBA, MD

Provider ID: N/A

25982 PALA
STE 140
LAKE FOREST, CA 92691
Effective as of 01-JUN-24

ASHRAF, HEBA, MD

Provider ID: N/A

25982 PALA
STE 140
LAKE FOREST, CA 92691
Effective as of 01-JUN-24

ASHRAF, HEBA, MD

Provider ID: N/A

25982 PALA
STE 140
LAKE FOREST, CA 92691
Effective as of 01-JUN-24

ASHRAF, HEBA, MD

Provider ID: N/A

25982 PALA
STE 140
LAKE FOREST, CA 92691
Effective as of 01-JUN-24

CHOI, DAVID, DO†

Provider ID: N/A

26672 PORTOLA PKWY STE
104
LAKE FOREST, CA 92610
Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

26672 PORTOLA PKWY STE
104
LAKE FOREST, CA 92610
Effective as of 01-JAN-23

CHOI, DAVID, DO†

Provider ID: N/A

26672 PORTOLA PKWY STE
104
LAKE FOREST, CA 92610
Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

26672 PORTOLA PKWY STE
104
LAKE FOREST, CA 92610
Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

26672 PORTOLA PKWY STE
104
LAKE FOREST, CA 92610
Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

26672 PORTOLA PKWY STE
104
LAKE FOREST, CA 92610
Effective as of 01-OCT-23

JAMAL, MOHAMMAD, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-OCT-22

JAMAL, MOHAMMAD, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-APR-23

JAMAL, MOHAMMAD, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103

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

LAKE FOREST, CA 92630
Effective as of 01-APR-23

JAMAL, MOHAMMAD, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103

LAKE FOREST, CA 92630
Effective as of 01-APR-24

JAMAL, MOHAMMAD, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103

LAKE FOREST, CA 92630
Effective as of 01-MAY-24

JAMAL, MOHAMMAD, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103

LAKE FOREST, CA 92630
Effective as of 01-JUN-24

JAMAL, MOHAMMAD, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103

LAKE FOREST, CA 92630
Effective as of 01-JUN-24

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103

LAKE FOREST, CA 92630
Effective as of 01-JUN-24

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103

LAKE FOREST, CA 92630
Effective as of 01-JUN-24

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630

Effective as of 01-JUN-22

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630

Effective as of 01-JAN-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630

Effective as of 01-JAN-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630

Effective as of 01-DEC-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630

Effective as of 01-DEC-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630

Effective as of 01-DEC-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S

STE 103
LAKE FOREST, CA 92630
Effective as of 01-APR-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630

Effective as of 01-MAY-24

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630

Effective as of 01-DEC-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630

Effective as of 01-DEC-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630

Effective as of 01-DEC-23

SZU, ERIC, MD

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630

Effective as of 01-OCT-23

SZU, ERIC, MD

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630

Effective as of 01-FEB-23

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

SZU, ERIC, MD

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

SZU, ERIC, MD

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-MAY-24

GYNECOLOGY

WALLACE, PATRICIA, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY
STE 381
LAKE FOREST, CA 92691
Effective as of 01-FEB-24

INTERNAL MEDICINE

CHEN, MAY, MD

Provider ID: N/A

22621 LAKE FOREST DR STE
D1
LAKE FOREST, CA 92630
Effective as of 01-APR-23

CHEN, MAY, MD

Provider ID: N/A

22621 LAKE FOREST DR STE
D1
LAKE FOREST, CA 92630
Effective as of 01-APR-23

NEUROLOGY

NIK, ANDREW, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY
STE 320
LAKE FOREST, CA 92691
Effective as of 01-MAY-24

NIK, ANDREW, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY
STE 320
LAKE FOREST, CA 92691
Effective as of 01-MAY-24

OPHTHALMOLOGY

FAZILAT, GOLAREH, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 150
LAKE FOREST, CA 92630
Effective as of 01-JAN-21

FAZILAT, GOLAREH, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 150
LAKE FOREST, CA 92630
Effective as of 01-APR-21

FAZILAT, GOLAREH, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 150
LAKE FOREST, CA 92630
Effective as of 01-APR-21

FAZILAT, GOLAREH, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 150
LAKE FOREST, CA 92630
Effective as of 01-NOV-18

OPTOMETRIST

WELLS, MARY, OD†

Provider ID: N/A

23591 EL TORO RD STE 145
LAKE FOREST, CA 92630
Effective as of 01-JAN-17

WELLS, MARY, OD†

Provider ID: N/A

23591 EL TORO RD STE 145
LAKE FOREST, CA 92630
Effective as of 01-JAN-18

PHYSICIANS ASSISTANT

ANASTASIU, DANIELLE, PA†

Provider ID: N/A

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

ANASTASIU, DANIELLE, PA†

Provider ID: N/A

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

ANASTASIU, DANIELLE, PA†

Provider ID: N/A

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

DE LEON, ROBERT, PA†

Provider ID: N/A

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

DE LEON, ROBERT, PA†

Provider ID: N/A

24401 MUIRLANDS BLVD

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

STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

DE LEON, ROBERT, PA†

Provider ID: N/A

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

KIM, JANE, PA

Provider ID: N/A

25982 PALA
STE 140
LAKE FOREST, CA 92691
Effective as of 01-JUN-24

VU, BAO-KHOI, PA

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-MAY-24

WHITNEY, LESLIE, PA

Provider ID: N/A

25982 PALA
STE 140
LAKE FOREST, CA 92691
Effective as of 01-JUN-24

WHITNEY, LESLIE, PA

Provider ID: N/A

25982 PALA
STE 140
LAKE FOREST, CA 92691
Effective as of 01-AUG-24

WHITNEY, LESLIE, PA

Provider ID: N/A

25982 PALA
STE 140
LAKE FOREST, CA 92691
Effective as of 01-AUG-24

WU, VANNA, PA

Provider ID: N/A

25982 PALA
STE 140
LAKE FOREST, CA 92691
Effective as of 01-JUN-24

PSYCHIATRY

DESILVA, GAYANI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

DESILVA, GAYANI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

DESILVA, GAYANI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

DESILVA, GAYANI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

DESILVA, GAYANI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

JAKKULA, JAGAN, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-MAR-21

JAKKULA, JAGAN, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

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

LAKE FOREST, CA 92630
Effective as of 01-SEP-19

JAKKULA, JAGAN, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-SEP-19

JAKKULA, JAGAN, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-MAR-21

JAKKULA, JAGAN, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-SEP-19

JAKKULA, JAGAN, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-SEP-19

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-OCT-23

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-NOV-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-OCT-23

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD

STE 131

LAKE FOREST, CA 92630
Effective as of 01-NOV-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-DEC-21

RAJPOOT, DEEPAK, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-FEB-22

RAJPOOT, DEEPAK, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-FEB-22

RAJPOOT, DEEPAK, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-FEB-22

RAJPOOT, DEEPAK, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-FEB-22

PSYCHOLOGIST

KANG, EILEEN, PhD

Provider ID: N/A

13 ORCHARD STE 103
LAKE FOREST, CA 92630

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

Effective as of 01-MAY-15

KANG, EILEEN, PhD

Provider ID: N/A

📍 13 ORCHARD STE 103
LAKE FOREST, CA 92630

Effective as of 01-MAY-15

REGISTERED PHYSICAL THERAPIST

BECKER GALUSHA, JANE, PT

Provider ID: N/A

📍 22821 LAKE FOREST DR STE
100
LAKE FOREST, CA 92630

Effective as of 01-MAY-20

SPEECH PATHOLOGIST

MARSDEN, CLAIRE, SP

Provider ID: N/A

📍 22672 LAMBERT ST STE 612
LAKE FOREST, CA 92630

Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP

Provider ID: N/A

📍 22672 LAMBERT ST STE 611
LAKE FOREST, CA 92630

Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP

Provider ID: N/A

📍 22672 LAMBERT ST STE 611
LAKE FOREST, CA 92630

Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP

Provider ID: N/A

📍 22672 LAMBERT ST STE 612
LAKE FOREST, CA 92630

Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP

Provider ID: N/A

📍 22672 LAMBERT ST STE 611
LAKE FOREST, CA 92630

Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP

Provider ID: N/A

📍 22672 LAMBERT ST STE 612
LAKE FOREST, CA 92630

Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP

Provider ID: N/A

📍 22672 LAMBERT ST STE 611
LAKE FOREST, CA 92630

Effective as of 01-JUN-24

MARSDEN, CLAIRE, SP

Provider ID: N/A

📍 22672 LAMBERT ST STE 612
LAKE FOREST, CA 92630

Effective as of 01-JUN-24

UROLOGY

CHUANG, KAI-WEN, MD

Provider ID: N/A

📍 26691 PLAZA
STE 130
LAKE FOREST, CA 92691

Effective as of 01-JAN-24

CHIROPRACTOR

CASTRO, DAVID, DC

Provider ID: N/A

📍 10039 VINE ST
LAKESIDE, CA 92040

Effective as of 01-JAN-23

FULKS, ZACKARY, DC

Provider ID: N/A

📍 10039 VINE ST
LAKESIDE, CA 92040

Effective as of 01-MAY-23

MANSOUR, RASHAD, DC

Provider ID: N/A

📍 10039 VINE ST
LAKESIDE, CA 92040

Effective as of 01-MAR-23

MCCOWN, BARRY, DC

Provider ID: N/A

📍 10039 VINE ST
LAKESIDE, CA 92040

Effective as of 01-DEC-23

ZECHA, RONALD, DC

Provider ID: N/A

📍 10039 VINE ST
LAKESIDE, CA 92040

Effective as of 01-JUL-22

FAMILY PRACTICE

PATEL, RAKESH, MD

Provider ID: N/A

📍 10039 VINE ST
LAKESIDE, CA 92040

Effective as of 01-AUG-24

PSYCHIATRY

LIU-BARBARO, DOROTHY, MD

Provider ID: N/A

📍 10039 VINE ST
LAKESIDE, CA 92040

Effective as of 01-NOV-22

LIU-BARBARO, DOROTHY, MD

Provider ID: N/A

📍 10039 VINE ST
LAKESIDE, CA 92040

Effective as of 01-JAN-24

LIU-BARBARO, DOROTHY, MD

Provider ID: N/A

📍 10039 VINE ST
LAKESIDE, CA 92040

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

Effective as of 01-JAN-24

LIU-BARBARO, DOROTHY, MD

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040

Effective as of 01-NOV-22

PSYCHOLOGIST

BRUNETTO, HEIDI, PSYD

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040*

Effective as of 01-JAN-24

BRUNETTO, HEIDI, PSYD

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040*

Effective as of 01-JAN-24

ANESTHESIOLOGY

GUIANG, RAINIER, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585

Effective as of 01-SEP-19

HYUN, SUZANNE, MD

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585

Effective as of 01-MAR-24

PANG, GARY, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585

Effective as of 01-MAR-24

PANG, GARY, MD†

Provider ID: N/A

27990 SHERMAN RD

MENIFEE, CA 92585

Effective as of 01-SEP-19

ANESTHESIOLOGY PAIN MANAGEMENT

CHEN, HAMILTON, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585

Effective as of 01-SEP-19

CHEN, HAMILTON, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585

Effective as of 01-SEP-19

CHEN, HAMILTON, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585

Effective as of 01-MAY-21

GUIANG, RAINIER, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585

Effective as of 01-MAR-24

GUIANG, RAINIER, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585

Effective as of 01-JUL-24

GUIANG, RAINIER, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585

Effective as of 01-MAY-21

HYUN, SUZANNE, MD

Provider ID: N/A

27990 SHERMAN RD

MENIFEE, CA 92585

Effective as of 01-JUL-24

PANG, GARY, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585

Effective as of 01-JUL-24

PANG, GARY, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585

Effective as of 01-MAY-21

CARDIOVASCULAR DISEASE

ALFAY, WISAM, MD

Provider ID: N/A

26960 CHERRY HILLS
BLVD STE C

MENIFEE, CA 92586

Effective as of 01-JAN-22

ALFAY, WISAM, MD

Provider ID: N/A

26960 CHERRY HILLS
BLVD STE C

MENIFEE, CA 92586

Effective as of 01-MAR-22

TIWARI, RATAN, MD

Provider ID: N/A

26960 CHERRY HILLS
BLVD

STE A

MENIFEE, CA 92586

Effective as of 01-JUL-24

CERTIFIED NURSE PRACTITIONER

LUCACI, BIANCA, NP

Provider ID: N/A

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

29826 HAUN RD STE 300
MENIFEE, CA 92586
Effective as of 01-APR-23

MELOT, KAREN, NP

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-20

MELOT, KAREN, NP

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-20

MELOT, KAREN, NP

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-DEC-20

NGUYEN, ANDY, NP

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-23

NGUYEN, ANDY, NP

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-23

NGUYEN, ANDY, NP

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-23

PAULHUS, PATRICIA, NP†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

PAULHUS, PATRICIA, NP†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

PAULHUS, PATRICIA, NP†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-DEC-20

PAULHUS, PATRICIA, NP†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

PAULHUS, PATRICIA, NP†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-MAR-21

PAULHUS, PATRICIA, NP†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

SERAILE, KIRSTEN, NP

Provider ID: N/A

29826 HAUN RD STE 204
MENIFEE, CA 92586
Effective as of 01-MAY-22

SERAILE, KIRSTEN, NP

Provider ID: N/A

29826 HAUN RD STE 204
MENIFEE, CA 92586
Effective as of 01-MAY-22

VAHDAT, VALERIE, NP

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-JUN-24

VIERA, LIANA, NP†

Provider ID: N/A

29826 HAUN RD STE 300
MENIFEE, CA 92586
Effective as of 01-JAN-22

VIERA, LIANA, NP†

Provider ID: N/A

29826 HAUN RD STE 300
MENIFEE, CA 92586
Effective as of 01-JAN-22

CHIROPRACTOR

FARSHLER, ANTHONY, DC†

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-JUL-22

SHERIDAN, SHANE, DC

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-JUL-22

DERMATOLOGY

JACOBS, RANDOLPH, MD

Provider ID: N/A

28120 BRADLEY RD
MENIFEE, CA 92586
Effective as of 01-JAN-18

JACOBS, RANDOLPH, MD

Provider ID: N/A

28120 BRADLEY RD
MENIFEE, CA 92586

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

Effective as of 01-JAN-18

JACOBS, RANDOLPH, MD

Provider ID: N/A

28120 BRADLEY RD
MENIFEE, CA 92586

Effective as of 01-AUG-24

JACOBS, RANDOLPH, MD

Provider ID: N/A

28120 BRADLEY RD
MENIFEE, CA 92586

Effective as of 01-AUG-24

JACOBS, RANDOLPH, MD

Provider ID: N/A

28120 BRADLEY RD
MENIFEE, CA 92586

Effective as of 01-DEC-18

KOUPAIE, JAFAR, MD

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586

Effective as of 01-JUL-24

KOUPAIE, JAFAR, MD

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586

Effective as of 01-MAY-24

MITCHELL, JESSE, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586

Effective as of 01-JUL-21

MITCHELL, JESSE, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586

Effective as of 01-JUL-24

MITCHELL, JESSE, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586

Effective as of 01-JUL-21

MITCHELL, JESSE, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586

Effective as of 01-AUG-18

MITCHELL, JESSE, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586

Effective as of 01-AUG-18

MITCHELL, JESSE, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586

Effective as of 01-AUG-18

MITCHELL, JESSE, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586

Effective as of 01-AUG-18

ENDOCRINOLOGY

METABOLISM DIABETES

HAIDER, UZMA, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-JUL-21

HAIDER, UZMA, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-DEC-20

HAIDER, UZMA, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-NOV-23

HAIDER, UZMA, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-DEC-20

HAIDER, UZMA, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-APR-24

HAIDER, SHANZAY, MD

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-MAR-24

HAIDER, SHANZAY, MD

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-MAR-24

HAIDER, SHANZAY, MD

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-MAR-24

HAIDER, SHANZAY, MD

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-MAR-24

FAMILY PRACTICE

ZURITA, DANIELA, MD†

Provider ID: N/A

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

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-NOV-22

GASTROENTEROLOGY

**FLANNERY, CHRISTOPHER,
MD**

Provider ID: N/A

29826 HAUN RD STE 308
MENIFEE, CA 92586
Effective as of 01-APR-23

**FLANNERY, CHRISTOPHER,
MD**

Provider ID: N/A

29826 HAUN RD STE 308
MENIFEE, CA 92586
Effective as of 01-APR-23

INTERNAL MEDICINE

JACOBS, NATALIA, MD

Provider ID: N/A

28120 BRADLEY RD
MENIFEE, CA 92586
Effective as of 01-MAY-23

LAC, PETER, MD†

Provider ID: N/A

29878 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JAN-22

NAGASUNDER, ARABHI, DO

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

27851 BRADLEY RD STE 125

MENIFEE, CA 92586

Teleservice

Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-SEP-23

INTERVENTIONAL CARDIOLOGY

GOKHROO, RAHUL, MD†

Provider ID: N/A

26960 CHERRY HILLS
BLVD STE A
MENIFEE, CA 92586
Effective as of 01-DEC-22

GOKHROO, RAHUL, MD†

Provider ID: N/A

26960 CHERRY HILLS
BLVD STE A
MENIFEE, CA 92586
Effective as of 01-DEC-22

LICENSED CLINICAL SOCIAL WORKER

SIERRAS, KELLI, LCSW

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B AND C
MENIFEE, CA 92586
Effective as of 01-MAY-24

SIERRAS, KELLI, LCSW

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B AND C
MENIFEE, CA 92586
Effective as of 01-MAY-24

**TABIL-GALAPON, BERNICE,
LCSW**

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE C
MENIFEE, CA 92586
Effective as of 01-JUL-23

NEPHROLOGY

**CHARLES COWAN, TRICIA,
DO†**

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

**CHARLES COWAN, TRICIA,
DO†**

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

**CHARLES COWAN, TRICIA,
DO†**

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

**CHARLES COWAN, TRICIA,
DO†**

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586

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

Effective as of 01-JUN-19

**CHARLES COWAN, TRICIA,
DO†**

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-OCT-20

**CHARLES COWAN, TRICIA,
DO†**

Provider ID: N/A

📄 29878 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-SEP-17

**CHARLES COWAN, TRICIA,
DO†**

Provider ID: N/A

📄 29878 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-SEP-17

LAC, PETER, MD†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-NOV-19

LAC, PETER, MD†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-MAR-21

LAC, PETER, MD†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-JUN-19

LAC, PETER, MD†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125

MENIFEE, CA 92586

Effective as of 01-JUN-19

LAC, PETER, MD†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-JUN-19

LAC, PETER, MD†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-JUN-19

LAC, PETER, MD†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-DEC-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-NOV-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-OCT-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-OCT-23

NATH, ASHOK, MD†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125

MENIFEE, CA 92586

Effective as of 01-JUN-19

NATH, ASHOK, MD†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-JUN-19

NATH, ASHOK, MD†

Provider ID: N/A

📄 29878 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-MAR-19

YAN, ERIC, MD†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-JUN-19

YAN, ERIC, MD†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-JUN-19

YAN, ERIC, MD†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-JUN-19

YAN, ERIC, MD†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-JUN-19

YAN, ERIC, MD†

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

Provider ID: N/A

📍 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-JUN-19

YAN, ERIC, MD†

Provider ID: N/A

📍 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-MAY-20

YAN, ERIC, MD†

Provider ID: N/A

📍 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-JUL-23

YOUSSEF, AMR, DO†

Provider ID: N/A

📍 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-JUN-22

YOUSSEF, AMR, DO†

Provider ID: N/A

📍 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-SEP-22

YOUSSEF, AMR, DO†

Provider ID: N/A

📍 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-SEP-22

NEUROLOGY

TALANKI, VARUN, MD

Provider ID: N/A

📍 29826 HAUN RD STE 209
MENIFEE, CA 92586

Effective as of 01-DEC-22

OBSTETRICS / GYNECOLOGY

HOM, KATHERINE, MD†

Provider ID: N/A

📍 29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-JUL-23

RIZVI, SYED, MD†

Provider ID: N/A

📍 27174 NEWPORT RD STE 2
MENIFEE, CA 92584

Effective as of 01-MAR-22

URSO, MARY JO, DO†

Provider ID: N/A

📍 29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-AUG-21

URSO, MARY JO, DO†

Provider ID: N/A

📍 29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-AUG-20

URSO, MARY JO, DO†

Provider ID: N/A

📍 29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-AUG-20

URSO, MARY JO, DO†

Provider ID: N/A

📍 29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-JUL-23

OCCUPATIONAL THERAPIST

MERCADO, ROBIN, MD

Provider ID: N/A

📍 30141 ANTELOPE RD STE A
MENIFEE, CA 92584

Effective as of 01-MAY-24

MERCADO, ROBIN, MD

Provider ID: N/A

📍 30141 ANTELOPE RD STE A
MENIFEE, CA 92584

Effective as of 01-MAY-24

STOTLER, APRIL, OT

Provider ID: N/A

📍 30141 ANTELOPE RD STE A
MENIFEE, CA 92584

Effective as of 01-JAN-24

STOTLER, APRIL, OT

Provider ID: N/A

📍 30141 ANTELOPE RD STE A
MENIFEE, CA 92584

Effective as of 01-JAN-24

ZECHA, RICHARD, OT†

Provider ID: N/A

📍 30141 ANTELOPE RD STE A
MENIFEE, CA 92584

Effective as of 01-JAN-21

ZECHA, RICHARD, OT†

Provider ID: N/A

📍 30141 ANTELOPE RD STE A
MENIFEE, CA 92584

Effective as of 01-JAN-21

OPHTHALMOLOGY

CHAWLA, ANUJ, MD†

Provider ID: N/A

📍 29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-JUL-23

CHAWLA, ANUJ, MD†

Provider ID: N/A

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

☒ 29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-JUN-16

CHOW, JASON, MD†

Provider ID: N/A

☒ 27168 NEWPORT RD STE 4
MENIFEE, CA 92584
Effective as of 01-JUL-23

CULOTTA, ANTHONY, MD†

Provider ID: N/A

☒ 29950 HAUN RD STE 202
MENIFEE, CA 92586
Teleservice

Effective as of 01-JUL-23

CULOTTA, ANTHONY, MD†

Provider ID: N/A

☒ 29950 HAUN RD STE 202
MENIFEE, CA 92586
Teleservice

Effective as of 01-NOV-20

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

☒ 29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-OCT-17

LAZZARINI, THOMAS, MD

Provider ID: N/A

☒ 29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

☒ 29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

☒ 29798 HAUN RD STE 200

MENIFEE, CA 92586
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

☒ 29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-FEB-24

LEE, JOHN, MD†

Provider ID: N/A

☒ 29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-JUL-23

LIN, THEODORE, MD†

Provider ID: N/A

☒ 29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-APR-24

LIN, THEODORE, MD†

Provider ID: N/A

☒ 29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-APR-24

LIN, THEODORE, MD†

Provider ID: N/A

☒ 29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-17

LOBUE, THOMAS, MD

Provider ID: N/A

☒ 29950 HAUN RD STE 206
MENIFEE, CA 92586
Effective as of 01-APR-14

SAMUEL, MICHAEL, MD†

Provider ID: N/A

☒ 29950 HAUN RD STE 202
MENIFEE, CA 92586
Teleservice

Effective as of 01-JUL-23

SHELTON, RAYMOND, MD

Provider ID: N/A

☒ 29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-MAY-23

SKINNER, ANTHONY, MD

Provider ID: N/A

☒ 29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-JUN-24

SKINNER, ANTHONY, MD

Provider ID: N/A

☒ 29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-JUN-24

SKINNER, ANTHONY, MD

Provider ID: N/A

☒ 29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-APR-24

SKINNER, ANTHONY, MD

Provider ID: N/A

☒ 29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-APR-24

SKINNER, ANTHONY, MD

Provider ID: N/A

☒ 29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-APR-24

ZHOU, SIWEI, MD†

Provider ID: N/A

☒ 27168 NEWPORT RD STE 4
MENIFEE, CA 92584
Effective as of 01-JUL-23

OPTOMETRIST

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

ARCHIBALD, JOHN, OD†

Provider ID: N/A

27168 NEWPORT RD STE 4
MENIFEE, CA 92584
Effective as of 01-DEC-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

27168 NEWPORT RD STE 4
MENIFEE, CA 92584
Effective as of 01-JUL-23

BARR, AUSTIN, OD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-MAR-23

BARR, AUSTIN, OD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-NOV-22

FENNEMA, ERIC, OD†

Provider ID: N/A

27168 NEWPORT RD STE 4
MENIFEE, CA 92584
Effective as of 01-SEP-22

FENNEMA, ERIC, OD†

Provider ID: N/A

27168 NEWPORT RD STE 4

MENIFEE, CA 92584
Effective as of 01-FEB-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-NOV-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-NOV-21

HAMOUIE, JUDY, OD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-NOV-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-NOV-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-NOV-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-JUL-23

MCINTYRE, DEBRA, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-DEC-17

MCINTYRE, DEBRA, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-DEC-17

MCINTYRE, DEBRA, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-DEC-17

MILLER, RYAN, OD

Provider ID: N/A

29950 HAUN RD STE 206
MENIFEE, CA 92586
Effective as of 01-APR-14

TO, BRITTANY, OD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-JUL-23

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-JUL-23

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-AUG-15

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-JAN-22

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

29826 HAUN RD STE 100

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

MENIFEE, CA 92586
Effective as of 01-AUG-15

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

📍 29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-AUG-15

PHYS MED/ REHAB PAIN MEDICINE

CHEN, HAMILTON, MD†

Provider ID: N/A

📍 27990 SHERMAN RD
MENIFEE, CA 92585

Effective as of 01-JUL-24

PHYSICAL MEDICINE / REHABILITATION

CHEN, HAMILTON, MD†

Provider ID: N/A

📍 27990 SHERMAN RD
MENIFEE, CA 92585

Effective as of 01-MAR-24

PHYSICIANS ASSISTANT

BUSTAMANTE, ANGEL, PA†

Provider ID: N/A

📍 29798 HAUN RD STE 301
MENIFEE, CA 92586

Effective as of 01-MAR-21

BUSTAMANTE, ANGEL, PA†

Provider ID: N/A

📍 29798 HAUN RD STE 301
MENIFEE, CA 92586

Effective as of 01-AUG-20

HUNSAKER, NALANI, PA†

Provider ID: N/A

📍 29826 HAUN RD STE 200

MENIFEE, CA 92586
Effective as of 01-NOV-23

HUNSAKER, NALANI, PA†

Provider ID: N/A

📍 29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-DEC-20

HUNSAKER, NALANI, PA†

Provider ID: N/A

📍 29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-DEC-20

LOPEZ, MARIA, PA†

Provider ID: N/A

📍 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586

Effective as of 01-AUG-21

PSYCHIATRY

ANDERSEN, CLAIRE, MD

Provider ID: N/A

📍 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586

Effective as of 01-DEC-20

ANDERSEN, CLAIRE, MD

Provider ID: N/A

📍 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586

Effective as of 01-DEC-20

PERSAUD, PRIA, MD

Provider ID: N/A

📍 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586

Effective as of 01-AUG-20

PERSAUD, PRIA, MD

Provider ID: N/A

📍 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586

Effective as of 01-AUG-20

PERSAUD, PRIA, MD

Provider ID: N/A

📍 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586

Effective as of 01-AUG-20

PERSAUD, PRIA, MD

Provider ID: N/A

📍 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586

Effective as of 01-AUG-20

SUNDER, RAJAGOPAL, MD

Provider ID: N/A

📍 28400 MCCALL BLVD
MENIFEE, CA 92585

Effective as of 01-JUL-24

SUNDER, RAJAGOPAL, MD

Provider ID: N/A

📍 28400 MCCALL BLVD
MENIFEE, CA 92585

Effective as of 01-JUL-24

PSYCHIATRY CHILD

ANDERSEN, CLAIRE, MD

Provider ID: N/A

📍 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586

Effective as of 01-DEC-20

ANDERSEN, CLAIRE, MD

Provider ID: N/A

📍 26926 CHERRY HILLS

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

BLVD STE B
MENIFEE, CA 92586
Effective as of 01-DEC-20

RADIOLOGY DIAGNOSTIC

BENZL, ROBERT, MD

Provider ID: N/A
27168 NEWPORT RD
STE B
MENIFEE, CA 92584
Effective as of 01-JUL-24

REGISTERED PHYSICAL THERAPIST

ALEXANDER, AUSTIN, PT

Provider ID: N/A
30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-DEC-20

ALEXANDER, AUSTIN, PT

Provider ID: N/A
30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-DEC-20

ALEXANDER, AUSTIN, PT

Provider ID: N/A
29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-DEC-20

ALEXANDER, AUSTIN, PT

Provider ID: N/A
29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-DEC-20

BARI, MONICA, PT

Provider ID: N/A
30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-DEC-23

BARI, MONICA, PT

Provider ID: N/A
30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-DEC-23

COBURN, PIERRE, PT

Provider ID: N/A
30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-24

COBURN, PIERRE, PT

Provider ID: N/A
30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-24

FOX, DELANIE, PT

Provider ID: N/A
30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-OCT-23

FOX, DELANIE, PT

Provider ID: N/A
30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-OCT-23

GARCIA, JASON, PT†

Provider ID: N/A
29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JAN-23

GARCIA, JASON, PT†

Provider ID: N/A
29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JAN-23

HARMAN, JACY, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JAN-22

HARMAN, JACY, PT†

Provider ID: N/A
29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JAN-22

HARMAN, JACY, PT†

Provider ID: N/A
30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-22

HARMAN, JACY, PT†

Provider ID: N/A
30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-22

HIGGINS, DAWN, PT†

Provider ID: N/A
29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JUL-22

HIGGINS, DAWN, PT†

Provider ID: N/A
29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JUL-22

KESEL, KELSEY, PT

Provider ID: N/A
29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-MAR-24

KESEL, KELSEY, PT

Provider ID: N/A
29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-MAR-24

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

KESEL, KELSEY, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-MAR-24

KESEL, KELSEY, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-MAR-24

PATEL, BINOY, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-SEP-17

PATEL, BINOY, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-SEP-17

REED, SAVONNA, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JAN-21

REED, SAVONNA, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JAN-21

REED, SAVONNA, PT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-21

REED, SAVONNA, PT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-21

SABIN, SCOTT, PT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-FEB-19

SABIN, SCOTT, PT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-FEB-19

SABIN, SCOTT, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-FEB-19

SABIN, SCOTT, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-FEB-19

SANCHEZ, EMILY, PT

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JUN-23

SANCHEZ, EMILY, PT

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JUN-23

SANCHEZ, EMILY, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JUN-23

SANCHEZ, EMILY, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JUN-23

RHEUMATOLOGY

BRAVO, ARLENE, MD†

Provider ID: N/A

29798 HAUN RD
MENIFEE, CA 92586
Effective as of 01-APR-21

COLBURN, KEITH, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

MEHTA, AMAL, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-SEP-18

MEHTA, AMAL, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-JUL-23

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

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

MEHTA, AMAL, MD†

Provider ID: N/A

📄 29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-SEP-18

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

📄 29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-OCT-09

RAMASWAMY, DHARMARAJAN, MD†

Provider ID: N/A

📄 29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAY-21

RAMASWAMY, DHARMARAJAN, MD†

Provider ID: N/A

📄 29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

TRIVEDI, JANKI, MD†

Provider ID: N/A

📄 29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

TRIVEDI, JANKI, MD†

Provider ID: N/A

📄 29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-SEP-18

TRIVEDI, JANKI, MD†

Provider ID: N/A

📄 29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-AUG-20

SURGERY GENERAL

IGWE, DANIEL, MD†

Provider ID: N/A

📄 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

IGWE, DANIEL, MD†

Provider ID: N/A

📄 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

IGWE, DANIEL, MD†

Provider ID: N/A

📄 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

SURGERY ORTHOPEDIC

CHAUDHURI, KALI, MD†

Provider ID: N/A

📄 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-21

CHAUDHURI, KALI, MD†

Provider ID: N/A

📄 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-21

CHAUDHURI, KALI, MD†

Provider ID: N/A

📄 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-21

DAVENPORT, STEPHEN, MD

Provider ID: N/A

📄 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JUL-23

GANDE, ABHIRAM, MD†

Provider ID: N/A

📄 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-22

GANDE, ABHIRAM, MD†

Provider ID: N/A

📄 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-22

GANDE, ABHIRAM, MD†

Provider ID: N/A

📄 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JUL-23

GANDE, ABHIRAM, MD†

Provider ID: N/A

📄 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-22

PANSE, MILIND, MD†

Provider ID: N/A

📄 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

PANSE, MILIND, MD†

Provider ID: N/A

📄 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

PANSE, MILIND, MD†

Provider ID: N/A

📄 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

UROLOGY

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

CRISELL, MONISHA, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586*

Effective as of 01-JUL-23

LARSON, BENJAMIN, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586

Effective as of 01-JUN-17

LARSON, BENJAMIN, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586

Effective as of 01-JUN-17

LUTTGE, SCOTT, MD

Provider ID: N/A

29826 HAUN RD STE 209
MENIFEE, CA 92586

Effective as of 01-MAY-23

ALLERGY IMMUNOLOGY

BASEN, TYLER, MD†

Provider ID: N/A

26691 PLAZA STE 170
MISSION VIEJO, CA 92691

Teleservice

Effective as of 01-DEC-20

BASEN, TYLER, MD†

Provider ID: N/A

26691 PLAZA STE 170
MISSION VIEJO, CA 92691

Teleservice

Effective as of 01-DEC-20

BASEN, TYLER, MD†

Provider ID: N/A

26691 PLAZA STE 170
MISSION VIEJO, CA 92691

Teleservice

Effective as of 01-SEP-22

BASEN, TYLER, MD†

Provider ID: N/A

26691 PLAZA STE 170
MISSION VIEJO, CA 92691

Teleservice

Effective as of 01-SEP-22

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-SEP-10

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-MAR-21

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-MAR-21

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-JUN-24

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-DEC-13

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-JUN-08

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-JAN-18

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-JUL-21

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-MAY-22

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

27800 MEDICAL CENTER

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

RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

MEHTA, VINAY, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

VENKAT, GEETA, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-17

VENKAT, GEETA, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-17

ANESTHESIOLOGY

GERAYLI, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 280
MISSION VIEJO, CA 92691
Teleservice

Effective as of 01-AUG-22

GERAYLI, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 280
MISSION VIEJO, CA 92691
Teleservice

Effective as of 01-AUG-22

ANESTHESIOLOGY PAIN MANAGEMENT

BESHAI, ALFRED, MD

Provider ID: N/A

26691 PLAZA STE 170
MISSION VIEJO, CA 92691
Effective as of 01-MAY-16

GERAYLI, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 280
MISSION VIEJO, CA 92691
Teleservice

Effective as of 01-OCT-08

GERAYLI, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 280
MISSION VIEJO, CA 92691
Teleservice

Effective as of 01-JAN-16

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

25982 PALA STE 280
MISSION VIEJO, CA 92691
Effective as of 01-OCT-16

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

25982 PALA STE 280
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

25982 PALA STE 280
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A


25982 PALA STE 280

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

MISSION VIEJO, CA 92691
Effective as of 01-OCT-16


SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

 25982 PALA STE 280
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

SHAHBAZIAN, MICHAEL, MD†


Provider ID: N/A

 25982 PALA STE 280
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

AUDIOLOGIST


NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22


NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22


PANEK, KRISTI, AuD

Provider ID: N/A

 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

PANEK, KRISTI, AuD


Provider ID: N/A

 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

CARDIAC ELECTROPHYSIOLOGY


DESAI, ASEEM, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10


HUNG, LYNNE, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12


TIONGSON, JAY, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 103
MISSION VIEJO, CA 92691
Effective as of 01-OCT-13

TIONGSON, JAY, MD†


Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 103
MISSION VIEJO, CA 92691
Effective as of 01-OCT-13

CARDIOVASCULAR DISEASE

ALOMARI, IHAB, MD

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

ALOMARI, IHAB, MD


Provider ID: N/A

 26800 CROWN VALLEY

PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23


CUA, BENNETT, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-AUG-18


CUA, BENNETT, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-AUG-18


DESAI, ASEEM, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-NOV-05


EUBANY, JACQUELINE, MD†

Provider ID: N/A

 27525 PUERTA REAL STE
300
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20


EUBANY, JACQUELINE, MD†

Provider ID: N/A

 27525 PUERTA REAL STE
300
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

HEPNER, ABSALOM, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

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

HEPNER, ABSALOM, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

KULICK, DANIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

KULICK, DANIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-OCT-99

KULICK, DANIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

KULICK, DANIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

LOUSSARARIAN, ARTHUR, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

LOUSSARARIAN, ARTHUR,

MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-OCT-99

LOUSSARARIAN, ARTHUR, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

REDIKER, DONALD, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-OCT-12

REDIKER, DONALD, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

REDIKER, DONALD, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

REDIKER, DONALD, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-OCT-99

CERTIFIED NURSE

PRACTITIONER

CARR, CHERYL, NP

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

CARR, CHERYL, NP

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

CARR, CHERYL, NP

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

CARR, CHERYL, NP

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

CARR, CHERYL, NP

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

CHAN, JUDY, NPF

Provider ID: N/A

30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-JAN-24

CHAN, JUDY, NPF

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

Provider ID: N/A

📄 30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-JAN-24

DAVID, MARY LOU, NP[†]

Provider ID: N/A

📄 23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21

MCDANIEL-DAVIS, SHAYNA, NP

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

MCDANIEL-DAVIS, SHAYNA, NP

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

PARK, SE, NP

Provider ID: N/A

📄 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

📄 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

📄 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

📄 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

PARK, SE, NP

Provider ID: N/A

📄 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

PASICOLAN, MARI, NP

Provider ID: N/A

📄 26012 MARGUERITE PKWY
STE H
MISSION VIEJO, CA 92692
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

📄 26012 MARGUERITE PKWY
STE H
MISSION VIEJO, CA 92692
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

📄 26012 MARGUERITE PKWY
STE H
MISSION VIEJO, CA 92692
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

📄 30897 GATEWAY PL STE F
MISSION VIEJO, CA 92694
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

📄 30897 GATEWAY PL STE F
MISSION VIEJO, CA 92694
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

📄 30897 GATEWAY PL STE F
MISSION VIEJO, CA 92694
Effective as of 01-DEC-22

CLINICAL

NEUROPSYCHOLOGIST

FAHIMI, GOLSHAN, MD

Provider ID: N/A

📄 23512 MADERO
MISSION VIEJO, CA 92691*
Effective as of 01-SEP-24

FAHIMI, GOLSHAN, MD

Provider ID: N/A

📄 23512 MADERO
MISSION VIEJO, CA 92691*
Effective as of 01-SEP-24

FAHIMI, GOLSHAN, MD

Provider ID: N/A

📄 23512 MADERO
MISSION VIEJO, CA 92691*
Effective as of 01-SEP-24

DERMATOLOGY

BISUNA, BLANCA, MD[†]

Provider ID: N/A

📄 26732 CROWN VALLEY
PKWY STE 170
MISSION VIEJO, CA 92691*
Effective as of 01-MAR-16

DICESARE, DANIEL, MD


Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691
Effective as of 01-NOV-19

DICESARE, DANIEL, MD


Provider ID: N/A

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

 26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691
Effective as of 01-NOV-19


LEVIN, JACQUELINE, DO†

Provider ID: N/A

 26726 CROWN VALLEY
PKWY STE 220
MISSION VIEJO, CA 92691
Effective as of 01-NOV-15


LONGBERG, AUSTIN, DO†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 435
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20


LONGBERG, AUSTIN, DO†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 435
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20


NGUYEN, TUYET, MD

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 435
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23


NGUYEN, TUYET, MD

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 435
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23


ZHAN, FRANK, MD†

Provider ID: N/A

 26691 PLAZA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18


ZHAN, FRANK, MD†

Provider ID: N/A

 26691 PLAZA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

ZHAN, FRANK, MD†


Provider ID: N/A

 26691 PLAZA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

EMERGENCY MEDICINE

ELPEDES, BERNARD, DO†

Provider ID: N/A


 23962 ALICIA PKWY STE 11
MISSION VIEJO, CA 92691
Effective as of 01-JAN-24

ENDOCRINOLOGY

METABOLISM DIABETES


BARRERA, JOSEPH, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-DEC-02


BARRERA, JOSEPH, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691*
Effective as of 01-NOV-12


BUI, AMY-VAN, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


BUI, AMY-VAN, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-FEB-15


CHAN, JESSICA, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


CHAN, JESSICA, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22


DAO, LISA, MD

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23


FRANKWICH, KAREN, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-14

FRANKWICH, KAREN, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-14

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

 25982 PALA STE 140

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

MISSION VIEJO, CA 92691
Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A
25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A
25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

HOSSEINI, ALIREZA, MD†

Provider ID: N/A
25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A
25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A
25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

HOSSEINI, ALIREZA, MD†

Provider ID: N/A
25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

HOSSEINI, ALIREZA, MD†

Provider ID: N/A
25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

MULFORD, MIM, MD†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-OCT-99

MULFORD, MIM, MD†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

MULFORD, MIM, MD†

Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

TRAN, NEIL, MD†

Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

TRAN, NEIL, MD†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-07

TRAN, NEIL, MD†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

TRUONG, MICHAEL, MD†

Provider ID: N/A
26800 CROWN VALLEY

PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

TRUONG, MICHAEL, MD†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-99

FAMILY PRACTICE SPORTS MEDICINE

CUENCA, ARNOLD, DO†

Provider ID: N/A
23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21

CUENCA, ARNOLD, DO†

Provider ID: N/A
23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21

MARANDOLA, MICHAEL, MD

Provider ID: N/A
26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-APR-12

MARANDOLA, MICHAEL, MD

Provider ID: N/A
26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUL-12

GASTROENTEROLOGY

BAE, WANJUN, MD†

Provider ID: N/A
27799 MEDICAL CENTER

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

RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

BAE, WANJUN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

BEMANIAN, SHAHROOZ, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

BEMANIAN, SHAHROOZ, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

BEMANIAN, SHAHROOZ, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

BEMANIAN, SHAHROOZ, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

BLOCK, EDWARD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

BLOCK, EDWARD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

CHANG, ELMER, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

CHANG, ELMER, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

CHOI, DAVID, DO

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

CHOI, DAVID, DO

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

CHOI, DAVID, DO

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

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

CHOI, DAVID, DO

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

CHU, ERIC, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 240
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

CHU, ERIC, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 240
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

CHU, ERIC, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

CHU, ERIC, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

KIM, DANIEL, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

KIM, DANIEL, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

LEE, PAUL, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

LEE, PAUL, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

LEE, PAUL, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24

LEE, PAUL, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24

LEE, PAUL, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

LEE, PAUL, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

NGUYEN, DOUGLAS, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

NGUYEN, DOUGLAS, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

OMAN, MATTHEW, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

OMAN, MATTHEW, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

OMAN, MATTHEW, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

OMAN, MATTHEW, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

RAHMAN, HABIB, MD

Provider ID: N/A

26691 PLAZA STE 150
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

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

RAHMAN, HABIB, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 475
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

RAHMAN, HABIB, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 475
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

RODRIGUES, DANIALD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

RODRIGUES, DANIALD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

YU, VICTOR, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

YU, VICTOR, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

YU, VICTOR, MD

Provider ID: N/A

25982 PALA STE 140

MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

YU, VICTOR, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

ZABIHI, RAMIN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-JAN-12

ZABIHI, RAMIN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

ZABIHI, RAMIN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

ZABIHI, RAMIN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

ZABIHI, RAMIN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

GYNECOLOGIC

ONCOLOGY

MENDIVIL, ALBERTO, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

GYNECOLOGY

KANALY, KIM, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

KANALY, KIM, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

WALLACE, PATRICIA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

WALLACE, PATRICIA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691
Effective as of 01-DEC-08

WALLACE, PATRICIA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

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

***HEMATOLOGY /
ONCOLOGY***

HU, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 460
MISSION VIEJO, CA 92691

Effective as of 01-SEP-20

HU, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 460
MISSION VIEJO, CA 92691

Effective as of 01-SEP-20

HUANG, DANIEL, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691

Effective as of 01-JUL-21

HUANG, DANIEL, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691

Effective as of 01-FEB-21

HUANG, DANIEL, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691

Effective as of 01-JUL-21

LAZO, NELLY, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271

MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

LAZO, NELLY, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

LAZO, NELLY, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691

Effective as of 01-NOV-18

LAZO, NELLY, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691

Effective as of 01-NOV-18

LAZO, NELLY, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691

Effective as of 01-JAN-23

LI, MING, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 460
MISSION VIEJO, CA 92691

Effective as of 01-APR-20

LI, MING, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 460
MISSION VIEJO, CA 92691

Effective as of 01-APR-20

INFECTIOUS DISEASE

REDDY, JAGADEESH, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-JUL-16

REDDY, JAGADEESH, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-JAN-18

REDDY, JAGADEESH, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-JUL-16

WAYNE, EDGAR, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 275
MISSION VIEJO, CA 92691

Effective as of 01-JUN-21

WAYNE, EDGAR, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 275
MISSION VIEJO, CA 92691

Effective as of 01-JUN-21

INTERNAL MEDICINE

AZAD, HABIB, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 220

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

MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

CASTRO RUEDA, HERNAN, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-AUG-17

CHEN, MAY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

CHEN, MAY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

GEE, JOEY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

GOLDBERG, ROBERT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

JIANG, FEN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 460
MISSION VIEJO, CA 92691

Effective as of 01-SEP-22

JIANG, FEN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 460
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

KOVACS, DAVID, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-APR-16

MIEL, RUFINA PAMELA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-APR-19

MIEL, RUFINA PAMELA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-APR-19

QURESHI, TAUSEEF, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-JUL-15

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691
Effective as of 01-MAY-17

INTERNAL MEDICINE CRITICAL CARE MEDICINE

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-MAY-17

INTERVENTIONAL CARDIOLOGY

DANON, SAAR, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-MAY-21

DANON, SAAR, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-AUG-20

DANON, SAAR, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-MAY-21

HUNG, LYNNE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

KOPLIK, SHERI, MD†

Provider ID: N/A

26800 CROWN VALLEY

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

PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-16

KOPLIK, SHERI, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-16

LOUSSARARIAN, ARTHUR, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

LOUSSARARIAN, ARTHUR, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

LOUSSARARIAN, ARTHUR, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

SUK, DAVID, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

SUK, DAVID, MD

Provider ID: N/A

26800 CROWN VALLEY

PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

MARRIAGE FAMILY THERAPIST

ORTIZ, TINA, MFT†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 325
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

ORTIZ, TINA, MFT†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 325
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

MEDICAL ONCOLOGY

BENDER, RICHARD, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

BENDER, RICHARD, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

MIEL, RUFINA PAMELA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24

NEPHROLOGY

ALLAMEHZADEH, REZA, MD†

Provider ID: N/A

25982 PALA STE 170
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD†

Provider ID: N/A

25982 PALA STE 170
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

ALLAMEHZADEH, REZA, MD†

Provider ID: N/A

25982 PALA STE 170
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD†

Provider ID: N/A

25982 PALA
MISSION VIEJO, CA 92691
Effective as of 01-AUG-16

ALLAMEHZADEH, REZA, MD†

Provider ID: N/A

25982 PALA
MISSION VIEJO, CA 92691
Effective as of 01-AUG-16

ALLAMEHZADEH, REZA, MD†

Provider ID: N/A

25982 PALA STE 170
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD†

Provider ID: N/A

25982 PALA STE 170
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

AZAD, HABIB, MD†

Provider ID: N/A

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

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

AZAD, HABIB, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

AZAD, HABIB, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

CHEN, MAY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

CHEN, MAY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

DORRIZ, PARSHAW, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 320
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

NAWAR, MAGDY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 485
MISSION VIEJO, CA 92691

Effective as of 01-NOV-14

NAWAR, MAGDY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 485
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

NAWAR, MAGDY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 485
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

RAVIKUMAR, ASHA, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

TEACHER, THEODORE, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

TEACHER, THEODORE, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

TRAN, STEVE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

TRAN, STEVE, MD†

Provider ID: N/A

26800 CROWN VALLEY

PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

TRAN, STEVE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

TRAN, STEVE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

NEUROLOGY

DORRIZ, PARSHAW, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

FAHIMI, GOLSHAN, MD

Provider ID: N/A

26991 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

FAHIMI, GOLSHAN, MD

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

GEE, JOEY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385

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

MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

GEE, JOEY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

GEE, JOEY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

KESARI, SANTOSH, MD

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 110
MISSION VIEJO, CA 92691
Effective as of 01-MAR-24

LOPEZ VIZCARRA, MARCO, MD

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

NIK, ANDREW, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

NIK, ANDREW, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

RAHIM, BASIT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-AUG-19

RAHIM, BASIT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-AUG-19

SALEHI, HAMID, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-NOV-14

SALEHI, HAMID, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-JAN-18

SALEHI, HAMID, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-AUG-11

SALEHI, HAMID, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-DEC-20

SALEHI, HAMID, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-DEC-14

SPOKOYNY, ELEONORA, MD†

Provider ID: N/A

25982 PALA STE 150
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

SPOKOYNY, ELEONORA, MD†

Provider ID: N/A

25982 PALA STE 150
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

SPOKOYNY, ELEONORA, MD†

Provider ID: N/A

25982 PALA STE 150
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

SPOKOYNY, ELEONORA, MD†

Provider ID: N/A

25982 PALA STE 150
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

SPOKOYNY, ELEONORA, MD†

Provider ID: N/A

25982 PALA STE 150
MISSION VIEJO, CA 92691
Effective as of 01-DEC-08

TEACHER, THEODORE, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

TEACHER, THEODORE, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691

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

Effective as of 01-JAN-15

VORA, RONAK, DO

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 320
MISSION VIEJO, CA 92691

Effective as of 01-MAY-24

VORA, RONAK, DO

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 320
MISSION VIEJO, CA 92691

Effective as of 01-MAY-24

NEUROLOGY CHILD

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691

Effective as of 01-JAN-20

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691

Effective as of 01-DEC-16

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691

Effective as of 01-DEC-16

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691

Effective as of 01-DEC-16

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691

Effective as of 01-DEC-16

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691

Effective as of 01-DEC-16

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691

Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691

Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691

Effective as of 01-SEP-18

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691

Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY

PKWY STE 510
MISSION VIEJO, CA 92691

Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691

Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691

Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691

Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691

Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691

Effective as of 01-MAR-19

KAYYAL, SIMON, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691

Effective as of 01-MAY-24

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

MEGERIAN, JONATHAN, MD

Provider ID: N/A

☐ 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

PEARSON, RACHEL, MD

Provider ID: N/A

☐ 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

SHREY, DANIEL, MD

Provider ID: N/A

☐ 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

THOMAS, JULIAN, MD

Provider ID: N/A

☐ 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

OBSTETRICS / GYNECOLOGY

ABRAVESH, SOODABEH, MD†

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 310
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

BAGINSKI, LEON, MD†

Provider ID: N/A

☐ 27800 MEDICAL CENTER
RD STE 310
MISSION VIEJO, CA 92691
Effective as of 01-JUL-20

BAGINSKI, LEON, MD†

Provider ID: N/A

☐ 27800 MEDICAL CENTER

RD STE 310
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

BAGINSKI, LEON, MD†

Provider ID: N/A

☐ 27800 MEDICAL CENTER
RD STE 310
MISSION VIEJO, CA 92691
Effective as of 01-JUL-20

BAILEY, THOMAS, MD†

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

BAILEY, THOMAS, MD†

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-JUL-14

BENZL, JERRY, MD†

Provider ID: N/A

☐ 26902 OSO PKWY STE 180
MISSION VIEJO, CA 92691
Effective as of 01-JUL-03

BENZL, JERRY, MD†

Provider ID: N/A

☐ 26902 OSO PKWY STE 180
MISSION VIEJO, CA 92691
Effective as of 01-JUN-11

BENZL, JERRY, MD†

Provider ID: N/A

☐ 26902 OSO PKWY STE 180
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

BENZL, JERRY, MD†

Provider ID: N/A

☐ 26902 OSO PKWY STE 180
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

CHANG, JEREMY, MD

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691
Effective as of 01-JUL-24

CHANG, JEREMY, MD

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691
Effective as of 01-JUL-24

CVAR, KATHRYN, MD†

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

CVAR, KATHRYN, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 443
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

CVAR, KATHRYN, MD†

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

EDMUNDSON, MORIAH, DO†

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21

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

EDMUNDSON, MORIAH, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21

**FARAZ ESLAMI, PARASTOO,
MD**

Provider ID: N/A

30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-FEB-24

**FARAZ ESLAMI, PARASTOO,
MD**

Provider ID: N/A

30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-JAN-24

**FARAZ ESLAMI, PARASTOO,
MD†**

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-JUL-20

**FARAZ ESLAMI, PARASTOO,
MD**

Provider ID: N/A

30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-FEB-24

**FARAZ ESLAMI, PARASTOO,
MD†**

Provider ID: N/A

30492 GATEWAY PL STE

110
MISSION VIEJO, CA 92694
Effective as of 01-JUL-20

GRANESE, MARSHA, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691
Effective as of 01-JUL-18

GRANESE, MARSHA, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691
Effective as of 01-JUL-18

KANALY, KIM, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 381
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

KANALY, KIM, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 381
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

LEAVITT, JAMIE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

LEAVITT, JAMIE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

MELKONIAN, VIKEN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

MELKONIAN, VIKEN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

MELKONIAN, VIKEN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

MILLER, KURT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

MILLER, KURT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

POLLOCK, KATHLEEN, MD†


Provider ID: N/A

26800 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

POLLOCK, KATHLEEN, MD†


Provider ID: N/A

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

 26800 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-JUN-05


RAMIREZ, SARA, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18


RAMIREZ, SARA, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18


SALCIDO, CRAIG, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-DEC-07


SALCIDO, CRAIG, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

STADLER, EDWARD, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

STADLER, EDWARD, MD†


Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691

Effective as of 01-JAN-18

TRAN, BRYAN, MD

Provider ID: N/A


 27800 MEDICAL CENTER
RD STE 144
MISSION VIEJO, CA 92691

Teleservice

Effective as of 01-SEP-22

TRAN, TIFFANY, MD


Provider ID: N/A

 27800 MEDICAL CENTER
RD STE 144
MISSION VIEJO, CA 92691

Effective as of 01-MAR-23

TRAN, TIFFANY, MD

Provider ID: N/A


 27800 MEDICAL CENTER
RD STE 144
MISSION VIEJO, CA 92691

Effective as of 01-MAR-23

OPHTHALMOLOGY

AHMED, SARAH, MD†

Provider ID: N/A

 26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-MAR-23

AHMED, SARAH, MD†


Provider ID: N/A

 26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-MAR-23

AHMED, SARAH, MD†


Provider ID: N/A

 26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-NOV-21

AHMED, SARAH, MD†


Provider ID: N/A

 26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-NOV-21

AHMED, SARAH, MD†


Provider ID: N/A

 26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-NOV-21

AHMED, SARAH, MD†


Provider ID: N/A

 26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-OCT-21

AMRA, NOOR, MD†


Provider ID: N/A

 26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-MAY-22

AMRA, NOOR, MD†


Provider ID: N/A

 26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-MAY-22

AMRA, NOOR, MD†

Provider ID: N/A

 26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-JUN-24

AMRA, NOOR, MD†

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

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-DEC-22

AMRA, NOOR, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-DEC-22

BANUELOS, LYDIA, MD†

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-DEC-22

BANUELOS, LYDIA, MD†

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

**CUNNINGHAM-AHUMADA,
ROSE, DO†**

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

**CUNNINGHAM-AHUMADA,
ROSE, DO†**

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-11

**CUNNINGHAM-AHUMADA,
ROSE, DO†**

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

**CUNNINGHAM-AHUMADA,
ROSE, DO†**

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-AUG-19

**CUNNINGHAM-AHUMADA,
ROSE, DO†**

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

**CUNNINGHAM-AHUMADA,
ROSE, DO†**

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

**CUNNINGHAM-AHUMADA,
ROSE, DO†**

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-FEB-08

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

JOSON, PETER, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

JOSON, PETER, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

JOSON, PETER, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

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

JOSON, PETER, MD

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 220
MISSION VIEJO, CA 92691
Effective as of 01-OCT-17

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-12

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD

STE 120
MISSION VIEJO, CA 92691
Effective as of 01-AUG-19

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

SALEHI-HAD, HANI, MD

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

SALEHI-HAD, HANI, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 220
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

SALEHI-HAD, HANI, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 220
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

TAI, AUDREY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

TAI, AUDREY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

TAYANI, RAMIN, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-12

TAYANI, RAMIN, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

TAYANI, RAMIN, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

TAYANI, RAMIN, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

OPTOMETRIST

ANSARI, SHORA, OD

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

HWANG, DONNA, OD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

KHAN, CEMONE, OD

Provider ID: N/A

27871 MEDICAL CENTER RD

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

STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

NG, REBECCA, OD

Provider ID: N/A
26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

NG, REBECCA, OD

Provider ID: N/A
26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

SAKO, AARON, OD

Provider ID: N/A
27724 SANTA MARGARITA
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

WONG, RANDALL, OD

Provider ID: N/A
26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

WONG, RANDALL, OD

Provider ID: N/A
26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-FEB-04

OTOLARYNGOLOGY

BHATT, JAY, MD

Provider ID: N/A
26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

BREDENKAMP, JAMES, MD†

Provider ID: N/A
26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-14

BREDENKAMP, JAMES, MD†

Provider ID: N/A
26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-SEP-99

BREDENKAMP, JAMES, MD†

Provider ID: N/A
26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-16

BREDENKAMP, JAMES, MD†

Provider ID: N/A
26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

BREDENKAMP, JAMES, MD†

Provider ID: N/A
26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

CHO, MICHAEL, MD†

Provider ID: N/A
26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

CHO, MICHAEL, MD†

Provider ID: N/A
26726 CROWN VALLEY

PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

CHO, MICHAEL, MD†

Provider ID: N/A
26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-08

CHO, MICHAEL, MD†

Provider ID: N/A
26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

CROCKETT, DENNIS, MD†

Provider ID: N/A
26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-08

CROCKETT, DENNIS, MD†

Provider ID: N/A
26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

CROCKETT, DENNIS, MD†

Provider ID: N/A
26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

CROCKETT, DENNIS, MD†

Provider ID: N/A
26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

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

CROCKETT, DENNIS, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

CROCKETT, DENNIS, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

FEINBERG, STEVEN, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-99

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-24

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

HUOH, KEVIN, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-04

LUU, QUANG, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-18

LUU, QUANG, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

LUU, QUANG, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

LUU, QUANG, MD†

Provider ID: N/A

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

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

MUNDI, JAGMEET, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

MUNDI, JAGMEET, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

MUNDI, JAGMEET, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-14

MUNDI, JAGMEET, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-14

MUNDI, JAGMEET, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-13

MUNDI, JAGMEET, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-OCT-13

PHAM, NGUYEN, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-FEB-16

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-FEB-16

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-FEB-16

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

26726 CROWN VALLEY

PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

ZHONG, QIU, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

PEDIATRIC CARDIOLOGY

CHUN, DAVID, MD†

Provider ID: N/A

26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-FEB-15

CHUN, DAVID, MD†

Provider ID: N/A

26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-MAY-15

DOSHI, NITA, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

ELLINI, AHMAD REZA, MD†

Provider ID: N/A

26691 PLAZA STE 120A
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

GANDY, JODIE, MD†

Provider ID: N/A

26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

GANDY, JODIE, MD†

Provider ID: N/A

26691 PLAZA STE 210

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

MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

GANDY, JODIE, MD†

Provider ID: N/A

26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

GANDY, JODIE, MD†

Provider ID: N/A

26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21

GANDY, JODIE, MD†

Provider ID: N/A

26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-SEP-15

GANDY, JODIE, MD†

Provider ID: N/A

26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

GANDY, JODIE, MD

Provider ID: N/A

26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

GANDY, JODIE, MD

Provider ID: N/A

26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

GANDY, JODIE, MD

Provider ID: N/A

26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

GANDY, JODIE, MD

Provider ID: N/A

26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

GANDY, JODIE, MD†

Provider ID: N/A

26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

HORENSTEIN, MARIA, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

LAI, WYMAN, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

MORCHI, GIRA, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

MUHONEN, LINDA, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

RAHIMI, MOHAMMAD, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-JAN-21

RAHIMI, MOHAMMAD, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-JAN-21

RAHIMI, MOHAMMAD, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-JAN-21

RAHIMI, MOHAMMAD, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-DEC-20

RAHIMI, MOHAMMAD, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-DEC-20

RAHIMI, MOHAMMAD, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-DEC-20

RECTO, MICHAEL, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

RENELLA, PIERANGELO, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

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

WEINER, KEITH, MD†

Provider ID: N/A

26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

WEINER, KEITH, MD

Provider ID: N/A

26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

WEINER, KEITH, MD

Provider ID: N/A

26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

WEINER, KEITH, MD

Provider ID: N/A

26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

WEINER, KEITH, MD

Provider ID: N/A

26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

WEINER, KEITH, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 264
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

WEINER, KEITH, MD†

Provider ID: N/A

26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

PEDIATRIC

ENDOCRINOLOGY

BHANGOO, AMRIT, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

PEDIATRIC

GASTROENTEROLOGY

WANG, MICHAEL, DO

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

YOUNES, BASSAM, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

**PEDIATRIC INFECTIOUS
DISEASES**

ARRIETA, ANTONIO, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 138 BLDG 2
MISSION VIEJO, CA 92691
Effective as of 01-FEB-17

ARRIETA, ANTONIO, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 138 BLDG 2
MISSION VIEJO, CA 92691
Effective as of 01-FEB-17

ARRIETA, ANTONIO, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 138 BLDG 2

MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

PEDIATRIC NEPHROLOGY

NGUYEN, JOHN, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

ZAMAN, RUMINA, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

PEDIATRIC

PULMONOLOGY

CHIN, CHANA, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

GAGE, SUSAN, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

HONG, HANNA, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

KAMATH, SUNIL, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

TIRAKITSOONTORN,

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

PORNCHAI, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

***PEDIATRIC SPORTS
MEDICINE***

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-18

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-18

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

***PEDIATRIC SURGERY
ORTHOPEDIC***

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-05

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-12

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

CAO, LISA, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

CAO, LISA, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

CAO, LISA, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

DOBYNS, JEFFREY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-15

DOBYNS, JEFFREY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-15

DOBYNS, JEFFREY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-MAR-10

MCMICHAEL, JESSICA, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

MISAGHI, AMIRHOSSEIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-20

ROSENFELD, SAMUEL, MD†

Provider ID: N/A

25982 PALA STE 230

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

MISSION VIEJO, CA 92691
Effective as of 01-JUL-05

SCHLECHTER, JOHN, DO†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-FEB-09

WEINERT, CARL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-05

PEDIATRICS

CHAMBERLIN, JOSHUA, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 110
MISSION VIEJO, CA 92691
Effective as of 01-FEB-21

PHYS MED/ REHAB PAIN MEDICINE

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

PHYSICAL MEDICINE / REHABILITATION

CUSHING, JAMES, MD

Provider ID: N/A

27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

CUSHING, JAMES, MD

Provider ID: N/A

27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

CUSHING, JAMES, MD

Provider ID: N/A

27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

FADAVI, HAMID, DO

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

FADAVI, HAMID, DO

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-NOV-21

FADAVI, HAMID, DO

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-NOV-21

FADAVI, HAMID, DO

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

FADAVI, HAMID, DO

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-DEC-21

HANJAN, TIVA, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-FEB-18

KIM, BONNIE, MD†

Provider ID: N/A

26302 LA PAZ RD STE 106
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21

KIM, BONNIE, MD†

Provider ID: N/A

26302 LA PAZ RD STE 106
MISSION VIEJO, CA 92691

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

Effective as of 01-OCT-21

KIM, BONNIE, MD†

Provider ID: N/A

📍 26302 LA PAZ RD STE 106
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21

KING, FRANK, MD

Provider ID: N/A

📍 26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-APR-23

KING, FRANK, MD

Provider ID: N/A

📍 26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-JAN-16

RANJBARAN, ZIBA, MD†

Provider ID: N/A

📍 23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

RANJBARAN, ZIBA, MD†

Provider ID: N/A

📍 23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

WASHBURN, NEAL, DO

Provider ID: N/A

📍 26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JAN-24

WASHBURN, NEAL, DO

Provider ID: N/A

📍 26401 CROWN VALLEY
PKWY STE 101

MISSION VIEJO, CA 92691
Effective as of 01-JAN-24

PHYSICIANS ASSISTANT

CARR, OLIVIA, PA

Provider ID: N/A

📍 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-24

CARR, OLIVIA, PA

Provider ID: N/A

📍 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-24

KENNEDY, KATHRYN, PA

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

KISCADEN, LAUREN, PA†

Provider ID: N/A

📍 26051 ACERO STE 100
MISSION VIEJO, CA 92691*
Effective as of 01-FEB-22

KISCADEN, LAUREN, PA†

Provider ID: N/A

📍 26051 ACERO STE 100
MISSION VIEJO, CA 92691*
Effective as of 01-FEB-22

KISCADEN, LAUREN, PA

Provider ID: N/A

📍 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

KISCADEN, LAUREN, PA

Provider ID: N/A

📍 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

KISCADEN, LAUREN, PA

Provider ID: N/A

📍 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

KISCADEN, LAUREN, PA

Provider ID: N/A

📍 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

KISCADEN, LAUREN, PA

Provider ID: N/A

📍 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

KISCADEN, LAUREN, PA

Provider ID: N/A

📍 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

LONAPPAN, HENA, PA

Provider ID: N/A

📍 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-JUL-24

LONAPPAN, HENA, PA

Provider ID: N/A

📍 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-JUL-24

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

NOJAN, JOSEPH, PA

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

NOJAN, JOSEPH, PA

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

NOJAN, JOSEPH, PA

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-24

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

TAYLOR, ERIC, PA

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUL-24

TAYLOR, ERIC, PA

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUL-24

TERRERI, NATALIE, PA

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

PODIATRIST

DAL PORTO-KUJANPAA, STEPHANIE, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

DAL PORTO-KUJANPAA, STEPHANIE, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 420
MISSION VIEJO, CA 92691
Effective as of 01-JUN-20

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 420
MISSION VIEJO, CA 92691
Effective as of 01-JUN-20

GOLSHAHI, BAHAR, DPM

Provider ID: N/A

26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

GOLSHAHI, BAHAR, DPM

Provider ID: N/A

26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

HAIDER, SANDRA, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

HAIDER, SANDRA, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

HEHE, KYLE, DPM

Provider ID: N/A

26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-AUG-23

HEHE, KYLE, DPM

Provider ID: N/A

26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-AUG-23

MCCANN, JAN, DPM

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 485
MISSION VIEJO, CA 92691
Effective as of 01-AUG-19

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

MCGRATH, BENJAMIN, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

MCGRATH, BENJAMIN, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

MCGRATH, BENJAMIN, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

MCGRATH, BENJAMIN, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

MCGRATH, BENJAMIN, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

MCGRATH, BENJAMIN, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

MCGRATH, BENJAMIN, DPM

Provider ID: N/A

26732 CROWN VALLEY

PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

NGUYEN, HAN, DPM†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

NGUYEN, HAN, DPM†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

NGUYEN, HAN, DPM†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

NOSRATI, SAM, DPM†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 420
MISSION VIEJO, CA 92691
Effective as of 01-NOV-19

NOSRATI, SAM, DPM†

Provider ID: N/A

26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

NOSRATI, SAM, DPM†

Provider ID: N/A

26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

PENERA, KEITH, DPM†

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

RAMBACHER, THOMAS, DPM†

Provider ID: N/A

26302 LA PAZ RD STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

RAMBACHER, THOMAS, DPM†

Provider ID: N/A

26302 LA PAZ RD STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

RAMBACHER, THOMAS, DPM†

Provider ID: N/A

26302 LA PAZ RD STE 101
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

SCHMALHAUS, MONTE, DPM

Provider ID: N/A

26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

SCHMALHAUS, MONTE, DPM

Provider ID: N/A

26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

PSYCHIATRY

ANOSHIVANI, ARDE, MD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

ANOSHIVANI, ARDE, MD†

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

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

BENESCH, ERIN, DO†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

BENESCH, ERIN, DO†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

DENNIS, TSHEKEDI, MD†

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

DENNIS, TSHEKEDI, MD†

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

DENNIS, TSHEKEDI, MD†

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

DENNIS, TSHEKEDI, MD†

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

PLOESSER, MARKUS, MD

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691

Effective as of 01-MAY-24

PLOESSER, MARKUS, MD

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

PLOESSER, MARKUS, MD

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

PLOESSER, MARKUS, MD

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

SCOGGIN, MERLYN, MD

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24

SCOGGIN, MERLYN, MD

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24

SCOGGIN, MERLYN, MD

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

SCOGGIN, MERLYN, MD

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

SCOGGIN, MERLYN, MD

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

SCOGGIN, MERLYN, MD

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

SCOGGIN, MERLYN, MD

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24

SCOGGIN, MERLYN, MD

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24

SHREIBA, MOHAMMED, MD†

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

SHREIBA, MOHAMMED, MD†

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

SHREIBA, MOHAMMED, MD†

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

SHREIBA, MOHAMMED, MD†

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691

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

Effective as of 01-MAY-24

SHREIBA, MOHAMMED, MD†

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691

Effective as of 01-MAY-24

SHREIBA, MOHAMMED, MD†

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691

Effective as of 01-NOV-22

SHREIBA, MOHAMMED, MD†

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691

Effective as of 01-NOV-22

SHREIBA, MOHAMMED, MD†

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691

Effective as of 01-MAY-24

SHREIBA, MOHAMMED, MD†

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691

Effective as of 01-MAY-24

SHREIBA, MOHAMMED, MD†

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691

Effective as of 01-MAY-24

PSYCHOLOGIST

FRANCIS, CATHERINE, PSYD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691

Effective as of 01-JUN-22

FRANCIS, CATHERINE, PSYD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691

Effective as of 01-AUG-21

FRANCIS, CATHERINE, PSYD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691

Effective as of 01-JUN-22

FRANCIS, CATHERINE, PSYD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691

Effective as of 01-AUG-21

FRANCIS, CATHERINE, PSYD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691

Effective as of 01-JUN-22

FRANCIS, CATHERINE, PSYD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691

Effective as of 01-JUN-22

HAMILTON, JOANNE, PhD

Provider ID: N/A

29122 RANCHO VIEJO RD
STE 102G
MISSION VIEJO, CA 92675

Effective as of 01-MAR-24

HAMILTON, JOANNE, PhD

Provider ID: N/A

29122 RANCHO VIEJO RD
STE 102G
MISSION VIEJO, CA 92675

Effective as of 01-MAR-24

HAMILTON, JOANNE, PhD

Provider ID: N/A

29122 RANCHO VIEJO RD
STE 102G
MISSION VIEJO, CA 92675

Effective as of 01-MAR-24

HAMILTON, JOANNE, PhD

Provider ID: N/A

29122 RANCHO VIEJO RD
STE 102G
MISSION VIEJO, CA 92675

Effective as of 01-MAR-24

HANDLEY, KAREN, PhD

Provider ID: N/A

26441 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-JUN-19

HANDLEY, KAREN, PhD

Provider ID: N/A

26441 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-JUN-19

HANDLEY, KAREN, PhD

Provider ID: N/A

26441 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-JUN-19

HANDLEY, KAREN, PhD

Provider ID: N/A

26441 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-JUN-19

KIENZLE, HELEN, PhD†


Provider ID: N/A

26051 ACERO STE 100


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

MISSION VIEJO, CA 92691
Effective as of 01-FEB-22


KIENZLE, HELEN, PhD†

Provider ID: N/A
 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22


KUECHLE, RALPH, PhD

Provider ID: N/A
 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22


KUECHLE, RALPH, PhD

Provider ID: N/A
 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22


KUECHLE, RALPH, PhD

Provider ID: N/A
 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22


KUECHLE, RALPH, PhD

Provider ID: N/A
 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

MARCUS, DEKE, PhD


Provider ID: N/A
 27201 PUERTA REAL STE 300
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

MARCUS, DEKE, PhD


Provider ID: N/A
 27201 PUERTA REAL STE 300
MISSION VIEJO, CA 92691

Effective as of 01-AUG-20


MELE, ANTHONY, PSYD†

Provider ID: N/A
 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21


MELE, ANTHONY, PSYD†

Provider ID: N/A
 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22


MELE, ANTHONY, PSYD†

Provider ID: N/A
 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22


MELE, ANTHONY, PSYD†

Provider ID: N/A
 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21


MELE, ANTHONY, PSYD†

Provider ID: N/A
 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22


MELE, ANTHONY, PSYD†

Provider ID: N/A
 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22


MONTEL, SEBASTIEN, PhD†

Provider ID: N/A
 27201 PUERTA REAL STE 300
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20


MONTEL, SEBASTIEN, PhD†

Provider ID: N/A
 27201 PUERTA REAL STE 300
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20


MONTEL, SEBASTIEN, PhD†

Provider ID: N/A
 27201 PUERTA REAL STE 300
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20


MONTEL, SEBASTIEN, PhD†

Provider ID: N/A
 27201 PUERTA REAL STE 300
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20


REZNICK, HARRELL, PSYD†

Provider ID: N/A
 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22


REZNICK, HARRELL, PSYD†

Provider ID: N/A
 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

ZAYAT, DINA, PSYD

Provider ID: N/A
 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

ZAYAT, DINA, PSYD

Provider ID: N/A
 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

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

ZAYAT, DINA, PSYD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

ZAYAT, DINA, PSYD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

PULMONARY DISEASES

GOLDBERG, ROBERT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

GOMEZ, GABRIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

GOMEZ, GABRIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

QURESHI, TAUSEEF, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-JUL-15

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

26800 CROWN VALLEY

PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-OCT-99

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

TAMMELIN, BRUCE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-08

TAMMELIN, BRUCE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

TAMMELIN, BRUCE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

RADIATION ONCOLOGY

CHOU, WILLIAM, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 160

MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

CHOU, WILLIAM, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

CHOU, WILLIAM, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-20

CHOU, WILLIAM, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

CHOU, WILLIAM, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

CHOU, WILLIAM, MD†


Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

FENG, CHU-PEI, MD†


Provider ID: N/A

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

 27700 MEDICAL CENTER
RD STE 2
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19


FENG, CHU-PEI, MD†

Provider ID: N/A

 27700 MEDICAL CENTER
RD STE 2
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17


FENG, CHU-PEI, MD†

Provider ID: N/A

 27700 MEDICAL CENTER
RD STE 2
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17


FENG, CHU-PEI, MD†

Provider ID: N/A

 27700 MEDICAL CENTER
RD STE 2
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17


LEE, SHARON, MD†

Provider ID: N/A

 27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19


LIU, GENE FU, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

LIU, GENE FU, MD†


Provider ID: N/A

 27799 MEDICAL CENTER
RD

STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-21


LIU, GENE FU, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21


LIU, GENE FU, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21


YOUNG, CAROLYN, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

YOUNG, CAROLYN, MD†


Provider ID: N/A

 27800 MEDICAL CENTER
RD STE 160
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

RHEUMATOLOGY


**CASTRO RUEDA, HERNAN,
MD†**

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-AUG-17


DRIVER, CATHERINE, MD

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23


DRIVER, CATHERINE, MD

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23


FARSHAMI, FATEMEH, MD

Provider ID: N/A

 26991 CROWN VALLEY
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23


KOVACS, DAVID, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-APR-16


PHILIPOSE, JAYA, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-APR-16

PHILIPOSE, JAYA, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-APR-16

SINGH, SIMRANJIT, MD†

Provider ID: N/A


 26732 CROWN VALLEY

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

PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

SINGH, SIMRANJIT, MD†


Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

SURGERY COLON SURGERY


BRADY, MATTHEW, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21


BRADY, MATTHEW, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


BRADY, MATTHEW, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


BRADY, MATTHEW, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21


BRADY, MATTHEW, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23


BRADY, MATTHEW, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23


BRADY, MATTHEW, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

BRADY, MATTHEW, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

SURGERY CRITICAL CARE

YU, PETER, MD


Provider ID: N/A

 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

SURGERY GENERAL

ABOU ABBASS, AHMAD, MD†


Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440

MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23


ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

ABOU ABBASS, AHMAD, MD†


Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JAN-22

ABOU ABBASS, AHMAD, MD†


Provider ID: N/A

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

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21


ANDERSON, MARLA, MD[†]

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21


ANDERSON, MARLA, MD[†]

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22


ANDERSON, MARLA, MD[†]

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23


ANDERSON, MARLA, MD[†]

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19


ANDERSON, MARLA, MD[†]

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22


ANDERSON, MARLA, MD[†]

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


ANDERSON, MARLA, MD[†]

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


ANDERSON, MARLA, MD[†]

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23


BACON, LOUISE, MD[†]

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


BACON, LOUISE, MD[†]

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


BACON, LOUISE, MD[†]

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18


BACON, LOUISE, MD[†]

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21


BACON, LOUISE, MD[†]

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23


BACON, LOUISE, MD[†]

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23


BACON, LOUISE, MD[†]

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21


BRADY, MATTHEW, MD[†]

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

BRADY, MATTHEW, MD[†]

Provider ID: N/A


 27799 MEDICAL CENTER
RD
STE 440

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

MISSION VIEJO, CA 92691
Effective as of 01-SEP-22


BRADY, MATTHEW, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21


KUSHNER, KENNETH, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18


KUSHNER, KENNETH, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


KUSHNER, KENNETH, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


KUSHNER, KENNETH, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

KUSHNER, KENNETH, MD†


Provider ID: N/A

 27799 MEDICAL CENTER
RD

STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


KUSHNER, KENNETH, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23


KUSHNER, KENNETH, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23


LAM, VINH, MD†

Provider ID: N/A

 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-DEC-18


ROBERTSON, ELSIE, MD

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

ROBERTSON, ELSIE, MD

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

ROBERTSON, ELSIE, MD


Provider ID: N/A

 27799 MEDICAL CENTER

RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24


ROBERTSON, ELSIE, MD

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23


ROBERTSON, ELSIE, MD

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23


SHAVER, JOHN, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23


SHAVER, JOHN, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

SHAVER, JOHN, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

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

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691

Effective as of 01-JUL-21

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691

Effective as of 01-JUN-21

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691

Effective as of 01-JUN-21

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691

Effective as of 01-JUN-21

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691

Effective as of 01-JUN-21

SHAVER, JOHN, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691

Effective as of 01-JAN-18

***SURGERY
NEUROLOGICAL***

KIM, KEUN-YOUNG, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-JUL-15

KIM, KEUN-YOUNG, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-JUL-15

KIM, KEUN-YOUNG, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-JUL-15

KIM, KEUN-YOUNG, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-JUL-15

LIAUW, JASON, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 561
MISSION VIEJO, CA 92691

Effective as of 01-APR-16

MEHTA, VIVEK, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-AUG-21

MUHONEN, MICHAEL, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691

Effective as of 01-MAR-23

NWAGWU, CHIEDOZIE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-JUN-24

NWAGWU, CHIEDOZIE, MD†

Provider ID: N/A


26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-AUG-23

NWAGWU, CHIEDOZIE, MD†


Provider ID: N/A

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

 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-AUG-23


RAO, VIKAS, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19


RAO, VIKAS, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22


RAO, VIKAS, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22


RAO, VIKAS, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-DEC-22

RAO, VIKAS, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-NOV-16

RAO, VIKAS, MD†


Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-NOV-16


TAGHVA, ALEXANDER, MD

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-AUG-15


TAGHVA, ALEXANDER, MD

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-AUG-15


TSIMPAS, ASTERIOS, MD

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23


TSIMPAS, ASTERIOS, MD

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23


TSIMPAS, ASTERIOS, MD

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21


TSIMPAS, ASTERIOS, MD

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21


TSIMPAS, ASTERIOS, MD

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21


TSIMPAS, ASTERIOS, MD

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21


TSIMPAS, ASTERIOS, MD

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21


TSIMPAS, ASTERIOS, MD

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

TSIMPAS, ASTERIOS, MD


Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

SURGERY ORTHOPEDIC

AMINIAN, AFSHIN, MD†

Provider ID: N/A

 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-NOV-07

AMINIAN, AFSHIN, MD†

Provider ID: N/A

 25982 PALA STE 230

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

MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

BURDI, MICHAEL, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-APR-12

BURDI, MICHAEL, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-NOV-14

CHEN, JAMES, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

CHEN, JAMES, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

CLAVERIA, RICHARD, MD

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-MAR-20

CLAVERIA, RICHARD, MD

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-MAR-20

DOBYNS, JEFFREY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-15

DUGGAN, DANIEL, DO†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

DUGGAN, DANIEL, DO†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

DUGGAN, DANIEL, DO†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

DUGGAN, DANIEL, DO†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

DUGGAN, DANIEL, DO†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

DUGGAN, DANIEL, DO†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

ELZIK, MARK, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-23

ELZIK, MARK, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

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

Effective as of 01-NOV-14

ELZIK, MARK, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-DEC-14

FITZPATRICK, MICHAEL, MD†

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-JUL-07

FITZPATRICK, MICHAEL, MD†

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-DEC-23

FITZPATRICK, MICHAEL, MD†

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-DEC-23

FITZPATRICK, MICHAEL, MD†

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-SEP-10

GARDNER, STEPHEN, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-DEC-14

GARDNER, STEPHEN, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-DEC-14

GUERRERO, EVAN, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-NOV-21

GUERRERO, EVAN, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-NOV-21

GVOZDYEV, BORYS, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-AUG-20

HANJAN, TIVA, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101

MISSION VIEJO, CA 92691

Effective as of 01-FEB-18

HUO, KEUN-HENG, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-AUG-20

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-MAR-23

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-SEP-19

LALONDE, FRANCOIS, MD†

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

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-08

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-12

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

MAJUMDAR, ADITI, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

MAJUMDAR, ADITI, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

MARANGI, KENT, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101

MISSION VIEJO, CA 92691
Effective as of 01-JUL-12

MARANGI, KENT, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-APR-12

MISAGHI, AMIRHOSSEIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

MISAGHI, AMIRHOSSEIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

MISAGHI, AMIRHOSSEIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

MORRIS, JOHN, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-APR-12

MORRIS, JOHN, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUL-12

PARK, SAMUEL, MD

Provider ID: N/A

26730 CROWN VALLEY

PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

PARK, SAMUEL, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

PARK, SAMUEL, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

PARK, SAMUEL, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

PODOLSKY, ANATOL, MD†

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

PODOLSKY, ANATOL, MD†

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

PODOLSKY, ANATOL, MD†

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

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

PODOLSKY, ANATOL, MD†

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

ROSENFELD, SAMUEL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-MAR-20

ROSENFELD, SAMUEL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

ROSENFELD, SAMUEL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-08

ROSENFELD, SAMUEL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-12

SCHLECHTER, JOHN, DO†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-20

TOCCI, STEPHEN, MD

Provider ID: N/A

26401 CROWN VALLEY

PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

TOCCI, STEPHEN, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

WANG, WILLIAM, MD†

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-18

WANG, WILLIAM, MD†

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-18

WEINERT, CARL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-12

WEINERT, CARL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

WEINERT, CARL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-08

SURGERY PEDIATRIC

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

GERMAN, JOHN, MD†

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAR-18

LAM, VINH, MD†

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JUL-17

LAM, VINH, MD†

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

LAM, VINH, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 138
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

LAM, VINH, MD†

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-SEP-17

LAM, VINH, MD†

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-SEP-17

SURGERY PLASTIC

LEE, MICHAEL, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 410
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

SURGERY THORACIC

FOWLER, AARON, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

SAFFARZADEH, AREO, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

SAFFARZADEH, AREO, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

SAFFARZADEH, AREO, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

SAFFARZADEH, AREO, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

TANG, TAYLOR, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-NOV-16

TANG, TAYLOR, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-NOV-16

TANG, TAYLOR, MD†

Provider ID: N/A


26732 CROWN VALLEY
PKWY STE 226

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

MISSION VIEJO, CA 92691
Effective as of 01-NOV-16


TANG, TAYLOR, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-NOV-16


TANG, TAYLOR, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 461
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19


TANG, TAYLOR, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 461
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19


THIBAUT, WILLIAM, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-21


THIBAUT, WILLIAM, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-19


THIBAUT, WILLIAM, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-19


THIBAUT, WILLIAM, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-19


THIBAUT, WILLIAM, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-19


THIBAUT, WILLIAM, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-21


WON, EUGENE, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


WON, EUGENE, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

WON, EUGENE, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

WON, EUGENE, MD†


Provider ID: N/A

 26732 CROWN VALLEY

PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23


WON, EUGENE, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23


WON, EUGENE, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23


WON, EUGENE, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22


WON, EUGENE, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

WON, EUGENE, MD†


Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

UROLOGY

BUI, DON, MD†

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691

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

Effective as of 01-JUN-24

BUI, DON, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

BUI, DON, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-MAR-23

BUI, DON, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

BUI, DON, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

CHAMBERLIN, DAVID, MD

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 140
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

CHAMBERLIN, DAVID, MD

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 140
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-JAN-23

GRUENENFELDER, JENNIFER, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JAN-21

HO, TAMMY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JAN-21

HO, TAMMY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-FEB-22

HO, TAMMY, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

HO, TAMMY, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

HO, TAMMY, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

HO, TAMMY, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

HO, TAMMY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-DEC-19

HO, TAMMY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-DEC-19

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

KIM, MOSES, MD†

Provider ID: N/A

☒ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

KIM, MOSES, MD

Provider ID: N/A

☒ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

KIM, MOSES, MD

Provider ID: N/A

☒ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

KIM, MOSES, MD

Provider ID: N/A

☒ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

KIM, MOSES, MD

Provider ID: N/A

☒ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

KIM, MOSES, MD†

Provider ID: N/A

☒ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

KIM, MOSES, MD

Provider ID: N/A

☒ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

☒ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

☒ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

☒ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MEAGLIA, JAMES, MD†

Provider ID: N/A

☒ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

MEAGLIA, JAMES, MD†

Provider ID: N/A

☒ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MEAGLIA, JAMES, MD†

Provider ID: N/A

☒ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

MEAGLIA, JAMES, MD†

Provider ID: N/A

☒ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

MEAGLIA, JAMES, MD†

Provider ID: N/A

☒ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

MEAGLIA, JAMES, MD†

Provider ID: N/A

☒ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

MEAGLIA, JAMES, MD†

Provider ID: N/A

☒ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

MEAGLIA, JAMES, MD†

Provider ID: N/A

☒ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

☒ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

NAKAMURA, LEAH, MD

Provider ID: N/A

☒ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

NAKAMURA, LEAH, MD


Provider ID: N/A

☒ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

NAKAMURA, LEAH, MD


Provider ID: N/A

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

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


NAKAMURA, LEAH, MD

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


NAKAMURA, LEAH, MD

Provider ID: N/A

 26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23


NAKAMURA, LEAH, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18


NAKAMURA, LEAH, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23


NAKAMURA, LEAH, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21


NAKAMURA, LEAH, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24


NAKAMURA, LEAH, MD

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24


NAKAMURA, LEAH, MD

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23


PASIN, ERIK, MD

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 445
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14


RANDALL, JOSH, MD

Provider ID: N/A

 26991 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23


RANDALL, JOSH, MD†

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24


RANDALL, JOSH, MD†

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

RANDALL, JOSH, MD†

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


RANDALL, JOSH, MD†

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23


RANDALL, JOSH, MD†

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22


RANDALL, JOSH, MD†

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22


SHOURESHI, POONE, MD

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-24


SINGH, KARAN, MD†

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23


SINGH, KARAN, MD†

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23


SINGH, KARAN, MD†

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

SINGH, KARAN, MD†

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691

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

Effective as of 01-JUN-24

SINGH, KARAN, MD†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-SEP-18

SINGH, KARAN, MD†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-SEP-18

SINGH, KARAN, MD†

Provider ID: N/A

☞ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-JUN-22

SINGH, KARAN, MD†

Provider ID: N/A

☞ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-JUN-22

SINGH, KARAN, MD†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JAN-21

SINGH, KARAN, MD†

Provider ID: N/A

☞ 26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

SINGH, KARAN, MD†

Provider ID: N/A

☞ 26991 CROWN VALLEY

PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-JAN-23

SINGH, KARAN, MD†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JUN-18

SINGH, KARAN, MD†

Provider ID: N/A

☞ 26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-APR-21

SINGH, KARAN, MD†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-APR-21

SPITZ, AARON, MD†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-APR-21

SPITZ, AARON, MD†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-DEC-19

SPITZ, AARON, MD†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JUN-18

SPITZ, AARON, MD†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-DEC-19

SPITZ, AARON, MD†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-OCT-18

SPITZ, AARON, MD

Provider ID: N/A

☞ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-JAN-23

SPITZ, AARON, MD

Provider ID: N/A

☞ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

SPITZ, AARON, MD†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JUN-18

SPITZ, AARON, MD†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JUN-24

STEPHANY, HEIDI, MD

Provider ID: N/A

☞ 26691 PLAZA STE 130
MISSION VIEJO, CA 92691

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

Effective as of 01-JAN-24

SU, DANIEL, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-JUN-24

SU, DANIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-DEC-19

SU, DANIEL, MD

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

SU, DANIEL, MD

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691

Effective as of 01-JAN-23

SU, DANIEL, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

SU, DANIEL, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

SU, DANIEL, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

SU, DANIEL, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

SU, DANIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-DEC-19

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-DEC-19

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JAN-23

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-JAN-23

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-DEC-19

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-MAY-21

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-MAY-21

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JUN-18

TEBYANI, NEYSSAN, MD

Provider ID: N/A

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

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

ALLERGY IMMUNOLOGY

IMAM, ASIF, MD

Provider ID: N/A

40680 CALIFORNIA OAKS
RD STE 1A
MURRIETA, CA 92562
Effective as of 01-MAR-23

IMAM, ASIF, MD

Provider ID: N/A

40680 CALIFORNIA OAKS
RD STE 1A
MURRIETA, CA 92562
Effective as of 01-MAR-23

IMAM, ASIF, MD

Provider ID: N/A

40680 CALIFORNIA OAKS
RD STE 1A
MURRIETA, CA 92562
Effective as of 01-MAR-23

ANESTHESIOLOGY

BAKER, BRUCE, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-AUG-22

DRUET, JACK, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 102
MURRIETA, CA 92562
Effective as of 01-JUL-23

KRAUSE, MARTIN, MD†

Provider ID: N/A

25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
Effective as of 01-FEB-22

ANESTHESIOLOGY PAIN MANAGEMENT

AUSTIN, MARK, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 102
MURRIETA, CA 92562
Effective as of 01-JUL-23

BETTS, ANDRES, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

BETTS, ANDRES, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

KELLING, JONATHAN, MD†

Provider ID: N/A

38860 SKY CANYON DR
BLDG A
MURRIETA, CA 92563
Effective as of 01-DEC-18

KELLING, JONATHAN, MD†

Provider ID: N/A

38860 SKY CANYON DR
BLDG A
MURRIETA, CA 92563
Effective as of 01-JUL-23

KHATIBI, NIKAN, DO†

Provider ID: N/A

24910 LAS BRISAS RD STE
121

MURRIETA, CA 92562
Effective as of 01-SEP-22

CARDIAC

ELECTROPHYSIOLOGY

OSHODI, GANIYU, MD†

Provider ID: N/A

40700 CALIFORNIA OAKS
RD STE 208
MURRIETA, CA 92562*
Effective as of 01-JUL-23

OSHODI, GANIYU, MD†

Provider ID: N/A

40700 CALIFORNIA OAKS
RD STE 208
MURRIETA, CA 92562
Effective as of 01-FEB-19

CARDIOVASCULAR DISEASE

ALTURJUMAN, AHMAD, MD†

Provider ID: N/A

40700 CALIFORNIA OAKS
RD STE 208
MURRIETA, CA 92562
Effective as of 01-NOV-22

ALTURJUMAN, AHMAD, MD†

Provider ID: N/A

29995 TECHNOLOGY DR
STE 302
MURRIETA, CA 92563
Effective as of 01-MAR-22

ALTURJUMAN, AHMAD, MD†

Provider ID: N/A

29995 TECHNOLOGY DR
STE 302
MURRIETA, CA 92563
Effective as of 01-MAR-22

ALTURJUMAN, AHMAD, MD†

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

Provider ID: N/A

☐ 29995 TECHNOLOGY DR
STE 302

MURRIETA, CA 92563

Effective as of 01-JUL-22

AMIN, JATIN, MD†

Provider ID: N/A

☐ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-JUL-24

AMIN, JATIN, MD†

Provider ID: N/A

☐ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-AUG-20

ATTIA, NADER, DO†

Provider ID: N/A

☐ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-AUG-24

ATTIA, NADER, DO†

Provider ID: N/A

☐ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-MAY-21

ATTIA, NADER, DO†

Provider ID: N/A

☐ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-JUL-22

ATTIA, NADER, DO†

Provider ID: N/A

☐ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-MAR-20

ATTIA, NADER, DO†

Provider ID: N/A

☐ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-SEP-18

BISWAS, MIMI, MD†

Provider ID: N/A

☐ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-FEB-17

BISWAS, MIMI, MD†

Provider ID: N/A

☐ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-FEB-17

BISWAS, MIMI, MD†

Provider ID: N/A

☐ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-FEB-17

BISWAS, MIMI, MD†

Provider ID: N/A

☐ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-FEB-17

BISWAS, MIMI, MD†

Provider ID: N/A

☐ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-FEB-17

COLLINS, BRIAN, MD†

Provider ID: N/A

☐ 40700 CALIFORNIA OAKS
RD STE 208
MURRIETA, CA 92562

Effective as of 01-NOV-22

MESSENGER, BRADLEY, MD†

Provider ID: N/A

☐ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-AUG-20

MUKHERJEE, ASHIS, MD†

Provider ID: N/A

☐ 28078 BAXTER RD STE 110
MURRIETA, CA 92563*

Effective as of 01-JUL-23

OSHODI, GANIYU, MD†

Provider ID: N/A

☐ 40700 CALIFORNIA OAKS
RD STE 208
MURRIETA, CA 92562

Effective as of 01-JAN-21

OSHODI, GANIYU, MD

Provider ID: N/A

☐ 40770 CALIFORNIA OAKS

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

RD STE A
MURRIETA, CA 92562
Effective as of 01-MAR-23

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Effective as of 01-FEB-22

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Effective as of 01-SEP-18

SCHWARZ, ERNST, MD†

Provider ID: N/A
39755 DATE ST STE 205
MURRIETA, CA 92563
Effective as of 01-AUG-22

SCHWARZ, ERNST, MD†

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-FEB-21

SCHWARZ, ERNST, MD†

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-SEP-21

SCHWARZ, ERNST, MD†

Provider ID: N/A
39755 DATE ST STE 205
MURRIETA, CA 92563
Effective as of 01-AUG-22

CERTIFIED NURSE

PRACTITIONER

ANDERSON, TRACEY, NP†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-FEB-20

ANDERSON, TRACEY, NP†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-FEB-20

ANDERSON, TRACEY, NP†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-FEB-20

ANDERSON, TRACEY, NP†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-FEB-20

ANDERSON, TRACEY, NP†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-DEC-20

BARBOZA, GEORGE, NP

Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD
MURRIETA, CA 92563
Effective as of 01-SEP-22

BARBOZA, GEORGE, NP

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD
MURRIETA, CA 92563
Effective as of 01-SEP-22

BASA, GRACIOUS, NPF

Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JUN-24

BEDFORD, RONALD, NP†

Provider ID: N/A
25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-MAY-22

BEDFORD, RONALD, NP†

Provider ID: N/A
25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-MAY-22

BEDFORD, RONALD, NP†

Provider ID: N/A
25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-MAY-22

BEDFORD, RONALD, NP†

Provider ID: N/A
25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-SEP-22

BEDFORD, RONALD, NP†

Provider ID: N/A
25405 HANCOCK AVE STE
200
MURRIETA, CA 92562

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

Effective as of 01-SEP-22

CAMPBELL, AMBER, NP

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 102
MURRIETA, CA 92562

Effective as of 01-JAN-22

CORCORAN, KIMBERLY, NP

Provider ID: N/A

24910 LAS BRISAS RD STE
105
MURRIETA, CA 92562

Effective as of 01-OCT-19

DAO, NU, NP†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-MAR-21

DONLON, RYAN, NPF

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562

Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562

Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562

Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562

Effective as of 01-MAR-24

FAIQ, JAMILA, NP†

Provider ID: N/A

25405 HANCOCK AVE STE
206
MURRIETA, CA 92562

Teleservice

Effective as of 01-NOV-22

GUTIERREZ, CRYSTAL, NP†

Provider ID: N/A

25109 JEFFERSON AVE STE
100
MURRIETA, CA 92562

Effective as of 01-AUG-20

HARTMAN, JULIE, NPF

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 102
MURRIETA, CA 92562

Effective as of 01-SEP-23

HASAN, BUSHRA, NP

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 102
MURRIETA, CA 92562

Effective as of 01-OCT-22

HUERTA, CARMEN, NP†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562

Effective as of 01-OCT-22

HUERTA, CARMEN, NP†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562

Effective as of 01-DEC-22

KLEWEIN, CRYSTAL, NPF

Provider ID: N/A

40770 CALIFORNIA OAKS
RD STE A
MURRIETA, CA 92562

Effective as of 01-MAY-23

KULJIAN, NANCY, NP

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD STE E
MURRIETA, CA 92563

Effective as of 01-AUG-21

MOONEY, PATRICIA, NP†

Provider ID: N/A

25405 HANCOCK AVE STE
206
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAY-21

MWAURA, WAIRIMU, NP†

Provider ID: N/A

25405 HANCOCK AVE STE
206
MURRIETA, CA 92562

Teleservice

Effective as of 01-JUN-21

PIZZIFRED, TIFFINY, NP†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562

Effective as of 01-JAN-18

PIZZIFRED, TIFFINY, NP†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562

Effective as of 01-JAN-18

SHEIKH, SARAH, NP

Provider ID: N/A

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

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-MAY-23

SHEIKH, SARAH, NP

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-MAY-23

SHEIKH, SARAH, NP

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-OCT-16

SICKELS, JENNIFER, NP

Provider ID: N/A

24910 LAS BRISAS RD STE
105
MURRIETA, CA 92562
Effective as of 01-NOV-19

VIERA, LIANA, NP†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD
MURRIETA, CA 92563
Effective as of 01-JAN-22

VIERA, LIANA, NP†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD
MURRIETA, CA 92563
Effective as of 01-JAN-22

WILLEY, MARTI, NP†

Provider ID: N/A

25405 HANCOCK AVE STE
206
MURRIETA, CA 92562
Teleservice
Effective as of 01-JUN-21

DERMATOLOGY

AWADALLA, FARAH, MD†

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-JUL-24

FOWLER, VINCENT, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-FEB-24

FOWLER, VINCENT, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-FEB-24

KHERADMANT, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-DEC-21

KHERADMANT, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-DEC-21

KHERADMANT, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-DEC-21

KHERADMANT, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-MAY-23

KHERADMANT, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-MAY-22

KHERADMANT, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-MAY-22

KOUPAIE, JAFAR, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

KOUPAIE, JAFAR, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

KOUPAIE, JAFAR, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

KOUPAIE, JAFAR, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

MEHDI, RAZA, MD

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

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD
STE C3
MURRIETA, CA 92562
Effective as of 01-JUL-24

MITCHELL, JESSE, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

MITCHELL, JESSE, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

MITCHELL, JESSE, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

MITCHELL, JESSE, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

ROSHDIEH, BABAK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-MAY-23

ROSHDIEH, BABAK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-JUL-23

SAIED, NAGI, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-21

SAIED, NAGI, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-18

SAIED, NAGI, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Teleservice
Effective as of 01-MAY-23

SAIED, NAGI, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Teleservice
Effective as of 01-DEC-19

SHAPIRO, STEVEN, MD

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-MAR-24

SHAPIRO, STEVEN, MD

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562

Effective as of 01-MAR-24

SHAPIRO, STEVEN, MD

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-JUL-24

**SIRICHOTIRATANA, MELISSA,
MD†**

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562
Effective as of 01-JUL-22

TAHERI, DANIEL, MD†

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Teleservice
Effective as of 01-APR-21

TAHERI, DANIEL, MD†

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Teleservice
Effective as of 01-APR-21

TAHERI, DANIEL, MD†

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Teleservice
Effective as of 01-DEC-21

TANG, NIKKI, MD

Provider ID: N/A

40663 MURRIETA HOT

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

SPRINGS RD
STE C3
MURRIETA, CA 92562
Effective as of 01-JUL-24

THIELE, JENS, MD†

Provider ID: N/A
25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562
Effective as of 01-JUL-22

VENKAT, ARUN, MD†

Provider ID: N/A
25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562
Effective as of 01-FEB-21

WILLETT, MATTHEW, MD

Provider ID: N/A
25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-AUG-24

WILLETT, MATTHEW, MD

Provider ID: N/A
25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-AUG-24

WILLETT, MATTHEW, MD

Provider ID: N/A
25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-AUG-24

WILLETT, MATTHEW, MD

Provider ID: N/A
25405 HANCOCK AVE STE
200
MURRIETA, CA 92562

Effective as of 01-JUL-24

WINKELMANN, RICHARD, DO

Provider ID: N/A
40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-JUL-24

ENDOCRINOLOGY METABOLISM DIABETES

BUI, AMY-VAN, MD†

Provider ID: N/A
39765 DATE ST STE 102
MURRIETA, CA 92563
Effective as of 01-NOV-13

FAMILY PRACTICE

FARZIN, ABDUL, MD

Provider ID: N/A
40690 CALIFORNIA OAKS
RD STE A
MURRIETA, CA 92562
Effective as of 01-MAR-24

MEMON, TALHA, MD†

Provider ID: N/A
39755 DATE ST STE 101
MURRIETA, CA 92563
Effective as of 01-OCT-18

MEMON, TALHA, MD†

Provider ID: N/A
39755 DATE ST STE 101
MURRIETA, CA 92563
Effective as of 01-OCT-18

GASTROENTEROLOGY

ANYADIKE, CYRIL, MD†

Provider ID: N/A
25495 MEDICAL CENTER
DR STE 302

MURRIETA, CA 92562
Effective as of 01-SEP-15

ANYADIKE, CYRIL, MD†

Provider ID: N/A
25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562
Effective as of 01-FEB-18

ANYADIKE, CYRIL, MD†

Provider ID: N/A
25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562
Effective as of 01-APR-17

ANYADIKE, CYRIL, MD†

Provider ID: N/A
25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562
Effective as of 01-APR-20

ANYADIKE, CYRIL, MD†

Provider ID: N/A
25495 MEDICAL CENTER
DR STE 101
MURRIETA, CA 92562
Effective as of 01-AUG-20

ANYADIKE, CYRIL, MD†

Provider ID: N/A
25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562
Effective as of 01-JUL-23

ANYADIKE, CYRIL, MD†

Provider ID: N/A
25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562
Effective as of 01-MAR-21

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

ARDIGO, GREGORY, MD†

Provider ID: N/A

☐ 40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-DEC-08

ARDIGO, GREGORY, MD†

Provider ID: N/A

☐ 40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-JUL-23

DINH, JACK, MD†

Provider ID: N/A

☐ 40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-OCT-07

DINH, JACK, MD†

Provider ID: N/A

☐ 40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-DEC-08

FAN, ROBERT, MD†

Provider ID: N/A

☐ 25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAR-21

FAN, ROBERT, MD†

Provider ID: N/A

☐ 25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-JUL-23

FAN, ROBERT, MD†

Provider ID: N/A

☐ 25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-AUG-15

FAN, ROBERT, MD†

Provider ID: N/A

☐ 25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-JUL-15

FAN, ROBERT, MD†

Provider ID: N/A

☐ 25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-APR-20

FAN, ROBERT, MD†

Provider ID: N/A

☐ 25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-APR-17

**FLANNERY, CHRISTOPHER,
MD**

Provider ID: N/A

☐ 40663 MURRIETA HOT
SPRINGS RD STE C1
MURRIETA, CA 92562

Effective as of 01-APR-23

**FLANNERY, CHRISTOPHER,
MD**

Provider ID: N/A

☐ 40663 MURRIETA HOT
SPRINGS RD STE C1

MURRIETA, CA 92562

Effective as of 01-APR-23

**FLANNERY, CHRISTOPHER,
MD**

Provider ID: N/A

☐ 28078 BAXTER RD STE 530
MURRIETA, CA 92563

Effective as of 01-APR-23

**FLANNERY, CHRISTOPHER,
MD**

Provider ID: N/A

☐ 28078 BAXTER RD STE 530
MURRIETA, CA 92563

Effective as of 01-APR-23

NAKKA, SREENIVASA, MD†

Provider ID: N/A

☐ 25495 MEDICAL CENTER
DR STE 306
MURRIETA, CA 92562

Effective as of 01-OCT-16

NAKKA, SREENIVASA, MD†

Provider ID: N/A

☐ 25495 MEDICAL CENTER
DR STE 306
MURRIETA, CA 92562

Effective as of 01-OCT-16

NAKKA, SREENIVASA, MD†

Provider ID: N/A

☐ 25495 MEDICAL CENTER
DR STE 306
MURRIETA, CA 92562

Effective as of 01-OCT-16

OJURI, ADEBAMBO, MD†

Provider ID: N/A

☐ 25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-APR-17

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

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-JUL-23

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-JUL-24

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAR-21

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAY-21

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAY-15

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER

DR STE 302

MURRIETA, CA 92562

Teleservice

Effective as of 01-MAY-15

RAGHUWANSHI, NAISHADH, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 306
MURRIETA, CA 92562

Effective as of 01-MAY-18

RAGHUWANSHI, NAISHADH, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 306
MURRIETA, CA 92562

Effective as of 01-OCT-16

RAGHUWANSHI, NAISHADH, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 306
MURRIETA, CA 92562

Effective as of 01-OCT-16

TEYMOORIAN, ARIAN, MD†

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-FEB-20

TEYMOORIAN, ARIAN, MD†

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-SEP-19

GENETICS CLINICAL

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE
210
MURRIETA, CA 92562

Effective as of 01-JUL-19

HEMATOLOGY / ONCOLOGY

AGAJANIAN, RICHY, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562

Effective as of 01-JUL-23

ANDREY, JEFFREY, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562

Effective as of 01-JUL-23

ANDREY, JEFFREY, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562

Effective as of 01-JUL-24

BASERI, BABAK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
203
MURRIETA, CA 92562

Effective as of 01-JUL-24

BASERI, BABAK, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562

Effective as of 01-JAN-24

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

BASERI, BABAK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
203
MURRIETA, CA 92562
Effective as of 01-JUL-21

BASERI, BABAK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
203
MURRIETA, CA 92562
Effective as of 01-JUL-21

BASERI, BABAK, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-FEB-24

BASERI, BABAK, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-APR-23

BASERI, BABAK, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-APR-24

BASERI, BABAK, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-AUG-24

BELLO, OSAGIE, MD

Provider ID: N/A

25405 HANCOCK AVE STE

211

MURRIETA, CA 92562

Effective as of 01-OCT-23

BELLO, OSAGIE, MD

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-OCT-23

BELLO, OSAGIE, MD

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-OCT-23

BESSUDO, ALBERTO, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
206
MURRIETA, CA 92562

Teleservice

Effective as of 01-NOV-21

LEE, BYUNG, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-JUL-21

LEE, BYUNG, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-JUL-21

LEE, BYUNG, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562

Effective as of 01-JUL-21

MARJON, PHILIP, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-APR-23

MASIELLO, DAVID, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-MAR-21

MOST, CAROLE, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-MAR-21

MOST, CAROLE, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-SEP-18

MOST, CAROLE, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-SEP-18

MOST, CAROLE, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-SEP-18

NAIK, RAHUL, MD†

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

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-MAR-21

SARWARI, NAWID, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562*
Effective as of 01-APR-23

SAUNDERS, PHILLIP, DO

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-APR-23

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
203
MURRIETA, CA 92562
Effective as of 01-DEC-20

SCHWERKOSKE, JOHN, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-JUL-24

SCHWERKOSKE, JOHN, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-JUL-23

SHUM, MERRILL, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
203

MURRIETA, CA 92562

Effective as of 01-JUL-23

TSANG, WALTER, MD†

Provider ID: N/A

25404 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-FEB-20

TSANG, WALTER, MD†

Provider ID: N/A

25404 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-FEB-20

TSANG, WALTER, MD†

Provider ID: N/A

25404 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-FEB-20

WANG, AMY, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-JUN-21

WANG, AMY, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-JUN-21

WANG, AMY, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-JUN-21

WANG, AMY, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-JUN-21

INFECTIOUS DISEASE

HARFOUCH, CHAWKI, MD†

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-JUL-23

HARFOUCH, CHAWKI, MD†

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAY-13

KIM, EMILY, MD

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAR-24

KIM, EMILY, MD

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAR-24

KIM, EMILY, MD

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAR-24

LE, THUAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAY-09

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

LE, THUAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563

Effective as of 01-SEP-09

LE, THUAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563

Effective as of 01-SEP-09

LE, THUAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563

Effective as of 01-MAY-13

LE, THUAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563

Effective as of 01-JAN-11

INTERNAL MEDICINE

BASERI, BABAK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
203

MURRIETA, CA 92562

Effective as of 01-APR-24

HADDADIN, HASSAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563

Effective as of 01-SEP-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563

Effective as of 01-SEP-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563

Effective as of 01-SEP-22

HARFOUCH, CHAWKI, MD†

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563

Effective as of 01-JUN-17

MONTANA, WILBUR, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
203

MURRIETA, CA 92562

Effective as of 01-NOV-18

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

PATEL, SAGAR, MD†

Provider ID: N/A

25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

Effective as of 01-AUG-21

INTERVENTIONAL

CARDIOLOGY

AL KHIAMI, BELAL, MD†

Provider ID: N/A

28062 BAXTER RD
MURRIETA, CA 92563

Effective as of 01-JAN-21

AMIN, JATIN, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-JAN-19

ATTIA, NADER, DO†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-JAN-19

ATTIA, NADER, DO†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-APR-17

GAGLANI, RAHUL, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
230

MURRIETA, CA 92562

Effective as of 01-AUG-21

MESSENGER, BRADLEY, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-FEB-22

MESSENGER, BRADLEY, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-JAN-19

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A


39755 MURRIETA HOT

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

SPRINGS RD BLDG G
MURRIETA, CA 92563
Effective as of 01-JAN-19

SCHWARZ, ERNST, MD[†]

Provider ID: N/A

 39755 DATE ST STE 205
MURRIETA, CA 92563
Effective as of 01-SEP-22

SCHWARZ, ERNST, MD[†]


Provider ID: N/A

 39755 DATE ST STE 205
MURRIETA, CA 92563
Effective as of 01-SEP-22

MATERNAL AND FETAL MEDICINE

BRAR, HARBINDER, MD[†]


Provider ID: N/A

 25109 JEFFERSON AVE STE
210
MURRIETA, CA 92562
Effective as of 01-DEC-10

MEDICAL ONCOLOGY


PARSI, HOOMAN, MD

Provider ID: N/A

 25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-MAY-23

SHAIKH, ANWER, MD


Provider ID: N/A

 25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-JUL-23

NEPHROLOGY

UDDIN, MOHAMMAD, MD[†]


Provider ID: N/A

 24910 LAS BRISAS RD STE
108
MURRIETA, CA 92562
Effective as of 01-JUL-20

NEUROLOGY


ALVAREZ, PAMELA, MD[†]

Provider ID: N/A

 24910 LAS BRISAS RD STE
115
MURRIETA, CA 92562
Effective as of 01-MAY-14


ALVAREZ, PAMELA, MD[†]

Provider ID: N/A

 24910 LAS BRISAS RD STE
115
MURRIETA, CA 92562
Effective as of 01-MAR-15


NUNE, SUNITHA, MD[†]

Provider ID: N/A

 39755 DATE ST STE 101
MURRIETA, CA 92563
Effective as of 01-FEB-22


TALANKI, VARUN, MD

Provider ID: N/A

 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-DEC-22

UDDIN, MOHAMMAD, MD[†]

Provider ID: N/A

 24910 LAS BRISAS RD STE
108
MURRIETA, CA 92562
Effective as of 01-AUG-20

UDDIN, MOHAMMAD, MD[†]


Provider ID: N/A

 24910 LAS BRISAS RD STE

108
MURRIETA, CA 92562
Effective as of 01-JUL-20


UDDIN, MOHAMMAD, MD[†]

Provider ID: N/A

 24910 LAS BRISAS RD STE
108
MURRIETA, CA 92562
Effective as of 01-JUL-20


UDDIN, MOHAMMAD, MD[†]

Provider ID: N/A

 24910 LAS BRISAS RD STE
108
MURRIETA, CA 92562
Effective as of 01-JUL-20


UDDIN, MOHAMMAD, MD[†]

Provider ID: N/A

 24910 LAS BRISAS RD STE
108
MURRIETA, CA 92562
Effective as of 01-JUL-20


UDDIN, MOHAMMAD, MD[†]

Provider ID: N/A

 24910 LAS BRISAS RD STE
108
MURRIETA, CA 92562
Effective as of 01-JUL-20


UDDIN, MOHAMMAD, MD[†]

Provider ID: N/A

 24910 LAS BRISAS RD STE
108
MURRIETA, CA 92562
Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD[†]

Provider ID: N/A

 24910 LAS BRISAS RD STE
108
MURRIETA, CA 92562
Effective as of 01-JUL-20

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

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE 108

MURRIETA, CA 92562

Effective as of 01-JUL-20

NEUROLOGY CHILD

NUNE, SUNITHA, MD†

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563

Effective as of 01-APR-21

**OBSTETRICS /
GYNECOLOGY**

ANDERSEN, MICHAEL, MD†

Provider ID: N/A

24619 WASHINGTON AVE
STE 104

MURRIETA, CA 92562

Effective as of 01-JAN-21

BINDER, PRATIBHA, MD†

Provider ID: N/A

25405 HANCOCK AVE STE 217

MURRIETA, CA 92562

Effective as of 01-JUL-21

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE 210

MURRIETA, CA 92562

Effective as of 01-JUL-11

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE 210

MURRIETA, CA 92562

Effective as of 01-NOV-08

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE 210

MURRIETA, CA 92562

Effective as of 01-SEP-23

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE 210

MURRIETA, CA 92562

Effective as of 01-SEP-23

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE 210

MURRIETA, CA 92562

Effective as of 01-SEP-23

CHIODI, MARTINA, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE 113

MURRIETA, CA 92562

Effective as of 01-MAR-20

DIMMETTE, PATTIE, MD

Provider ID: N/A

25405 HANCOCK AVE STE 203

MURRIETA, CA 92562

Effective as of 01-SEP-23

ELFELT, TIMOTHY, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100

MURRIETA, CA 92562

Effective as of 01-AUG-10

HAYTON, TAMMY, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100

MURRIETA, CA 92562

Teleservice

Effective as of 01-AUG-10

HAYTON, TAMMY, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100

MURRIETA, CA 92562

Teleservice

Effective as of 01-SEP-22

JONES, KENDRA, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100

MURRIETA, CA 92562

Teleservice

Effective as of 01-SEP-22

JONES, KENDRA, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100

MURRIETA, CA 92562

Teleservice

Effective as of 01-SEP-22

LEBO, DEBRA, DO†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100

MURRIETA, CA 92562

Effective as of 01-AUG-10

LEBO, DEBRA, DO†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100

MURRIETA, CA 92562

Effective as of 01-SEP-22

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

LOCASCIO, ELIZABETH, DO†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562

Teleservice

Effective as of 01-FEB-18

LOCASCIO, ELIZABETH, DO†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562

Teleservice

Effective as of 01-SEP-22

NEAL, JAMES, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 300
MURRIETA, CA 92562

Effective as of 01-JUL-23

QUINATA, FLORENCE, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 300
MURRIETA, CA 92562

Effective as of 01-JUL-23

SHAH, NEMI, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Teleservice

Effective as of 01-FEB-24

SHEHATA, HANNAH, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-OCT-21

THOMSON, EMILY, DO

Provider ID: N/A

25460 MEDICAL CENTER
DR
MURRIETA, CA 92562

Teleservice

Effective as of 01-SEP-22

THOMSON, EMILY, DO

Provider ID: N/A

25460 MEDICAL CENTER
DR
MURRIETA, CA 92562

Teleservice

Effective as of 01-SEP-22

TODD, CHRISTINE, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 300
MURRIETA, CA 92562

Effective as of 01-JUL-23

TRAN, THERESA, DO

Provider ID: N/A

24910 LAS BRISAS RD STE
113
MURRIETA, CA 92562

Effective as of 01-MAR-20

YANG, CHARLES, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562

Teleservice

Effective as of 01-SEP-22

YANG, CHARLES, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562

Teleservice

Effective as of 01-AUG-10

***OCCUPATIONAL
THERAPIST***

BAST, SIDNEY, OT†

Provider ID: N/A

24671 MONROE AVE STE
101
MURRIETA, CA 92562

Effective as of 01-OCT-19

BAST, SIDNEY, OT†

Provider ID: N/A

24671 MONROE AVE STE
101
MURRIETA, CA 92562

Effective as of 01-OCT-19

CATIPON, GABRIELLE, OT

Provider ID: N/A

24671 MONROE AVE STE
C101
MURRIETA, CA 92562

Effective as of 01-MAY-23

CATIPON, GABRIELLE, OT

Provider ID: N/A

24671 MONROE AVE STE
C101
MURRIETA, CA 92562

Effective as of 01-MAY-23

DIMEGLIO, PAUL, OT†

Provider ID: N/A

24671 MONROE AVE STE
101
MURRIETA, CA 92562

Effective as of 01-FEB-21

DIMEGLIO, PAUL, OT†

Provider ID: N/A

24671 MONROE AVE STE
101
MURRIETA, CA 92562

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

Effective as of 01-FEB-21

MERCADO, ROBIN, MD

Provider ID: N/A

📄 24671 MONROE AVE BLDG
C101
MURRIETA, CA 92562

Effective as of 01-MAY-24

MERCADO, ROBIN, MD

Provider ID: N/A

📄 24671 MONROE AVE BLDG
C101
MURRIETA, CA 92562

Effective as of 01-MAY-24

STOTLER, APRIL, OT

Provider ID: N/A

📄 24671 MONROE AVE STE
C201
MURRIETA, CA 92562

Effective as of 01-JAN-24

STOTLER, APRIL, OT

Provider ID: N/A

📄 24671 MONROE AVE STE
C201
MURRIETA, CA 92562

Effective as of 01-JAN-24

ZECHA, RICHARD, OT†

Provider ID: N/A

📄 24671 MONROE AVE STE
101 BLDG C
MURRIETA, CA 92562

Effective as of 01-JAN-21

ZECHA, RICHARD, OT†

Provider ID: N/A

📄 24671 MONROE AVE STE
101 BLDG C
MURRIETA, CA 92562

Effective as of 01-JAN-21

OPHTHALMOLOGY

ABBOUD, JEAN-PAUL, MD†

Provider ID: N/A

📄 40700 CALIFORNIA OAKS
RD STE 106
MURRIETA, CA 92562

Effective as of 01-MAR-18

CARLSON, JOHN, MD†

Provider ID: N/A

📄 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-FEB-21

CARLSON, JOHN, MD†

Provider ID: N/A

📄 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-FEB-21

CHAWLA, ANUJ, MD†

Provider ID: N/A

📄 40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562

Effective as of 01-JUL-23

CHIN, ERIC, MD†

Provider ID: N/A

📄 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-JUL-19

CHIN, ERIC, MD†

Provider ID: N/A

📄 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-JAN-22

CHIN, ERIC, MD†

Provider ID: N/A

📄 25395 HANCOCK AVE STE

100

MURRIETA, CA 92562

Effective as of 01-FEB-21

CHIN, ERIC, MD†

Provider ID: N/A

📄 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-FEB-21

CHIN, ERIC, MD†

Provider ID: N/A

📄 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-JUN-23

CHOW, JASON, MD†

Provider ID: N/A

📄 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-SEP-22

CHOW, JASON, MD†

Provider ID: N/A

📄 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-OCT-22

CHOW, JASON, MD†

Provider ID: N/A

📄 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-FEB-24

CHOW, JASON, MD†

Provider ID: N/A

📄 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-JUL-23

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

CHOW, JASON, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JUL-23

CULOTTA, ANTHONY, MD†

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562

Teleservice

Effective as of 01-SEP-18

CULOTTA, ANTHONY, MD†

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562

Teleservice

Effective as of 01-SEP-18

CULOTTA, ANTHONY, MD†

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562

Teleservice

Effective as of 01-SEP-18

CULOTTA, ANTHONY, MD†

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562

Teleservice

Effective as of 01-SEP-18

CULOTTA, ANTHONY, MD†

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562

Teleservice

Effective as of 01-NOV-20

CULOTTA, ANTHONY, MD†

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAY-21

DONALDSON, JARED, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-MAY-21

DONALDSON, JARED, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-SEP-22

DONALDSON, JARED, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-JUL-21

DONALDSON, JARED, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-JUL-21

DONALDSON, JARED, MD†

Provider ID: N/A

25395 HANCOCK AVE
MURRIETA, CA 92562
Effective as of 01-JAN-23

DONALDSON, JARED, MD†

Provider ID: N/A

25395 HANCOCK AVE
MURRIETA, CA 92562
Effective as of 01-DEC-22

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562

Effective as of 01-OCT-17

JOHNSON, ROGER, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562

Effective as of 01-JAN-22

JOHNSON, ROGER, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-JAN-22

JOHNSON, ROGER, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562

Effective as of 01-JUL-23

JOHNSON, ROGER, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-FEB-22

JOHNSON, ROGER, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103

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

MURRIETA, CA 92562
Effective as of 01-FEB-22

JOHNSON, ROGER, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100

MURRIETA, CA 92562
Effective as of 01-JAN-17

JOSEPH, JEFFREY, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100

MURRIETA, CA 92562
Effective as of 01-JUL-23

JOSEPH, JEFFREY, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103

MURRIETA, CA 92562
Effective as of 01-JAN-22

JOSEPH, JEFFREY, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103

MURRIETA, CA 92562
Effective as of 01-DEC-21

JOSEPH, JEFFREY, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103

MURRIETA, CA 92562
Effective as of 01-AUG-19

JOSEPH, JEFFREY, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100

MURRIETA, CA 92562
Effective as of 01-AUG-19

JOSEPH, JEFFREY, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100

MURRIETA, CA 92562
Effective as of 01-AUG-18

LOBUE, THOMAS, MD

Provider ID: N/A

40700 CALIFORNIA OAKS
RD STE 106

MURRIETA, CA 92562
Effective as of 01-OCT-09

NAWAZISH, SABA, MD†

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B

MURRIETA, CA 92562
Effective as of 01-JUL-23

PHILLIPS, BARRATT, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100

MURRIETA, CA 92562
Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103

MURRIETA, CA 92562
Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100

MURRIETA, CA 92562
Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

25460 MEDICAL CENTER

DR STE 103
MURRIETA, CA 92562
Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100

MURRIETA, CA 92562
Effective as of 01-AUG-18

PHILLIPS, BARRATT, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103

MURRIETA, CA 92562
Effective as of 01-MAY-17

SORENSEN, ROBERT, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100

MURRIETA, CA 92562
Effective as of 01-DEC-21

SORENSEN, ROBERT, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100

MURRIETA, CA 92562
Effective as of 01-JAN-22

VIDOR, IRA, MD†

Provider ID: N/A

40700 CALIFORNIA OAKS
RD

MURRIETA, CA 92562
Effective as of 01-JUL-19

OPTOMETRIST

ARCHIBALD, JOHN, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100

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

MURRIETA, CA 92562
Effective as of 01-DEC-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103

MURRIETA, CA 92562
Effective as of 01-DEC-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103

MURRIETA, CA 92562
Effective as of 01-JUL-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100

MURRIETA, CA 92562
Effective as of 01-JUL-23

COLEMAN, BROOKE, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100

MURRIETA, CA 92562
Effective as of 01-AUG-20

COOPER, MICHAEL, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100

MURRIETA, CA 92562
Effective as of 01-SEP-22

COOPER, MICHAEL, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100

MURRIETA, CA 92562
Effective as of 01-FEB-22

EVANS, RYAN, OD

Provider ID: N/A

40700 CALIFORNIA OAKS
RD STE 106

MURRIETA, CA 92562
Effective as of 01-APR-14

LARSON, BRETT, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100

MURRIETA, CA 92562
Effective as of 01-FEB-22

LARSON, BRETT, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100

MURRIETA, CA 92562
Effective as of 01-AUG-20

LARSON, BRETT, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100

MURRIETA, CA 92562
Effective as of 01-AUG-18

LARSON, BRETT, OD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103

MURRIETA, CA 92562
Effective as of 01-DEC-21

MC DIARMID, JOHN, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100

MURRIETA, CA 92562
Effective as of 01-JAN-11

MC DIARMID, JOHN, OD†

Provider ID: N/A

25395 HANCOCK AVE STE

100

MURRIETA, CA 92562
Effective as of 01-FEB-22

SCOTT, JEFFREY, OD†

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B

MURRIETA, CA 92562
Effective as of 01-JAN-22

SCOTT, JEFFREY, OD†

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B

MURRIETA, CA 92562
Effective as of 01-JAN-23

OTOLARYNGOLOGY

ABDOU, RAMI, MD†

Provider ID: N/A

39755 DATE ST STE 106
MURRIETA, CA 92563*

Effective as of 01-JUL-23

ABDOU, RAMI, MD†

Provider ID: N/A

39755 DATE ST STE 105
MURRIETA, CA 92563*

Effective as of 01-JUL-23

BANTHIA, VISHAL, MD†

Provider ID: N/A

39755 DATE ST STE 105
MURRIETA, CA 92563*

Teleservice

Effective as of 01-JUL-23

DATE, AMIT, MD

Provider ID: N/A

39755 DATE ST STE 105-106
MURRIETA, CA 92563

Teleservice

Effective as of 01-JUL-23

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

FORRESTER, MICHAEL, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
204
MURRIETA, CA 92562
Effective as of 01-JUL-23

FORRESTER, MICHAEL, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
204
MURRIETA, CA 92562
Effective as of 01-JUN-05

ROBERTS, BENJAMIN, DO

Provider ID: N/A

25150 HANCOCK AVE STE
204
MURRIETA, CA 92562
Effective as of 01-JUL-23

ROBERTS, BENJAMIN, DO

Provider ID: N/A

25150 HANCOCK AVE STE
204
MURRIETA, CA 92562
Effective as of 01-FEB-23

ROBERTS, TODD, DO

Provider ID: N/A

25150 HANCOCK AVE STE
204
MURRIETA, CA 92562
Effective as of 01-JUL-23

ROBERTS, TODD, DO

Provider ID: N/A

25150 HANCOCK AVE STE
204
MURRIETA, CA 92562
Effective as of 01-DEC-15

TIAN, QING, MD†

Provider ID: N/A

39755 DATE ST STE 105-106
MURRIETA, CA 92563*
Effective as of 01-JUL-23

PEDIATRIC CARDIOLOGY

CHU, JAMES, MD

Provider ID: N/A

39755 DATE ST STE 205
MURRIETA, CA 92563
Effective as of 01-JAN-23

CHU, JAMES, MD

Provider ID: N/A

39755 DATE ST STE 205
MURRIETA, CA 92563
Effective as of 01-JAN-23

CHU, JAMES, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

CHU, JAMES, MD

Provider ID: N/A

39755 DATE ST STE 205
MURRIETA, CA 92563
Effective as of 01-JAN-23

CHU, JAMES, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

CHU, JAMES, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

ELLINI, AHMAD REZA, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

ELLINI, AHMAD REZA, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

ELLINI, AHMAD REZA, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

ELLINI, AHMAD REZA, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

PHYSICIANS ASSISTANT

ARROYO, ARIANNA, PA

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-JUN-23

ARROYO, ARIANNA, PA

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-JUN-23

ARROYO, ARIANNA, PA

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

Provider ID: N/A

☐ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-JUN-23

ARROYO, ARIANNA, PA

Provider ID: N/A

☐ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-JUN-23

BASIN, NATALIE, PA

Provider ID: N/A

☐ 25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562
Teleservice
Effective as of 01-AUG-23

FRYER, KEVIN, PA

Provider ID: N/A

☐ 28078 BAXTER RD STE
330-340
MURRIETA, CA 92563
Effective as of 01-AUG-23

GAUSEPOHL, MARY, PA†

Provider ID: N/A

☐ 24910 LAS BRISAS RD STE
116
MURRIETA, CA 92562*
Effective as of 01-SEP-21

GAUSEPOHL, MARY, PA†

Provider ID: N/A

☐ 25470 MEDICAL CENTER
DR STE 102
MURRIETA, CA 92562*
Effective as of 01-SEP-21

HILLER, ASHLEY, PA

Provider ID: N/A

☐ 28078 BAXTER RD STE

300-340

MURRIETA, CA 92563
Effective as of 01-AUG-23

KAUFMAN, TIFFANY, PA†

Provider ID: N/A

☐ 24910 LAS BRISAS RD STE
105
MURRIETA, CA 92562
Effective as of 01-NOV-16

KAUFMAN, BRITNEY, PA†

Provider ID: N/A

☐ 25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-NOV-18

LANCASTER, MICHELLE, PA†

Provider ID: N/A

☐ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-DEC-22

LANCASTER, MICHELLE, PA†

Provider ID: N/A

☐ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-22

LANCASTER, MICHELLE, PA†

Provider ID: N/A

☐ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-22

LANCASTER, MICHELLE, PA†

Provider ID: N/A

☐ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-22

LANCASTER, MICHELLE, PA†

Provider ID: N/A

☐ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-22

LEE, WILLIAM, PA†

Provider ID: N/A

☐ 40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-APR-21

LEE, WILLIAM, PA†

Provider ID: N/A

☐ 40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-APR-21

LIN, RAY, PA†

Provider ID: N/A

☐ 25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-AUG-17

LIN, RAY, PA†

Provider ID: N/A

☐ 25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-AUG-17

LUCATERO, JENNIFER, PA†


Provider ID: N/A

☐ 25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-JAN-18

LUCATERO, JENNIFER, PA†


Provider ID: N/A

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

 25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-NOV-18


LUCATERO, JENNIFER, PA†

Provider ID: N/A

 25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-JAN-18


QUEROL, CYRUS, PA

Provider ID: N/A

 28078 BAXTER RD STE 312
MURRIETA, CA 92563
Effective as of 01-APR-24


QUISMORIO, DEMETRIO, PA†

Provider ID: N/A

 28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-DEC-16


QUISMORIO, DEMETRIO, PA†

Provider ID: N/A

 28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-NOV-20


RUIZ-FLORES, ROSE, PA

Provider ID: N/A

 24703 MONROE AVE
MURRIETA, CA 92562
Effective as of 01-SEP-23


ST JULES, JESSICA, PA†

Provider ID: N/A

 25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-NOV-18


ST JULES, JESSICA, PA†

Provider ID: N/A

 25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-AUG-17


TAYLOR, ISHA, PA

Provider ID: N/A

 24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24


TAYLOR, ISHA, PA

Provider ID: N/A

 24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24


TAYLOR, ISHA, PA

Provider ID: N/A

 24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24


TAYLOR, ISHA, PA

Provider ID: N/A

 24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24


WOOLEY, LAURA, PA†

Provider ID: N/A

 25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-NOV-18

YU, JUDITH, PA


Provider ID: N/A

 25405 HANCOCK AVE STE
108
MURRIETA, CA 92562
Effective as of 01-JUL-24

PODIATRIST


EVANS, RICHARD, DPM

Provider ID: N/A

 39755 MURRIETA HOT
SPRINGS RD STE D130
MURRIETA, CA 92563
Effective as of 01-APR-24


EVANS, RICHARD, DPM

Provider ID: N/A

 39755 MURRIETA HOT
SPRINGS RD STE D130
MURRIETA, CA 92563
Effective as of 01-APR-06


EVANS, RICHARD, DPM

Provider ID: N/A

 39755 MURRIETA HOT
SPRINGS RD STE D130
MURRIETA, CA 92563
Effective as of 01-MAR-15


MILLER, JULIE, DPM

Provider ID: N/A

 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-JUL-24


NGUYEN, THO, DPM†

Provider ID: N/A

 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-AUG-16

NGUYEN, THO, DPM†

Provider ID: N/A

 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-NOV-16

SCOTT, SUSAN, DPM†

Provider ID: N/A

 24640 JEFFERSON AVE

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

STE 109
MURRIETA, CA 92562
Effective as of 01-JUL-23

SCOTT, SUSAN, DPM†

Provider ID: N/A
24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-DEC-17

SCOTT, SUSAN, DPM†

Provider ID: N/A
24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-DEC-16

SHIN, CHRISTOPHER, DPM†

Provider ID: N/A
24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-MAY-21

SHIN, CHRISTOPHER, DPM†

Provider ID: N/A
24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-JAN-23

SHIN, CHRISTOPHER, DPM†

Provider ID: N/A
24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-SEP-22

TRANSFIGURACION SHIN, CHRISTIANNE, DPM†

Provider ID: N/A
24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562

Effective as of 01-DEC-17

TRANSFIGURACION SHIN, CHRISTIANNE, DPM†

Provider ID: N/A
24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-DEC-16

TRANSFIGURACION SHIN, CHRISTIANNE, DPM†

Provider ID: N/A
24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-JUL-23

WELLS, JOSEPH, DPM†

Provider ID: N/A
24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-JUL-23

WELLS, JOSEPH, DPM†

Provider ID: N/A
24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-SEP-16

WELLS, JOSEPH, DPM†

Provider ID: N/A
24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-NOV-16

PULMONARY DISEASES

HADDADIN, HASSAN, MD†

Provider ID: N/A
28078 BAXTER RD STE 324
MURRIETA, CA 92563

Effective as of 01-APR-22

HADDADIN, HASSAN, MD†

Provider ID: N/A
28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-APR-22

HADDADIN, HASSAN, MD†

Provider ID: N/A
28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-JUL-22

HENNINGER, DELMER, MD

Provider ID: N/A
39755 DATE ST STE 101
MURRIETA, CA 92563*
Effective as of 01-JUL-23

HENNINGER, DELMER, MD

Provider ID: N/A
39755 DATE ST STE 101
MURRIETA, CA 92563
Effective as of 01-SEP-09

HENNINGER, DELMER, MD

Provider ID: N/A
39755 DATE ST STE 101
MURRIETA, CA 92563
Effective as of 01-SEP-09

KUMAR, AVNEE, MD

Provider ID: N/A
25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
Effective as of 01-JUL-23

SALEK, MUNIF, MD†

Provider ID: N/A
28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-SEP-09

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

SALEK, MUNIF, MD†

Provider ID: N/A

☒ 28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-SEP-09

SALEK, MUNIF, MD†

Provider ID: N/A

☒ 28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-MAR-06

SALEK, MUNIF, MD†

Provider ID: N/A

☒ 28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-NOV-10

SALEK, MUNIF, MD†

Provider ID: N/A

☒ 28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-JAN-12

SIEN, STEFAN, DO†

Provider ID: N/A

☒ 28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-NOV-12

SIEN, STEFAN, DO†

Provider ID: N/A

☒ 28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-FEB-15

SURI, RAJAT, MD†

Provider ID: N/A

☒ 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
Effective as of 01-AUG-21

VEGA, RICARDO, MD†

Provider ID: N/A

☒ 28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-AUG-22

VEGA, RICARDO, MD†

Provider ID: N/A

☒ 28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-AUG-22

VEGA, RICARDO, MD†

Provider ID: N/A

☒ 28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-AUG-22

RADIATION ONCOLOGY

GREENE, DAVID, MD

Provider ID: N/A

☒ 40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-JUL-24

QUANG, TONY, MD

Provider ID: N/A

☒ 40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-OCT-23

RADIOLOGY DIAGNOSTIC

PATEL, NIKHIL, MD†

Provider ID: N/A

☒ 25485 MEDICAL CENTER
DR STE 106
MURRIETA, CA 92562
Effective as of 01-JAN-24

PATEL, NIKHIL, MD†

Provider ID: N/A

☒ 25485 MEDICAL CENTER
DR STE 106

MURRIETA, CA 92562
Effective as of 01-AUG-22

PATEL, NIKHIL, MD†

Provider ID: N/A

☒ 25485 MEDICAL CENTER
DR STE 106
MURRIETA, CA 92562
Effective as of 01-AUG-22

REGISTERED DIETITIAN / NUTRITIONIST

BLUCHER, CHERI, RD

Provider ID: N/A

☒ 29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-JUN-21

BRENDECKE, LORIE, RDN

Provider ID: N/A

☒ 29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-JUL-22

BRENDECKE, LORIE, RDN

Provider ID: N/A

☒ 29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-JUL-22

BRENDECKE, LORIE, RDN

Provider ID: N/A

☒ 29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-FEB-22

JACKSON, ALLYSON, RD

Provider ID: N/A


☒ 29970 TECHNOLOGY DR
STE 105D

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

MURRIETA, CA 92563
Effective as of 01-JUL-21


JACKSON, ALLYSON, RD

Provider ID: N/A

 29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-JUN-21


ROBERTS, LISA, RD

Provider ID: N/A

 29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-JUN-21


WAYNE, DIANE, RD

Provider ID: N/A

 29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Teleservice
Effective as of 01-DEC-23

WAYNE, DIANE, RD


Provider ID: N/A

 29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Teleservice
Effective as of 01-DEC-23

REGISTERED PHYSICAL THERAPIST


AGENA, CYAN, PT†

Provider ID: N/A

 25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-MAY-22


AGENA, CYAN, PT†

Provider ID: N/A

 25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-MAY-22


ALEXANDER, AUSTIN, PT

Provider ID: N/A

 25495 MEDICAL CENTER
DR STE 304
MURRIETA, CA 92562
Effective as of 01-DEC-20


ALEXANDER, AUSTIN, PT

Provider ID: N/A

 25495 MEDICAL CENTER
DR STE 304
MURRIETA, CA 92562
Effective as of 01-DEC-20


ALY, DILYANA, PT†

Provider ID: N/A

 27722 CLINTON KEITH RD
STE B-C
MURRIETA, CA 92562
Effective as of 01-JUL-19


ALY, DILYANA, PT†

Provider ID: N/A

 27722 CLINTON KEITH RD
STE B-C
MURRIETA, CA 92562
Effective as of 01-JUL-19


ATKINS, CHEYENNE, PT†

Provider ID: N/A

 25495 MEDICAL CENTER
DR STE 304
MURRIETA, CA 92562
Effective as of 01-NOV-18


ATKINS, CHEYENNE, PT†

Provider ID: N/A

 25495 MEDICAL CENTER
DR STE 304
MURRIETA, CA 92562
Effective as of 01-NOV-18


ATKINS, WILLIAM, PT

Provider ID: N/A

 25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-JUN-23


ATKINS, WILLIAM, PT

Provider ID: N/A

 25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-JUN-23


BARI, MONICA, PT

Provider ID: N/A

 24671 MONROE AVE BLDG
C201
MURRIETA, CA 92562
Effective as of 01-DEC-23


BARI, MONICA, PT

Provider ID: N/A

 24671 MONROE AVE BLDG
C201
MURRIETA, CA 92562
Effective as of 01-DEC-23


COBURN, PIERRE, PT

Provider ID: N/A

 24671 MONROE AVE BLDG
C201
MURRIETA, CA 92562
Effective as of 01-JAN-24


COBURN, PIERRE, PT

Provider ID: N/A

 25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-JAN-24

COBURN, PIERRE, PT

Provider ID: N/A

 25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-JAN-24

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

COBURN, PIERRE, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C201
MURRIETA, CA 92562
Effective as of 01-JAN-24

FOX, DELANIE, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C101
MURRIETA, CA 92562
Effective as of 01-OCT-23

FOX, DELANIE, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C101
MURRIETA, CA 92562
Effective as of 01-OCT-23

FOX, DELANIE, PT

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-OCT-23

FOX, DELANIE, PT

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-OCT-23

KESEL, KELSEY, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C101
MURRIETA, CA 92562
Effective as of 01-MAR-24

KESEL, KELSEY, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C101
MURRIETA, CA 92562

Effective as of 01-MAR-24

SABIN, SCOTT, PT†

Provider ID: N/A

24671 MONROE AVE BLDG
C-101
MURRIETA, CA 92562
Effective as of 01-MAY-22

SABIN, SCOTT, PT†

Provider ID: N/A

24671 MONROE AVE BLDG
C-101
MURRIETA, CA 92562
Effective as of 01-MAY-22

RHEUMATOLOGY

FREYNE, BRIGID, MD†

Provider ID: N/A

39755 MURRIETA HT SP
F110
MURRIETA, CA 92563
Effective as of 01-MAY-14

SPEECH PATHOLOGIST

PEDERSEN, ERICA, SP

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD
MURRIETA, CA 92563
Effective as of 01-MAY-23

PEDERSEN, ERICA, SP

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD
MURRIETA, CA 92563
Effective as of 01-MAY-23

SURGERY COLON

SURGERY

MOORE, PATRICK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-JUN-20

MOORE, PATRICK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-JUL-23

SURGERY GENERAL

BATRA, MUNISH, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-SEP-17

BERNSTEIN, DAVID, MD

Provider ID: N/A

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

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-23

BIANCHI, CHRISTIAN, MD

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-FEB-23

BIANCHI, CHRISTIAN, MD

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-23

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JUL-24

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

DADA, STEPHEN, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-18

DADA, FESTUS, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-23

DADA, FESTUS, MD†

Provider ID: N/A

25470 MEDICAL CENTER

DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUN-17

DADA, STEPHEN, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-MAY-14

DADA, FESTUS, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-AUG-20

DADA, FESTUS, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-DEC-22

IGWE, DANIEL, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-DEC-22

KRAHN, DOUGLAS, MD

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-MAR-23

LIEN, CHRISTINA, DO

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-OCT-22

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

LIEN, CHRISTINA, DO

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-MAR-23

MARTIN, DAVID, MD

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-MAR-23

MARTIN, DAVID, MD

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-23

MEHTA, PRATIK, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-OCT-22

POLLACK, JAMES, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-FEB-23

POLLACK, JAMES, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JUL-24

POLLACK, JAMES, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

POLLACK, JAMES, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-22

POLLACK, JAMES, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-21

SAMIMI, KIAN, MD

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-APR-23

SUH, DAVID, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-DEC-12

SUH, DAVID, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-DEC-12

TRAN, MICHAEL, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JUN-23

TRAN, MICHAEL, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JUN-23

VEGA, FRANCISCO, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-MAR-23

WANG, SHIN CHERN, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-MAR-23

WANG, SHIN CHERN, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-FEB-23

SURGERY GENERAL VASCULAR

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-APR-20

CHIRIANO, JASON, DO

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-MAR-23

VEGA, FRANCISCO, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

VEGA, FRANCISCO, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

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

Effective as of 01-NOV-23

SURGERY HAND PLASTIC

KUPFER, DAVID, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562

Effective as of 01-SEP-09

***SURGERY
NEUROLOGICAL***

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-SEP-17

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-SEP-17

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-SEP-17

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-SEP-17

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE

210

MURRIETA, CA 92562

Effective as of 01-OCT-15

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-MAR-17

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-FEB-18

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-FEB-20

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-FEB-20

FRIEDLICH, DANIEL, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-MAY-15

FRIEDLICH, DANIEL, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-MAR-14

FRIEDLICH, DANIEL, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-MAY-15

OH, GERALD, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-OCT-17

OH, GERALD, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-AUG-17

OH, GERALD, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-FEB-19

OH, GERALD, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-AUG-17

OH, GERALD, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-AUG-17

OH, GERALD, MD†

Provider ID: N/A

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

25150 HANCOCK AVE STE 210
MURRIETA, CA 92562
Effective as of 01-AUG-17

SURGERY ORTHOPEDIC

AGYEMAN, KOFI, MD†

Provider ID: N/A

25395 HANCOCK AVE STE 240
MURRIETA, CA 92562
Effective as of 01-MAR-22

AGYEMAN, KOFI, MD†

Provider ID: N/A

25395 HANCOCK AVE STE 250
MURRIETA, CA 92562
Effective as of 01-MAR-22

BIAMA, RICHARD, MD

Provider ID: N/A

28078 BAXTER RD STE 330-340
MURRIETA, CA 92563
Effective as of 01-MAY-24

CHENG, WAYNE, MD†

Provider ID: N/A

28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-JUL-21

CHENG, WAYNE, MD†

Provider ID: N/A

28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-JUL-21

DRINHAUS, ROLF, MD†

Provider ID: N/A

25150 HANCOCK AVE STE 200
MURRIETA, CA 92562

Effective as of 01-APR-08

ERWTEMAN, ANDREW, MD†

Provider ID: N/A

25150 HANCOCK AVE STE 200
MURRIETA, CA 92562
Effective as of 01-AUG-20

ERWTEMAN, ANDREW, MD†

Provider ID: N/A

25150 HANCOCK AVE STE 200
MURRIETA, CA 92562
Effective as of 01-NOV-16

GARGULINSKI, MATTHEW, DO†

Provider ID: N/A

25150 HANCOCK AVE STE 200
MURRIETA, CA 92562
Effective as of 01-AUG-22

GARGULINSKI, MATTHEW, DO†

Provider ID: N/A

25150 HANCOCK AVE STE 200
MURRIETA, CA 92562
Effective as of 01-AUG-23

GARGULINSKI, MATTHEW, DO†

Provider ID: N/A

25150 HANCOCK AVE STE 200
MURRIETA, CA 92562
Effective as of 01-AUG-22

GARGULINSKI, MATTHEW, DO†

Provider ID: N/A

25150 HANCOCK AVE STE 200
MURRIETA, CA 92562
Effective as of 01-SEP-23

GHAYOUMI, POURIYA, MD†

Provider ID: N/A

25395 HANCOCK AVE STE 250
MURRIETA, CA 92562
Effective as of 01-JUL-24

GHAYOUMI, POURIYA, MD†

Provider ID: N/A

25395 HANCOCK AVE STE 250
MURRIETA, CA 92562
Effective as of 01-MAY-24

GHAYOUMI, POURIYA, MD†

Provider ID: N/A

25395 HANCOCK AVE STE 240
MURRIETA, CA 92562
Effective as of 01-AUG-22

GHAYOUMI, POURIYA, MD†

Provider ID: N/A

25395 HANCOCK AVE STE 250
MURRIETA, CA 92562
Effective as of 01-AUG-22

GHAYOUMI, POURIYA, MD†

Provider ID: N/A

25395 HANCOCK AVE STE 240
MURRIETA, CA 92562
Effective as of 01-DEC-22

GHAYOUMI, POURIYA, MD†

Provider ID: N/A

25395 HANCOCK AVE STE 240
MURRIETA, CA 92562
Effective as of 01-MAY-24

GHAYOUMI, POURIYA, MD†

Provider ID: N/A

25395 HANCOCK AVE STE 250

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

MURRIETA, CA 92562
Effective as of 01-DEC-22

JERCINOVICH, IGOR, MD

Provider ID: N/A
25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-OCT-20

JERCINOVICH, IGOR, MD

Provider ID: N/A
25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-APR-07

KIMBALL, JEFF, MD

Provider ID: N/A
28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-NOV-23

KIMBALL, JEFF, MD

Provider ID: N/A
28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-DEC-23

LOCKE, JOHN, MD†

Provider ID: N/A
28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-AUG-22

LOCKE, JOHN, MD†

Provider ID: N/A
28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-AUG-22

LUNA, MARIO, MD†

Provider ID: N/A
25495 MEDICAL CENTER
DR STE 101

MURRIETA, CA 92562
Effective as of 01-AUG-20

LUNA, MARIO, MD

Provider ID: N/A
39755 DATE ST STE 104
MURRIETA, CA 92563
Effective as of 01-MAR-23

ODA, NINOS, MD

Provider ID: N/A
25395 HANCOCK AVE STE
240
MURRIETA, CA 92562
Effective as of 01-MAY-23

ODA, NINOS, MD

Provider ID: N/A
25395 HANCOCK AVE STE
250
MURRIETA, CA 92562
Effective as of 01-MAY-23

SAYEGH, ELI, MD

Provider ID: N/A
28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-AUG-22

SAYEGH, ELI, MD

Provider ID: N/A
28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-AUG-22

SAYEGH, ELI, MD

Provider ID: N/A
28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-JAN-22

SAYEGH, ELI, MD

Provider ID: N/A
28078 BAXTER RD STE 330
MURRIETA, CA 92563

Effective as of 01-JAN-22

SAYEGH, ELI, MD

Provider ID: N/A
28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-DEC-22

SAYEGH, ELI, MD

Provider ID: N/A
28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-DEC-22

TOOMA, GHASSAN, MD†

Provider ID: N/A
28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-DEC-22

TOOMA, GHASSAN, MD†

Provider ID: N/A
28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-DEC-23

TOOMA, GHASSAN, MD†

Provider ID: N/A
28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-APR-03

SURGERY PLASTIC

BATRA, MUNISH, MD

Provider ID: N/A
25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562*
Effective as of 01-JUL-23

KUPFER, DAVID, MD†

Provider ID: N/A
25495 MEDICAL CENTER
DR STE 303

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

MURRIETA, CA 92562
Effective as of 01-SEP-09

NEWMAN, DAVID, MD

Provider ID: N/A

25150 HANCOCK AVE STE
110
MURRIETA, CA 92562
Effective as of 01-JAN-06

NEWMAN, DAVID, MD

Provider ID: N/A

25150 HANCOCK AVE STE
110
MURRIETA, CA 92562
Effective as of 01-SEP-13

SURGERY THORACIC

KOUMJIAN, MICHAEL, MD†

Provider ID: N/A

28078 BAXTER RD STE 510
MURRIETA, CA 92563
Effective as of 01-JUN-21

VO, QUANG, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-DEC-22

VO, QUANG, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-23

UROLOGY

BRODAK, PHILIP, MD

Provider ID: N/A

28078 BAXTER RD STE 430
MURRIETA, CA 92563

Effective as of 01-AUG-24

BRODAK, PHILIP, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 305
MURRIETA, CA 92562
Effective as of 01-AUG-24

BRODAK, PHILIP, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 304
MURRIETA, CA 92562
Effective as of 01-AUG-24

CONNER, RICHARD, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-20

CONNER, RICHARD, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-SEP-14

CRISELL, MONISHA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-SEP-14

CRISELL, MONISHA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-20

CRISELL, MONISHA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-15

CRISELL, MONISHA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-FEB-15

CRISELL, MONISHA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JAN-04

CRISELL, MONISHA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JUN-15

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

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

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-APR-21

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-NOV-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-NOV-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450

MURRIETA, CA 92563
Effective as of 01-NOV-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JAN-24

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JUL-24

LARSON, BENJAMIN, MD

Provider ID: N/A

28078 BAXTER RD STE 430
MURRIETA, CA 92563
Effective as of 01-MAY-23

LARSON, BENJAMIN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-AUG-15

LARSON, BENJAMIN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-AUG-15

LARSON, BENJAMIN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-AUG-15

LARSON, BENJAMIN, MD†

Provider ID: N/A

25495 MEDICAL CENTER

DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-20

LARSON, BENJAMIN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JUL-23

LARSON, BENJAMIN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-OCT-15

LOUIE, BRANDON, MD

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JAN-24

LOUIE, BRANDON, MD

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JUL-24

LUTTGE, SCOTT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-23

LUTTGE, SCOTT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-23

REDDY, MADHUMITHA, DO†

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

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JUL-24

REDDY, MADHUMITHA, DO†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-MAR-21

REDDY, MADHUMITHA, DO†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-MAY-21

REDDY, MADHUMITHA, DO†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-FEB-22

REDDY, MADHUMITHA, DO†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-AUG-19

SHAH, NEMI, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Teleservice

Effective as of 01-FEB-24

SHAH, NEMI, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Teleservice

Effective as of 01-FEB-24

TAKESITA, KEN, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-NOV-15

TAKESITA, KEN, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-NOV-15

TALANKI, VARUN, MD

Provider ID: N/A

28078 BAXTER RD STE 430
MURRIETA, CA 92563
Effective as of 01-MAY-23

TALANKI, VARUN, MD

Provider ID: N/A

28078 BAXTER RD STE 430
MURRIETA, CA 92563
Effective as of 01-MAY-23

TALANKI, VARUN, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-JAN-22

TALANKI, VARUN, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-MAY-22

TALANKI, VARUN, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-MAY-22

TSI, SY, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563*
Effective as of 01-JUL-23

TSI, SY, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JUL-24

TSI, SY, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-AUG-16

TSI, SY, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-APR-22

**VEMULAPALLI, SREENIVAS,
MD**

Provider ID: N/A

28078 BAXTER RD STE 430
MURRIETA, CA 92563

Effective as of 01-MAY-23

**VEMULAPALLI, SREENIVAS,
MD†**

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-MAY-15

**VEMULAPALLI, SREENIVAS,
MD†**

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204

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

MURRIETA, CA 92562
Effective as of 01-MAY-20

**VEMULAPALLI, SREENIVAS,
MD†**

Provider ID: N/A
25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-OCT-14

**VEMULAPALLI, SREENIVAS,
MD†**

Provider ID: N/A
25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-DEC-23

**VEMULAPALLI, SREENIVAS,
MD†**

Provider ID: N/A
25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JUL-13

**VEMULAPALLI, SREENIVAS,
MD†**

Provider ID: N/A
25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JUN-15

YUN, EDWARD, MD†

Provider ID: N/A
28078 BAXTER RD STE 450
MURRIETA, CA 92563*
Effective as of 01-NOV-15

YUN, EDWARD, MD†

Provider ID: N/A
28078 BAXTER RD STE 450

MURRIETA, CA 92563*
Effective as of 01-JUL-23

YUN, EDWARD, MD†

Provider ID: N/A
28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JAN-23

YUN, EDWARD, MD†

Provider ID: N/A
28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JAN-23

YUN, EDWARD, MD†

Provider ID: N/A
28078 BAXTER RD STE 450
MURRIETA, CA 92563*
Effective as of 01-APR-16

YUN, EDWARD, MD†

Provider ID: N/A
28078 BAXTER RD STE 450
MURRIETA, CA 92563*
Effective as of 01-AUG-16

**CARDIAC
ELECTROPHYSIOLOGY**

OVIEDO-LINARES, RAUL, MD

Provider ID: N/A
1415 E 8TH ST STE 5
NATIONAL CITY, CA 91950
Effective as of 01-JUL-24

**CARDIOVASCULAR
DISEASE**

DAMANI, SAMIR, MD

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-NOV-23

KIM, JAMES, MD

Provider ID: N/A
1415 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-JUN-23

KIM, JAMES, MD

Provider ID: N/A
1415 E 8TH ST STE 3
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-AUG-23

LY, NANCY, MD

Provider ID: N/A
1415 E 8TH ST STE 4
NATIONAL CITY, CA 91950
Effective as of 01-NOV-23

LY, NANCY, MD

Provider ID: N/A
1415 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-JUN-23

LY, NANCY, MD

Provider ID: N/A
1415 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-JUN-23

NANAVATI, VIMAL, MD

Provider ID: N/A
2345 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-FEB-23

NANAVATI, VIMAL, MD†

Provider ID: N/A
2345 E 8TH ST STE 111
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JAN-21

OVIEDO-LINARES, RAUL, MD

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

Provider ID: N/A

1415 E 8TH ST STE 5
NATIONAL CITY, CA 91950
Effective as of 01-JUN-23

OVIEDO-LINARES, RAUL, MD

Provider ID: N/A

1415 E 8TH ST STE 5
NATIONAL CITY, CA 91950
Effective as of 01-AUG-23

OVIEDO-LINARES, RAUL, MD

Provider ID: N/A

1415 E 8TH ST STE 5
NATIONAL CITY, CA 91950
Effective as of 01-AUG-23

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-MAR-18

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PATEL, PRASHANT, MD

Provider ID: N/A

1845 E 12TH ST
NATIONAL CITY, CA 91950
Effective as of 01-JUL-24

ROUGH, STEVEN, MD

Provider ID: N/A

1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-AUG-23

SHARF, ALBERT, MD

Provider ID: N/A

1845 E 12TH ST

NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-JUN-24

SHEREV, DIMITRI, MD

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-SEP-23

WYSOCZANSKI, MARIUSZ, MD

Provider ID: N/A

1415 E 8TH ST STE 8
NATIONAL CITY, CA 91950
Effective as of 01-JUN-23

WYSOCZANSKI, MARIUSZ, MD

Provider ID: N/A

1415 E 8TH ST STE 8
NATIONAL CITY, CA 91950
Effective as of 01-AUG-23

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO, NP

Provider ID: N/A

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

CARDENAS, MIRIAM, NPF

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

DHARKAR-SURBER, SAPNA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-OCT-23

DRISCOLL, SUSAN, NP

Provider ID: N/A

330 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-OCT-23

DRISCOLL, SUSAN, NP

Provider ID: N/A

340 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-OCT-23

KYI, MYA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-MAR-24

LIM, IMELDA, NP

Provider ID: N/A

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Effective as of 01-OCT-22

OLESCO, JENNIFER, NP

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-AUG-23

REAL, MARIA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

REDDY, PRIYA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Effective as of 01-NOV-22

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

RENZAS, JENNIFER, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JUL-21

SWEENEY, ZSA ZSA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JUL-21

VILLANUEVA DE GUTIE, BERENICE, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-MAY-21

WILLIAMS, BREAHA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Effective as of 01-DEC-21

CERTIFIED REGISTERED NURSE MIDWIFE

MAST, ASHLEY, CRNM

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-23

CHIROPRACTOR

DORADO, SUE, DC

Provider ID: N/A

217 HIGHLAND AVE

NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-23

GILIBERTO, JOSEPH, DC†

Provider ID: N/A

2835 HIGHLAND AVE
NATIONAL CITY, CA 91950

Effective as of 01-AUG-22

HALEY, STEVEN, DC

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-23

DERMATOLOGY

BARRIO, VICTORIA, MD

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-APR-24

BARRIO, VICTORIA, MD

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-MAR-24

BROGAN, JACQUELINE, MD†

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Effective as of 01-JUL-22

BROGAN, JACQUELINE, MD†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-21

CELANO, NICHOLAS, MD†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

CELANO, NICHOLAS, MD†

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-SEP-22

CELANO, NICHOLAS, MD†

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JUL-22

CELANO, NICHOLAS, MD†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Effective as of 01-MAR-18

CELANO, NICHOLAS, MD†

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JUL-24

CHIANG, JENNIFER, MD†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Effective as of 01-MAR-18

CHIANG, JENNIFER, MD†

Provider ID: N/A

655 EUCLID AVE STE 304

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

NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUL-22

CHIANG, JENNIFER, MD†

Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-SEP-22

CHIANG, JENNIFER, MD†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

CHIANG, JENNIFER, MD†

Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-24

GONZALEZ, JOSE, MD†

Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-AUG-22

GONZALEZ, JOSE, MD

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-MAY-23

GORDON, JUSTIN, MD†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-APR-22

GORDON, JUSTIN, MD†

Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-AUG-22

LIN, SHINKO, MD

Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-24

LIN, SHINKO, MD

Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-24

LIN, SHINKO, MD

Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-MAR-24

NELSON, AISLYN, MD†

Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-AUG-22

NELSON, AISLYN, MD†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-19

SATEESH, BROOKE, MD†

Provider ID: N/A
655 EUCLID AVE STE 304

NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-AUG-22

SATEESH, BROOKE, MD†

Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUL-22

SATEESH, BROOKE, MD†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-MAR-18

TYAGI, ABHILASHA, MD†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-APR-22

TYAGI, ABHILASHA, MD†

Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-AUG-22

TYAGI, ABHILASHA, MD†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

UEBELHOER, NATHAN, DO†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-FEB-22

UEBELHOER, NATHAN, DO†

Provider ID: N/A

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

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-FEB-23

UEBELHOER, NATHAN, DO†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-APR-18

EMERGENCY MEDICINE

TABILA, BRIAN, MD†

Provider ID: N/A

610 EUCLID AVE STE 202
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

ENDOCRINOLOGY

METABOLISM DIABETES

ROGERS, MEGAN, MD

Provider ID: N/A

22 W 35TH ST STE 101
NATIONAL CITY, CA 91950
Effective as of 01-MAY-24

VALDEZ, KRYSTAL ANGELI, MD

Provider ID: N/A

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

FAMILY PRACTICE

DILLON, MAYRA, MD†

Provider ID: N/A

1136 D AVE
NATIONAL CITY, CA 91950*
Effective as of 01-JUL-24

SNOOK, BRIAN, DO†

Provider ID: N/A

2400 E 8TH ST
NATIONAL CITY, CA 91950*
Effective as of 01-JUN-24

GASTROENTEROLOGY

GISH, ROBERT, MD†

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUN-21

INTERNAL MEDICINE

LIM, ROSEMARIE, MD†

Provider ID: N/A

610 EUCLID AVE STE 202
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

LIU, ANDREW, MD

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-SEP-23

MAA CHIP, FHARAK, MD†

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-MAR-15

MAA CHIP, FHARAK, MD†

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-NOV-23

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

INTERNAL MEDICINE CRITICAL CARE MEDICINE

LIM, ROSEMARIE, MD†

Provider ID: N/A

655 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-MAY-21

TABILA, BRIAN, MD†

Provider ID: N/A

655 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-MAR-21

INTERVENTIONAL CARDIOLOGY

CAMACHO, BENJAMIN, MD†

Provider ID: N/A

1615 SWEETWATER RD STE
D
NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

CAMACHO, BENJAMIN, MD†

Provider ID: N/A

1615 SWEETWATER RD
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

CAMACHO, BENJAMIN, MD†

Provider ID: N/A

1615 SWEETWATER RD
NATIONAL CITY, CA 91950*
Effective as of 01-AUG-21

DAMANI, SAMIR, MD

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-MAR-24

FERNANDEZ, GENARO, MD†

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

Provider ID: N/A

610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

FERNANDEZ, GENARO, MD†

Provider ID: N/A

610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
Effective as of 01-APR-24

FERNANDEZ, GENARO, MD†

Provider ID: N/A

610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

KIM, JAMES, MD

Provider ID: N/A

1415 E 8TH ST STE 3
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUL-24

LY, NANCY, MD

Provider ID: N/A

1415 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-JUN-23

LY, NANCY, MD

Provider ID: N/A

1415 E 8TH ST STE 4
NATIONAL CITY, CA 91950
Effective as of 01-AUG-23

OVIEDO-LINARES, RAUL, MD

Provider ID: N/A

1415 E 8TH ST STE 5
NATIONAL CITY, CA 91950
Effective as of 01-AUG-23

OVIEDO-LINARES, RAUL, MD

Provider ID: N/A

1415 E 8TH ST STE 5

NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-MAR-20

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

ROUGH, STEVEN, MD

Provider ID: N/A

1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

ROUGH, STEVEN, MD

Provider ID: N/A

1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

ROUGH, STEVEN, MD

Provider ID: N/A

1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-23

ROUGH, STEVEN, MD

Provider ID: N/A

1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

SHETABI, KAMBIZ, MD

Provider ID: N/A

1415 E 8TH ST STE 7
NATIONAL CITY, CA 91950
Effective as of 01-APR-24

SHETABI, KAMBIZ, MD

Provider ID: N/A

1415 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

SHETABI, KAMBIZ, MD

Provider ID: N/A

1415 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

502 EUCLID AVE STE 104
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

502 EUCLID AVE STE 104
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

WYSOCZANSKI, MARIUSZ, MD

Provider ID: N/A

1415 E 8TH ST STE 8
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

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

LICENSED CLINICAL SOCIAL WORKER

ALVAREZ, DIANA, LCSW

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-APR-21

JASSO-RAMIREZ, MARTHA, LCSW

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-SEP-21

SACHS, MELISSA, LCSW†

Provider ID: N/A

2400 E 8TH ST
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-MAR-21

WRIGHT, STEPHANIE, LCSW

Provider ID: N/A

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Effective as of 01-JAN-24

MARRIAGE FAMILY THERAPIST

KUEK, JOHN, MFT

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-APR-21

NEPHROLOGY

CALDERON MOLINA, JUAN, MD†

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950

Effective as of 01-JUL-22

CALDERON MOLINA, JUAN, MD†

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950

Effective as of 01-NOV-23

COMUNALE, RODERICK, MD†

Provider ID: N/A

502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-FEB-19

COMUNALE, RODERICK, MD†

Provider ID: N/A

502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JUL-22

COMUNALE, RODERICK, MD†

Provider ID: N/A

502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JAN-21

MAA CHIP, FHARAK, MD†

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950

Effective as of 01-JUL-22

MAA CHIP, FHARAK, MD†

Provider ID: N/A

655 EUCLID AVE STE 303

NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

MAA CHIP, FHARAK, MD†

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950

Effective as of 01-SEP-20

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950

Effective as of 01-SEP-20

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950

Effective as of 01-JUL-22

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

NEUROLOGY

BOBO, JERRY, MD†

Provider ID: N/A

502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950

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

Effective as of 01-SEP-22

OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER, MD

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-23

ASLIAN, AZITA, MD†

Provider ID: N/A

2400 E 8TH ST
NATIONAL CITY, CA 91950

Effective as of 01-SEP-22

ASLIAN, AZITA, MD†

Provider ID: N/A

2400 E 8TH ST
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

ASLIAN, AZITA, MD

Provider ID: N/A

1136 D AVE
NATIONAL CITY, CA 91950*

Effective as of 01-SEP-23

DAVIS, TRACIE, MD

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-23

DELROSARIO, GELEN, MD†

Provider ID: N/A

502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

DELROSARIO, GELEN, MD†

Provider ID: N/A

502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950

Effective as of 01-SEP-22

FOLCH TORRES-AGUIAR, BEATRIZ, MD†

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-AUG-22

GELLENS, ANDREW, MD†

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-NOV-21

MELLENDEZ BERRIOS, IARA, MD

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-AUG-24

MENDEZ, DIEGO, MD

Provider ID: N/A

2400 E 8TH ST
NATIONAL CITY, CA 91950

Effective as of 01-APR-23

OPHTHALMOLOGY

ABDALLAH, WALID, MD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950

Effective as of 01-MAY-24

CARRABY, ARNETT, MD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

CHANG, TOM, MD†

Provider ID: N/A

2240 E PLAZA BLVD
NATIONAL CITY, CA 91950

Effective as of 01-SEP-22

DELENGOCKY, TAYSON, DO

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950

Effective as of 01-FEB-24

FISH, STEVEN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Effective as of 01-NOV-22

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

FISH, STEVEN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JUN-22

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JUN-23

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-MAR-18

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-18

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

HAIGHT, BRUCE, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

HUDSON, HENRY, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

HUDSON, HENRY, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-22

MANI, MAJID, MD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

MCDONNELL, EMMA, MD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

MCGRRAW, JOSEPH, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JAN-22

MCGRRAW, JOSEPH, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

MCGRRAW, JOSEPH, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-NOV-21

MCGRRAW, JOSEPH, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-OCT-21

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-MAR-23

MORRISON-REYES, JOSHUA, MD

Provider ID: N/A

2240 E PLAZA BOULEVARD
STE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-JUL-24

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

MORRISON-REYES, JOSHUA, MD

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

MORRISON-REYES, JOSHUA, MD

Provider ID: N/A

2240 E PLAZA BOULEVARD

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

STE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-AUG-24

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📍 2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-APR-22

PAPASTERGIU, GEORGIOS, MD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PATEL, SARJAN, MD†

Provider ID: N/A

📍 2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PATEL, SARJAN, MD†

Provider ID: N/A

📍 2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-AUG-20

PATEL, SARJAN, MD

Provider ID: N/A

📍 2240 E PLAZA BOULEVARD
STE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-JUL-24

PATEL, GITANE, MD†

Provider ID: N/A

📍 2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950

Effective as of 01-SEP-22

PATEL, SARJAN, MD†

Provider ID: N/A

📍 2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

PEAIRS, JAMES, MD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PERRY, ARTHUR, MD

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

PRABHU, SUJATA, MD†

Provider ID: N/A

📍 2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

RAJSBAUM, MARTIN, MD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

SASSANI, PATRICK, MD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

SASSANI, PATRICK, MD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-APR-24

SKAF, AYHAM, MD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

OPTOMETRIST

AOTO, KIM, OD†

Provider ID: N/A

📍 2240 E PLAZA BLVD STE
F-G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A

📍 2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

EL-MOGHRABI, NANCY, OD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

EL-MOGHRABI, ROULA, OD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

KHIEU, TINA, OD

Provider ID: N/A

📍 2240 E PLAZA BLVD STE
F&G

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

NATIONAL CITY, CA 91950
Effective as of 01-MAR-24

KHIEU, TINA, OD

Provider ID: N/A
2240 E PLAZA BLVD STE
F&G
NATIONAL CITY, CA 91950
Effective as of 01-DEC-23

KHIEU, TINA, OD

Provider ID: N/A
2240 E PLAZA BLVD STE
F&G
NATIONAL CITY, CA 91950
Effective as of 01-MAY-24

KOO, ANITA, OD

Provider ID: N/A
1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

KOO, ANITA, OD

Provider ID: N/A
1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

KOO, ANITA, OD

Provider ID: N/A
1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JUN-24

KOO, ANITA, OD

Provider ID: N/A
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Effective as of 01-MAY-24

MARR, RYAN, OD

Provider ID: N/A
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Effective as of 01-JUL-24

MARR, RYAN, OD

Provider ID: N/A
2240 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JUL-24

MARR, RYAN, OD

Provider ID: N/A
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-DEC-22

VINH, JOHN, OD[†]

Provider ID: N/A
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-SEP-20

PEDIATRIC EMERGENCY MEDICINE

BONSU, BEMA, MD[†]

Provider ID: N/A
1136 D AVE
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PHYSICAL MEDICINE / REHABILITATION

CROWLEY, DONNA, MD[†]

Provider ID: N/A
655 EUCLID AVE STE 209
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

CROWLEY, DONNA, MD[†]

Provider ID: N/A
655 EUCLID AVE STE 209
NATIONAL CITY, CA 91950
Effective as of 01-APR-14

PHYSICIANS ASSISTANT

HABBOUSH, RANA, PA

Provider ID: N/A
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

HIGUERA, EDITH, PA

Provider ID: N/A
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

LANDON, JEFFREY, PA

Provider ID: N/A
610 EUCLID AVE STE 200
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-NOV-23

MACASADIA, MARITES, PA

Provider ID: N/A
610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-SEP-20

MERCER, KELLY, PA[†]

Provider ID: N/A
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

SHAH, SHEENA, PA

Provider ID: N/A
502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-21

SHAH, SHEENA, PA

Provider ID: N/A

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

502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

UDOH, EKAETE, PA

Provider ID: N/A

610 EUCLID AVE STE 200
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-MAR-24

PODIATRIST

ATMAR, AKMAL, DPM†

Provider ID: N/A

2345 E 8TH ST STE 105
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

ATMAR, AKMAL, DPM†

Provider ID: N/A

2345 E 8TH ST STE 105
NATIONAL CITY, CA 91950
Effective as of 01-JAN-23

CAINE, SAMUEL, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-APR-24

CAINE, SAMUEL, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-JUL-24

CAINE, SAMUEL, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-DEC-23

DAVIDSON III, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-SEP-22

DAVIDSON III, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-JAN-21

DAVIDSON III, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-DEC-23

DAVIDSON III, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-JAN-21

DAVIDSON III, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-JAN-22

DAVIDSON III, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-FEB-19

KRIGER, STEPHEN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-JAN-22

NGUYEN, HAN, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

NGUYEN, HAN, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-JUN-24

NGUYEN, HAN, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-JUN-23

NGUYEN, HAN, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-JUL-23

SANICOLAS, MARIA THERESA, DPM†

Provider ID: N/A

610 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

SANICOLAS, MARIA THERESA, DPM†

Provider ID: N/A

610 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

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

TSAI, GRACE, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-SEP-23

TSAI, GRACE, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

TSAI, GRACE, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-FEB-23

XU, DIXON, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-DEC-23

XU, DIXON, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

XU, DIXON, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-MAR-24

XU, DIXON, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-MAY-21

PSYCHIATRY

BOBO, JERRY, MD†

Provider ID: N/A

502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

BOBO, JERRY, MD†

Provider ID: N/A

502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

3035 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-AUG-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

3035 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-AUG-22

KUGEL, SAMUEL, MD†

Provider ID: N/A

502 EUCLID AVE STE 305
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-JAN-21

KUGEL, SAMUEL, MD†

Provider ID: N/A

502 EUCLID AVE STE 305
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-JAN-21

PSYCHOLOGIST

BAHENA-COLLEY, SANDRA, PSYD†

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-APR-21

BAHENA-COLLEY, SANDRA, PSYD†

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-APR-21

GALANT, DANIEL, PhD

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-APR-21

GALANT, DANIEL, PhD

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-APR-21

MIRANDA, CYNTHIA, PhD†

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-APR-21

MIRANDA, CYNTHIA, PhD†

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice


Effective as of 01-APR-21

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON, PT


Provider ID: N/A

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

 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24


DORSEY, KYLE, PT†

Provider ID: N/A

 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24


HERMAN, RACHEL, PT†

Provider ID: N/A

 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24


KARANDE, PRACHI, PT†

Provider ID: N/A

 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-JAN-22


NGUYEN, TIA, PT

Provider ID: N/A

 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-MAR-24


NOVENCIDO, ANDREW, PT†

Provider ID: N/A

 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

SUGGS, SARAH, PT

Provider ID: N/A

 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-MAY-23

RHEUMATOLOGY

CHITKARA, PUJA, MD

Provider ID: N/A


 502 EUCLID AVE STE 300

NATIONAL CITY, CA 91950
Effective as of 01-JUN-24

SURGERY GENERAL

ZUBER, SAMUEL, MD


Provider ID: N/A

 22 W 35TH ST STE 101
NATIONAL CITY, CA 91950
Effective as of 01-MAY-24

SURGERY PLASTIC

GUTTIKONDA, RAKHESH, DO


Provider ID: N/A

 655 EUCLID AVE STE 200
NATIONAL CITY, CA 91950
Effective as of 01-DEC-23

ALLERGY IMMUNOLOGY

SCHWINDT, CHRISTINA, MD†


Provider ID: N/A

 400 NEWPORT CENTER
DR STE 401
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

SCHWINDT, CHRISTINA, MD†

Provider ID: N/A

 400 NEWPORT CENTER
DR STE 401
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

CERTIFIED NURSE PRACTITIONER

ANTONYAN, HOLLY, NPF†

Provider ID: N/A


 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA

92660

Effective as of 01-DEC-22

LEE, ALEXANDER, NP

Provider ID: N/A


 360 SAN MIGUEL DR STE
300
NEWPORT BEACH, CA
92660

Effective as of 01-APR-24

DERMATOLOGY

BIERMAN, DINA, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
405
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

BIERMAN, DINA, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
405
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-23

BREITHAUP, ANDREW, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-20

BREITHAUP, ANDREW, MD†

Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-APR-24

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

BREITHAUPT, ANDREW, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-19

BREITHAUPT, ANDREW, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-APR-24

ETTEFAGH, LELIA, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-21

ETTEFAGH, LELIA, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-24

ETTEFAGH, LELIA, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-24

FARSHIDI, ARTA, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
405
NEWPORT BEACH, CA

92660

Effective as of 01-FEB-23

FARSHIDI, ARTA, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
405
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

FARSHIDI, ARTA, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
405
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-24

FAZEL, NASIM, MD

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-24

FAZEL, NASIM, MD

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-24

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-23

FAZEL, NASIM, MD

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-23

FAZEL, NASIM, MD

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-23

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-23

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-23

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

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-23

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

FOREMAN, TANYA, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

FOREMAN, TANYA, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-15

FOREMAN, TANYA, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-18

FOREMAN, TANYA, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA

92660

Effective as of 01-JAN-17

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
309
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
309
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
309
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-24

HENDERSON, GREGORY, MD

Provider ID: N/A

1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-23

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

HENDERSON, GREGORY, MD

Provider ID: N/A

360 SAN MIGUEL DR STE 309
NEWPORT BEACH, CA 92660

Effective as of 01-NOV-23

HENDERSON, GREGORY, MD

Provider ID: N/A

1441 AVOCADO AVE STE 409
NEWPORT BEACH, CA 92660

Effective as of 01-OCT-23

KAMEL, JOSEPH, DO

Provider ID: N/A

360 SAN MIGUEL DR STE 501
NEWPORT BEACH, CA 92660

Effective as of 01-MAR-24

KAMEL, JOSEPH, DO

Provider ID: N/A

360 SAN MIGUEL DR STE 501
NEWPORT BEACH, CA 92660

Effective as of 01-MAR-24

KARAVAN JAHROMI, MAHSA, MD†

Provider ID: N/A

1401 AVOCADO AVE STE 703
NEWPORT BEACH, CA 92660

Effective as of 01-SEP-19

KHERADMAND, SHIVA, DO†

Provider ID: N/A

240 NEWPORT CENTER DR STE 105

NEWPORT BEACH, CA 92660

Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

Provider ID: N/A

240 NEWPORT CENTER DR STE 105
NEWPORT BEACH, CA 92660

Effective as of 01-DEC-21

LANDER, JEFFREY, MD†

Provider ID: N/A

1401 AVOCADO AVE STE 703
NEWPORT BEACH, CA 92660

Effective as of 01-DEC-21

LANDER, JEFFREY, MD†

Provider ID: N/A

1441 AVOCADO AVE STE 806
NEWPORT BEACH, CA 92660

Effective as of 01-AUG-22

LANDER, JEFFREY, MD†

Provider ID: N/A

1441 AVOCADO AVE STE 806
NEWPORT BEACH, CA 92660

Effective as of 01-DEC-22

LANDER, JEFFREY, MD†

Provider ID: N/A

400 NEWPORT CENTER DR STE 602
NEWPORT BEACH, CA 92660

Effective as of 01-DEC-22

LANDER, JEFFREY, MD†

Provider ID: N/A

1401 AVOCADO AVE STE 703
NEWPORT BEACH, CA 92660

Effective as of 01-DEC-22

LANDER, JEFFREY, MD†

Provider ID: N/A

1441 AVOCADO AVE STE 806
NEWPORT BEACH, CA 92660

Effective as of 01-AUG-22

LANDER, JEFFREY, MD†

Provider ID: N/A

1401 AVOCADO AVE STE 703
NEWPORT BEACH, CA 92660

Effective as of 01-DEC-21

LANDER, JEFFREY, MD†

Provider ID: N/A

1401 AVOCADO AVE STE 703
NEWPORT BEACH, CA 92660

Effective as of 01-OCT-23

LANDER, JEFFREY, MD†

Provider ID: N/A

1401 AVOCADO AVE STE 703
NEWPORT BEACH, CA 92660

Effective as of 01-JAN-23

LANDER, JEFFREY, MD†

Provider ID: N/A

1441 AVOCADO AVE STE 806
NEWPORT BEACH, CA 92660

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

Effective as of 01-JAN-23

LANDER, JEFFREY, MD†

Provider ID: N/A

📍 1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

LANGER, ROBERT, MD

Provider ID: N/A

📍 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-24

LANGER, ROBERT, MD

Provider ID: N/A

📍 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-24

LEDON, JENNIFER, MD

Provider ID: N/A

📍 400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-23

LEDON, JENNIFER, MD†

Provider ID: N/A

📍 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-23

LEDON, JENNIFER, MD†

Provider ID: N/A

📍 1401 AVOCADO AVE STE

703

NEWPORT BEACH, CA
92660

Effective as of 01-MAY-23

LEDON, JENNIFER, MD

Provider ID: N/A

📍 400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-23

LEDON, JENNIFER, MD†

Provider ID: N/A

📍 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

LEDON, JENNIFER, MD†

Provider ID: N/A

📍 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

LEDON, JENNIFER, MD

Provider ID: N/A

📍 400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

LEDON, JENNIFER, MD†

Provider ID: N/A

📍 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

LEDON, JENNIFER, MD

Provider ID: N/A

📍 400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

LEDON, JENNIFER, MD

Provider ID: N/A

📍 400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

LEVIN, JACQUELINE, DO†

Provider ID: N/A

📍 400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

LEVIN, JACQUELINE, DO†

Provider ID: N/A

📍 400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

LIEM, WIEKE, MD†

Provider ID: N/A

📍 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

LIEM, WIEKE, MD†

Provider ID: N/A

📍 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA

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

92660
Effective as of 01-JUL-19

LIEM, WIEKE, MD†

Provider ID: N/A

📄 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

LIEM, WIEKE, MD†

Provider ID: N/A

📄 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-19

LUCERO, RENEE, DO

Provider ID: N/A

📄 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

MARTIN, STEPHANIE, MD†

Provider ID: N/A

📄 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-21

MARTIN, STEPHANIE, MD†

Provider ID: N/A

📄 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-21

MARTIN, STEPHANIE, MD†

Provider ID: N/A

📄 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-APR-21

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

📄 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

📄 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-19

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

📄 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-19

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

📄 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

NAMI, NAVID, DO†

Provider ID: N/A

📄 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-19

NAMI, NAVID, DO†

Provider ID: N/A

📄 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

NAMI, NAVID, DO†

Provider ID: N/A

📄 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

NAMI, NAVID, DO†

Provider ID: N/A

📄 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

NAMI, NAVID, DO†

Provider ID: N/A

📄 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

NAMI, NAVID, DO†

Provider ID: N/A

📄 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO†

Provider ID: N/A


📄 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA

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

92660
Effective as of 01-FEB-23

NAMI, NAVID, DO[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-19

NAMI, NAVID, DO[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-APR-21

NAMI, NAVID, DO[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-21

NAMI, NAVID, DO[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

NAMI, NAVID, DO[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-12

NAMI, NAVID, DO[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-17

NAMI, NAVID, DO[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-18

NAMI, NAVID, DO[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-APR-21

NAMI, NAVID, DO[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-23

NGUYEN, DENNIS, MD[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

NGUYEN, DENNIS, MD[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-APR-21

NGUYEN, DENNIS, MD[†]

Provider ID: N/A


 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA

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

92660
Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

NGUYEN, DENNIS, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

NGUYEN, DENNIS, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-21

NGUYEN, DENNIS, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

NGUYEN, DENNIS, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

ROSHDIEH, BABAK, MD†


Provider ID: N/A

 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

ROSHDIEH, BABAK, MD†


Provider ID: N/A

 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

ROSHDIEH, BABAK, MD†


Provider ID: N/A

 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

ROSHDIEH, BABAK, MD†


Provider ID: N/A

 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

ROSHDIEH, BABAK, MD†

Provider ID: N/A

 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA

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

92660
Effective as of 01-MAY-22

ROSHDIEH, BABAK, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

ROSHDIEH, BABAK, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

SHIELL, RONALD, MD†

Provider ID: N/A
400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-18

SHIELL, RONALD, MD†

Provider ID: N/A
400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-DEC-21

SHIELL, RONALD, MD†

Provider ID: N/A
400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-17

SHIELL, RONALD, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-AUG-21

SHIELL, RONALD, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-AUG-21

SHIELL, RONALD, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-DEC-21

SHIELL, RONALD, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

***ENDOCRINOLOGY
METABOLISM DIABETES***

MOATTARI, ALI, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
502
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-20

SODHI, SANDEEP, MD†

Provider ID: N/A

369 SAN MIGUEL DR STE
200
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

SODHI, SANDEEP, MD†

Provider ID: N/A

369 SAN MIGUEL DR STE
200
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-24

SODHI, SANDEEP, MD†

Provider ID: N/A

369 SAN MIGUEL DR STE
200
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

SODHI, SANDEEP, MD†

Provider ID: N/A

369 SAN MIGUEL DR STE
200
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-21

SODHI, SANDEEP, MD†

Provider ID: N/A

369 SAN MIGUEL DR STE
200
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-21

***ENDOCRINOLOGY
REPRODUCTIVE***

MOAYERI, SHARON, MD

Provider ID: N/A

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

1401 AVOCADO AVE STE
403
NEWPORT BEACH, CA
92660
Effective as of 01-AUG-24

MOAYERI, SHARON, MD

Provider ID: N/A

1401 AVOCADO AVE STE
403
NEWPORT BEACH, CA
92660
Effective as of 01-AUG-24

SACHDEV, NIDHEE, MD

Provider ID: N/A

1401 AVOCADO AVE
STE 403
NEWPORT BEACH, CA
92660
Effective as of 01-AUG-24

SACHDEV, NIDHEE, MD

Provider ID: N/A

1401 AVOCADO AVE
STE 403
NEWPORT BEACH, CA
92660
Effective as of 01-AUG-24

GASTROENTEROLOGY

SAINI, SURINDER, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
807
NEWPORT BEACH, CA
92660
Effective as of 01-APR-11

SAINI, SURINDER, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
807
NEWPORT BEACH, CA

92660
Effective as of 01-MAY-12

**HEMATOLOGY /
ONCOLOGY**

PATHAK, BHAVANA, MD†

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660
Effective as of 01-SEP-21

PATHAK, BHAVANA, MD†

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660
Effective as of 01-SEP-21

SACHELARIÉ, IRINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660
Effective as of 01-MAR-23

SACHELARIÉ, IRINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660
Effective as of 01-MAR-23

SACHELARIÉ, IRINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660
Effective as of 01-MAR-23

SACHELARIÉ, IRINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA

92660
Effective as of 01-MAR-23

**INTERVENTIONAL
CARDIOLOGY**

SARABI, DENNIS, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 610
NEWPORT BEACH, CA
92660
Effective as of 01-JAN-21

**OBSTETRICS /
GYNECOLOGY**

AL-AZAWI, HIND, MD

Provider ID: N/A

366 SAN MIGUEL DR STE
209
NEWPORT BEACH, CA
92660
Effective as of 01-JUL-23

SUGIHARA, CORINNE, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
608
NEWPORT BEACH, CA
92660
Effective as of 01-JAN-11

SUGIHARA, CORINNE, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
608
NEWPORT BEACH, CA
92660
Effective as of 01-AUG-11

OPHTHALMOLOGY

AGARWAL, MADHU, MD†

Provider ID: N/A

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

400 NEWPORT CENTER
DR STE 605
NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

AGARWAL, MADHU, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 605
NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

AGARWAL, MADHU, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 605
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-21

AGARWAL, MADHU, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
307
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-18

AGARWAL, MADHU, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 605
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-22

CIES, WILLIAM, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 404
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-12

EIFRIG, CHARLES WILLIAM, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-20

EIFRIG, CHARLES WILLIAM, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-20

EIFRIG, CHARLES WILLIAM, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

EIFRIG, CHARLES WILLIAM, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-18

EIFRIG, CHARLES WILLIAM, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-17

EIFRIG, CHARLES WILLIAM, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-17

GUPTA, MRINALI, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

GUPTA, MRINALI, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

GUPTA, MRINALI, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

HWANG, JOHN, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-17

HWANG, JOHN, MD†

Provider ID: N/A


360 SAN MIGUEL DR STE

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

407
NEWPORT BEACH, CA
92660
Effective as of 01-NOV-17

HWANG, JOHN, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

HWANG, JOHN, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-20

HWANG, JOHN, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-18

HWANG, JOHN, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-18

LIU, WENJING, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
410
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-20

LIU, WENJING, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
410
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-22

MCGUIRE, DESMOND, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-17

MCGUIRE, DESMOND, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-17

MCGUIRE, DESMOND, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-14

MCGUIRE, DESMOND, MD†

Provider ID: N/A

 360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-20

OTOLARYNGOLOGY

BERTELSEN, CAITLIN, MD†


Provider ID: N/A

 400 NEWPORT CENTER

DR STE 302
NEWPORT BEACH, CA
92660
Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†


Provider ID: N/A

 400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†


Provider ID: N/A

 400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†


Provider ID: N/A

 400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†


Provider ID: N/A

 400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†

Provider ID: N/A

 400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

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

WILLNER, AYAL, MD[†]

Provider ID: N/A

📍 400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-12

WILLNER, AYAL, MD[†]

Provider ID: N/A

📍 400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-12

PEDIATRIC PULMONOLOGY

HARRISON, AMY, MD

Provider ID: N/A

📍 369 SAN MIGUEL DR STE
375
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-24

HARRISON, AMY, MD

Provider ID: N/A

📍 369 SAN MIGUEL DR STE
375
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-24

HARRISON, AMY, MD

Provider ID: N/A

📍 369 SAN MIGUEL DR STE
375
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-24

PEDIATRICS

HOLM, WILLIAM, MD[†]

Provider ID: N/A

📍 1401 AVOCADO AVE STE
802
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

SAFER, TERRA, MD

Provider ID: N/A

📍 360 SAN MIGUEL DR STE
105
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-23

PHYSICIANS ASSISTANT

CORTES, ELIZABETH, PA

Provider ID: N/A

📍 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-23

DYKHUIS, KATELYN, PA

Provider ID: N/A

📍 1441 AVOCADO AVE STE
503
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-24

DYKHUIS, KATELYN, PA

Provider ID: N/A

📍 1441 AVOCADO AVE STE
503
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-24

KANE, KARA, PA[†]

Provider ID: N/A

📍 400 NEWPORT CENTER

DR STE 702

NEWPORT BEACH, CA
92660

Effective as of 01-OCT-22

KANE, KARA, PA[†]

Provider ID: N/A

📍 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-22

KAUFMAN, BRITNEY, PA[†]

Provider ID: N/A

📍 240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-15

KLEINSMITH, DARIN, PA[†]

Provider ID: N/A

📍 1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

LUCATERO, JENNIFER, PA[†]

Provider ID: N/A

📍 240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-18

MOUNTAIN, KELLY, PA

Provider ID: N/A

📍 1441 AVOCADO AVE STE
503
NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

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

NORMAN, STACY, PA

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

NORMAN, STACY, PA

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

NORMAN, STACY, PA

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

STANDEL, SARAH, PA†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660*

Effective as of 01-JUL-19

PODIATRIST

HAUPT, DAVID, DPM†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 706
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-19

HAUPT, DAVID, DPM†

Provider ID: N/A

400 NEWPORT CENTER

DR STE 706
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-24

LEAMING, ROBERT, DPM

Provider ID: N/A

366 SAN MIGUEL DR STE
210
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-FEB-24

LEAMING, ROBERT, DPM

Provider ID: N/A

366 SAN MIGUEL DR STE
210
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-FEB-24

MERCADO, BRYANT, DPM

Provider ID: N/A

400 NEWPORT CENTER
DR STE 706
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-23

PSYCHOLOGIST

KEALEY, TAMMY, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

KEALEY, TAMMY, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106

NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

KEALEY, TAMMY, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

KEALEY, TAMMY, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

LIM, DEAN, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

LIM, DEAN, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

LIM, DEAN, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

LIM, DEAN, PSYD

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

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

RADIATION ONCOLOGY

KINI, VIJAYKUMAR, MD

Provider ID: N/A

1605 AVOCADO AVE
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-24

RASHTIAN, AFSHIN, MD

Provider ID: N/A

1605 AVOCADO AVE
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-24

RASHTIAN, AFSHIN, MD

Provider ID: N/A

1605 AVOCADO AVE
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-24

SURGERY GENERAL

BONEV, VALENTINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

BONEV, VALENTINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

BONEV, VALENTINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

BONEV, VALENTINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

BURNS, ROBERT, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 500
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-12

SURGERY PLASTIC

MUDGE, BRADLEY, MD†

Provider ID: N/A

240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-JUL-12

MUDGE, BRADLEY, MD†

Provider ID: N/A

240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-SEP-21

MUDGE, BRADLEY, MD†

Provider ID: N/A

240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-SEP-21

RICHLAND, BRANDON, MD

Provider ID: N/A

1441 AVOCADO AVE STE 710
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-20

RICHLAND, BRANDON, MD

Provider ID: N/A

1441 AVOCADO AVE STE 710
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-20

RICHLAND, BRANDON, MD

Provider ID: N/A

1441 AVOCADO AVE STE 710
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-20

RICHLAND, BRANDON, MD

Provider ID: N/A

1441 AVOCADO AVE STE 710
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-24

ROSING, JAMES, MD

Provider ID: N/A

1441 AVOCADO AVE STE
708
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

ROSING, JAMES, MD

Provider ID: N/A

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

1441 AVOCADO AVE STE
708
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

UROLOGY

PHAN, CU, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 409
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-12

PHAN, CU, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 409
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-12

PHAN, CU, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 409
NEWPORT BEACH, CA
92660

Effective as of 01-APR-11

PHAN, CU, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 409
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-18

FAMILY PRACTICE

SPORTS MEDICINE

YIM, EUGENE, MD†

Provider ID: N/A

21115 NEWPORT COAST DR
NEWPORT COAST, CA
92657

Effective as of 01-JAN-21

ANESTHESIOLOGY

TOWNE, BROOKE, MD

Provider ID: N/A

3998 VISTA WAY STE C
OCEANSIDE, CA 92056

Effective as of 01-JAN-24

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY, MD

Provider ID: N/A

2125 S EL CAMINO REAL
STE 103
OCEANSIDE, CA 92054

Effective as of 01-JUL-24

COHEN, ZACHARY, MD

Provider ID: N/A

2125 EL CAMINO REAL STE
103
OCEANSIDE, CA 92054*

Effective as of 01-SEP-24

COHEN, ZACHARY, MD†

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-OCT-21

COHEN, ZACHARY, MD†

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-OCT-21

COHEN, ZACHARY, MD†

Provider ID: N/A

3142 VISTA WAY STE 207

OCEANSIDE, CA 92056
Effective as of 01-NOV-21

COHEN, ZACHARY, MD†

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-JAN-23

DAIRO, BRANDON, MD†

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-JAN-23

FISHER, CASEY, MD

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-JUN-19

FISHER, CASEY, MD

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-JUL-21

FISHER, CASEY, MD

Provider ID: N/A

2125 S EL CAMINO REAL
STE 103

OCEANSIDE, CA 92054

Effective as of 01-APR-24

GUPTA, PRAGYA, MD

Provider ID: N/A

3231 WARING CT
STE K

OCEANSIDE, CA 92056

Effective as of 01-AUG-24

LAWSON, ERIN, MD

Provider ID: N/A

3142 VISTA WAY STE 207

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

OCEANSIDE, CA 92056
Effective as of 01-JUL-23

LAWSON, ERIN, MD

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

PRABHU, NAMRATHA, MD

Provider ID: N/A

2125 S EL CAMINO REAL
STE 103
OCEANSIDE, CA 92054
Effective as of 01-APR-24

TOWNE, BROOKE, MD

Provider ID: N/A

3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

CARDIAC

ELECTROPHYSIOLOGY

PASHMFOROUSH, MOHAMMAD, MD†

Provider ID: N/A

2424 VISTA WAY STE 300
OCEANSIDE, CA 92054

Teleservice

Effective as of 01-JUN-21

CARDIOVASCULAR DISEASE

EL SHERIEF, KARIM, MD†

Provider ID: N/A

3230 WARING CT STE O
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

KABRA, ASHISH, MD†

Provider ID: N/A

3907 WARING RD STE 3
OCEANSIDE, CA 92056
Effective as of 01-AUG-22

RAJAMANICKAM, ANITHA, MD†

Provider ID: N/A

3907 WARING RD STE 3
OCEANSIDE, CA 92056
Effective as of 01-AUG-22

RAJAMANICKAM, ANITHA, MD†

Provider ID: N/A

3907 WARING RD STE 3
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SAMANI, PARGOL, MD

Provider ID: N/A

3927 WARING RD STE C
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-DEC-23

SHEREV, DIMITRI, MD

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Effective as of 01-SEP-23

YUNG, AARON, MD†

Provider ID: N/A

2424 VISTA WAY STE 300
OCEANSIDE, CA 92054

Teleservice

Effective as of 01-JUN-21

CERTIFIED ACUPUNCTURIST

GONZALEZ, ANDRES, LAC

Provider ID: N/A

3988 VISTA WAY STE G

OCEANSIDE, CA 92056
Effective as of 01-JUL-24

LIPTON, GREGORY, LAC

Provider ID: N/A

701 SEAGAZE DR STE B
OCEANSIDE, CA 92054
Effective as of 01-SEP-21

CERTIFIED NURSE PRACTITIONER

ANDOLINA, SARA, NP†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

BAEK, KILHYO, NP

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

BAEK, KILHYO, NP

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

BAEK, KILHYO, NP

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

BALDWIN, ANDREA, NP†

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

BALDWIN, ANDREA, NP†

Provider ID: N/A

818 PIER VIEW WAY

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

OCEANSIDE, CA 92054
Effective as of 01-NOV-22

CHAMBERLIN, KALIANA, NP

Provider ID: N/A

📄 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-21

CHILAKA, SAMUEL, NP

Provider ID: N/A

📄 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

CHRISTY, TYLER, NPF

Provider ID: N/A

📄 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

CHRISTY, TYLER, NPF

Provider ID: N/A

📄 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

CORY, ALLISON, NP

Provider ID: N/A

📄 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

CORY, ALLISON, NP

Provider ID: N/A

📄 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

CORY, ALLISON, NP

Provider ID: N/A

📄 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

EKLUND, BONNIE, NP

Provider ID: N/A

📄 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

EKLUND, BONNIE, NP

Provider ID: N/A

📄 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-FEB-24

FISHER-GAMEZ, LORI, NP

Provider ID: N/A

📄 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-21

HALGEDAHL, YI TING, NP

Provider ID: N/A

📄 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

HALGEDAHL, YI TING, NP

Provider ID: N/A

📄 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

HALGEDAHL, YI TING, NP

Provider ID: N/A

📄 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

HOWELL, AMANDA, NP

Provider ID: N/A

📄 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

HOWELL, AMANDA, NP

Provider ID: N/A

📄 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

HOWELL, AMANDA, NP

Provider ID: N/A

📄 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

HUERTA, STEVEN, NP

Provider ID: N/A

📄 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-24

HUERTA, STEVEN, NP

Provider ID: N/A

📄 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JUL-24

HUERTA, STEVEN, NP

Provider ID: N/A

📄 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-24

KELLEHER, BRIDGET, NP

Provider ID: N/A

📄 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-APR-24

KELLEHER, BRIDGET, NP

Provider ID: N/A

📄 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-APR-24

KELLEHER, BRIDGET, NP

Provider ID: N/A

📄 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-APR-24

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

LANG, LESLIE, NPF

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-MAY-24

NAVA, PETER, NP

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

PATEMAN, CAROLYN, NP

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

PRITZKER, JOELY, NP

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-21

PRITZKER, JOELY, NP

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

PRITZKER, JOELY, NP

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

QUINN, ERIN, NP

Provider ID: N/A

3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-MAY-21

SANTIAGO, AMANDA, NP

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-21

SHAHBAZ, LINNAE, NPF

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-MAR-24

SHAHBAZ, LINNAE, NPF

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-MAR-24

WAGNER, TASIA, NP

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

WAGNER, TASIA, NP

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-APR-24

WAGNER, TASIA, NP

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-APR-24

WINDHAM, SUZONNE, NP

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

CERTIFIED REGISTERED NURSE MIDWIFE

KELLY, KATHERINE, CRNM†

Provider ID: N/A

2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

LASKY, LANA, CRNM

Provider ID: N/A

2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

PERLMAN, TAMARA, CRNM†

Provider ID: N/A

2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

CHIROPRACTOR

ANDREWS, BRAD, DC


Provider ID: N/A

619 CROUCH ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22


JU, NATHANIEL, DC†

Provider ID: N/A


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

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22


JU, NATHANIEL, DC†
Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24


LOVERN, JENNIFER, DC
Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-24

LOVERN, JENNIFER, DC
Provider ID: N/A


 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-AUG-24

TRAINER, JASON, DC
Provider ID: N/A


 3998 VISTA WAY STE G
OCEANSIDE, CA 92056
Effective as of 01-JUL-24

DERMATOLOGY

AGUIRRE, KRISTEN, MD†
Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-20

AGUIRRE, KRISTEN, MD†
Provider ID: N/A


 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-FEB-24

ANGRA, KUNAL, MD†
Provider ID: N/A


 3629 VISTA WAY

OCEANSIDE, CA 92056
Effective as of 01-DEC-21


ANGRA, KUNAL, MD†
Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-NOV-20


BROWN, REGINA, MD
Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056*
Effective as of 01-SEP-24


GILBOA, RUTH, MD†
Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20


GILBOA, RUTH, MD†
Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-MAR-12


ROSS, ANDREW, MD†
Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22


ROSS, ANDREW, MD†
Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20


ROSS, ANDREW, MD†
Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20


ROSS, ANDREW, MD†
Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21


SAMADY, JOSEPH, MD†
Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21


SAMADY, JOSEPH, MD†
Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-APR-07


SAMADY, JOSEPH, MD†
Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20

SAMADY, JOSEPH, MD†
Provider ID: N/A


 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-MAR-12

SAMADY, JOSEPH, MD†
Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

SIRICHOTIRATANA, MELISSA, MD†

Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-23

THIELE, JENS, MD†
Provider ID: N/A

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

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

THIELE, JENS, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

THIELE, JENS, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-09

THIELE, JENS, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-MAR-12

TSE, YARDY, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

TSE, YARDY, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

VENKAT, ARUN, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

VENKAT, ARUN, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20

VENKAT, ARUN, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-13

WONG, DARRYL, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

WONG, DARRYL, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-MAR-12

ENDOCRINOLOGY REPRODUCTIVE

COFFLER, MICKEY, MD†

Provider ID: N/A

3231 WARING CT STE M
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

FAMILY PRACTICE

MARTINEZ, LESLY, MD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057*
Effective as of 01-JUL-24

MARTINEZ, LESLY, MD

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054*
Effective as of 01-JUL-24

MARTINEZ, LESLY, MD

Provider ID: N/A

517 N HORNE ST

OCEANSIDE, CA 92054*
Effective as of 01-JUL-24

MATIAS, JULIE, DO

Provider ID: N/A

3998 VISTA WAY STE 204
OCEANSIDE, CA 92056
Effective as of 01-JUN-24

PANICKER, CIBU, MD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-SEP-18

SNYDER, OLE, MD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057*
Effective as of 01-JUN-24

SNYDER, OLE, MD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054*
Effective as of 01-JUN-24

SNYDER, OLE, MD

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054*
Effective as of 01-JUN-24

VIDAL, MONICA, DO†

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054*
Effective as of 01-JUL-24

VIDAL, MONICA, DO†

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054*
Effective as of 01-JUL-24

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

VIDAL, MONICA, DO†

Provider ID: N/A

☒ 4700 N RIVER RD
OCEANSIDE, CA 92057*
Effective as of 01-JUL-24

FAMILY PRACTICE SPORTS MEDICINE

STARK, ERIK, MD†

Provider ID: N/A

☒ 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

GASTROENTEROLOGY

CHIAO, HELLEN, MD†

Provider ID: N/A

☒ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

CHIAO, HELLEN, MD†

Provider ID: N/A

☒ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

CHIAO, HELLEN, MD†

Provider ID: N/A

☒ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

CHIAO, HELLEN, MD†

Provider ID: N/A

☒ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

DEVEREAUX, CHRISTOPHER, MD†

Provider ID: N/A

☒ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

DEVEREAUX, CHRISTOPHER, MD†

Provider ID: N/A

☒ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-MAR-01

DEVEREAUX, CHRISTOPHER, MD†

Provider ID: N/A

☒ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

DEVEREAUX, CHRISTOPHER, MD†

Provider ID: N/A

☒ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

DEVEREAUX, CHRISTOPHER, MD†

Provider ID: N/A

☒ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

KROL, THOMAS, MD†

Provider ID: N/A

☒ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

KROL, THOMAS, MD†

Provider ID: N/A

☒ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

KROL, THOMAS, MD†

Provider ID: N/A

☒ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUN-99

KROL, THOMAS, MD†

Provider ID: N/A

☒ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

NOVO, MEGAN, MD

Provider ID: N/A

☒ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUL-24

NOVO, MEGAN, MD

Provider ID: N/A

☒ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUL-23

NOVO, MEGAN, MD

Provider ID: N/A

☒ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-23

NOVO, MEGAN, MD

Provider ID: N/A

☒ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-23

SHAD, JAVAID, MD†

Provider ID: N/A

☒ 3923 WARING RD STE A
OCEANSIDE, CA 92056

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

Effective as of 01-SEP-21

SHAD, JAVAID, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SHAD, JAVAID, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

SHAD, JAVAID, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-DEC-07

SHAD, JAVAID, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SHIM, MICHAEL, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SHIM, MICHAEL, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-FEB-10

SHIM, MICHAEL, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

SHIM, MICHAEL, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SHIM, MICHAEL, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

VIERNES, MATTHEW, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-SEP-01

VIERNES, MATTHEW, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

VIERNES, MATTHEW, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

VIERNES, MATTHEW, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ, MD†

Provider ID: N/A

4002 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-21

HEMATOLOGY /

ONCOLOGY

SINGH, HIMANI, MD†

Provider ID: N/A

3617 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SINGH, HIMANI, MD†

Provider ID: N/A

3617 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

INTERNAL MEDICINE

KHARADJIAN, TALAR, MD†

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

KHARADJIAN, TALAR, MD†

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-22

KHARADJIAN, TALAR, MD†

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-21

LIU, ANDREW, MD

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Effective as of 01-SEP-23

MACMURRAY, MICHAEL, MD

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

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-NOV-23

MOOLANI, UJJALA, MD

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Effective as of 01-MAY-23

PAROLY, WARREN, MD†

Provider ID: N/A

3617 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SHABANIAN, LEILA, MD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057*
Effective as of 01-AUG-24

SHABANIAN, LEILA, MD

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054*
Effective as of 01-MAY-24

INTERNAL MEDICINE

GERIATRIC MEDICINE

CHONG, ILSONG, MD

Provider ID: N/A

3998 VISTA WAY STE 204
OCEANSIDE, CA 92056
Effective as of 01-JUN-24

INTERVENTIONAL

CARDIOLOGY

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

605 CROUCH ST

OCEANSIDE, CA 92054
Effective as of 01-JUL-22

LICENSED CLINICAL SOCIAL WORKER

ACOSTA, AZUCENA, LCSW

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

ACOSTA, AZUCENA, LCSW

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

ACOSTA, AZUCENA, LCSW

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

CRUZ, VANESSA, LCSW

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

CRUZ, VANESSA, LCSW

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-21

CRUZ, VANESSA, LCSW

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

DOUGHERTY, CHRISTINE, LCSW

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

DOUGHERTY, CHRISTINE, LCSW

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

DOUGHERTY, CHRISTINE, LCSW

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

GODINEZ, BRENDA, LCSW

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

GODINEZ, BRENDA, LCSW

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

GODINEZ, BRENDA, LCSW

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

MENDEZ, ADRIANA, LCSW

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

MENDEZ, ADRIANA, LCSW

Provider ID: N/A

818 PIER VIEW WAY

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

OCEANSIDE, CA 92054
Effective as of 01-JAN-24

MENDEZ, ADRIANA, LCSW

Provider ID: N/A

☒ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW

Provider ID: N/A

☒ 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW

Provider ID: N/A

☒ 4700 N RIVER RD
OCEANSIDE, CA 92057
Teleservice
Effective as of 01-JAN-24

SANCHEZ, ADRIANA, LCSW

Provider ID: N/A

☒ 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

SANCHEZ, ADRIANA, LCSW

Provider ID: N/A

☒ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

SANCHEZ, ADRIANA, LCSW

Provider ID: N/A

☒ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

SMITH, SONYA, LCSW

Provider ID: N/A

☒ 517 N HORNE ST
OCEANSIDE, CA 92054

Effective as of 01-JAN-24

SMITH, SONYA, LCSW

Provider ID: N/A

☒ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

SMITH, SONYA, LCSW

Provider ID: N/A

☒ 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

WILSON, CARLENE, LCSW

Provider ID: N/A

☒ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

ZAPPONE, ALIDA, LCSW

Provider ID: N/A

☒ 4700 N RIVER RD
OCEANSIDE, CA 92057
Teleservice
Effective as of 01-JAN-24

ZAPPONE, ALIDA, LCSW

Provider ID: N/A

☒ 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

ZAPPONE, ALIDA, LCSW

Provider ID: N/A

☒ 517 N HORNE ST
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

MARRIAGE FAMILY THERAPIST

MEYERHOF, GRETA, MFT†

Provider ID: N/A

☒ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

MEYERHOF, GRETA, MFT†

Provider ID: N/A

☒ 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

MEYERHOF, GRETA, MFT†

Provider ID: N/A

☒ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

MEDICAL ONCOLOGY

PAROLY, WARREN, MD†

Provider ID: N/A

☒ 3617 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

NEPHROLOGY

KHARADJIAN, TALAR, MD†

Provider ID: N/A

☒ 3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUN-21

KHARADJIAN, TALAR, MD†

Provider ID: N/A

☒ 3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUL-21

LIU, ANDREW, MD

Provider ID: N/A

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

3300 VISTA WAY
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUL-24

LIU, ANDREW, MD

Provider ID: N/A

3300 VISTA WAY
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-DEC-23

LIU, ANDREW, MD

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

LIU, ANDREW, MD

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Effective as of 01-NOV-23

LIU, ANDREW, MD

Provider ID: N/A

3300 VISTA WAY
OCEANSIDE, CA 92056*
Teleservice
Effective as of 01-OCT-23

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA, MD†

Provider ID: N/A

4002 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-21

EBRAHIMI ADIB, TANNAZ, MD†

Provider ID: N/A

3927 WARING RD STE D
OCEANSIDE, CA 92056

Effective as of 01-JAN-19

EBRAHIMI ADIB, TANNAZ, MD†

Provider ID: N/A

3927 WARING RD STE D
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

MAZAREI, RAHELE, DO†

Provider ID: N/A

3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-MAR-20

MAZAREI, RAHELE, DO†

Provider ID: N/A

3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-MAY-21

SCHWEIKERT, SUZANNE, MD†

Provider ID: N/A

2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

SCHWEIKERT, SUZANNE, MD†

Provider ID: N/A

2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-APR-15

SUNTAY, BERK, MD†

Provider ID: N/A

3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-MAY-21

SUNTAY, BERK, MD†

Provider ID: N/A

3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-JUN-21

OPHTHALMOLOGY

JACOBSEN, BRADLEY, MD

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-JUL-23

JACOBSEN, BRADLEY, MD

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-OCT-23

NGUYEN, VINCENT, MD†

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

NGUYEN, VINCENT, MD†

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-APR-20

ROBINSON, FANE, MD†

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-FEB-10

SHEILS, CATHERINE, MD

Provider ID: N/A

3637 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-24

SMITH, MARK, MD†


Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-FEB-10

SMITH, MARK, MD†


Provider ID: N/A

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

 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-SEP-21


SONG, DELU, MD

Provider ID: N/A

 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-OCT-23


SONG, DELU, MD

Provider ID: N/A

 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-JUL-23

SONG, DELU, MD


Provider ID: N/A

 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

OPTOMETRIST


GEE, JENNIFER, OD

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24


GEE, JENNIFER, OD

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

GEE, JENNIFER, OD

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

GEE, JENNIFER, OD


Provider ID: N/A

 4700 N RIVER RD

OCEANSIDE, CA 92057
Effective as of 01-JAN-24


KIM, MICHAEL, OD

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24


KIM, MICHAEL, OD

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22


KIM, MICHAEL, OD

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22


KIM, MICHAEL, OD

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24


MORA, WENDY, OD

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24


MORA, WENDY, OD

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22


MORA, WENDY, OD

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22


MORA, WENDY, OD

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24


RICH, RYAN, OD

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24


RICH, RYAN, OD

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22


RICH, RYAN, OD

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22


RICH, RYAN, OD

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24


RING, ROBERT, OD†

Provider ID: N/A

 3998 VISTA WAY STE 204
OCEANSIDE, CA 92056
Effective as of 01-SEP-22


TAM, EMILY, OD

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

TAM, EMILY, OD

Provider ID: N/A

 517 N HORNE ST

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

OCEANSIDE, CA 92054
Effective as of 01-JUL-22

TAM, EMILY, OD

Provider ID: N/A

☐ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

TAM, EMILY, OD

Provider ID: N/A

☐ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

OTOLARYNGOLOGY

BERRY, JULIE, MD

Provider ID: N/A

☐ 3909 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-APR-23

CARROLL, SARAH, MD†

Provider ID: N/A

☐ 3907 WARING RD STE 1
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

CARROLL, SARAH, MD†

Provider ID: N/A

☐ 3907 WARING RD STE 1
OCEANSIDE, CA 92056
Effective as of 01-OCT-21

CARROLL, SARAH, MD†

Provider ID: N/A

☐ 3907 WARING RD STE 1
OCEANSIDE, CA 92056
Effective as of 01-MAY-21

JACOBS, ROBERT, MD†

Provider ID: N/A

☐ 3907 WARING RD STE 1A
OCEANSIDE, CA 92056

Effective as of 01-JUN-99

JACOBS, ROBERT, MD†

Provider ID: N/A

☐ 3907 WARING RD STE 1A
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

KUSHNARYOV, ANTON, MD

Provider ID: N/A

☐ 3909 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-APR-23

REISMAN, BRUCE, MD†

Provider ID: N/A

☐ 3907 WARING RD STE 1
OCEANSIDE, CA 92056
Effective as of 01-JUN-99

PEDIATRICS

CURLEY, EDWARD, MD†

Provider ID: N/A

☐ 2210 MESA DR STE 300
OCEANSIDE, CA 92054
Effective as of 01-FEB-15

RONAN, KEVIN, MD

Provider ID: N/A

☐ 4700 N RIVER RD
OCEANSIDE, CA 92057*
Effective as of 01-JUL-24

RONAN, KEVIN, MD

Provider ID: N/A

☐ 818 PIER VIEW WAY
OCEANSIDE, CA 92054*
Effective as of 01-JUL-24

PHYSICAL MEDICINE / REHABILITATION

CURRY, JASON, MD†

Provider ID: N/A

☐ 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

FISHER, CASEY, MD

Provider ID: N/A

☐ 3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

PERRIZO, NATHAN, DO

Provider ID: N/A

☐ 3998 VISTA WAY STE 108
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

RICHARDSON, HENRY, MD†

Provider ID: N/A

☐ 3231 WARING CT STE K
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-MAY-23

PHYSICIANS ASSISTANT

BASIN, NATALIE, PA

Provider ID: N/A

☐ 3629 VISTA WAY
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-AUG-23

BASIN, NATALIE, PA

Provider ID: N/A

☐ 3629 VISTA WAY
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-DEC-23

BECKER, JANTIMA, PA

Provider ID: N/A

☐ 3629 VISTA WAY
OCEANSIDE, CA 92056

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

Teleservice

Effective as of 01-APR-24

BEITTER, KEERSTIN, PA†

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-JAN-23

BRODSKY, DENNIS, PA

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-FEB-22

COWAN, JOHN, PA†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

GLASSER, DANIEL, PA

Provider ID: N/A

605 CROUCH ST BLDG C
OCEANSIDE, CA 92054

Effective as of 01-MAY-24

JOHNSON, RYAN, PA

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-JUN-24

PAUL, ROBERT, PA†

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-FEB-22

POLLINGTON, CHRISTOPHER, *PODIATRIST* PA

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-OCT-23

RAMOS, ELENA, PA

Provider ID: N/A

605 CROUCH ST BLDG C
OCEANSIDE, CA 92054

Effective as of 01-AUG-23

SKULSKY, EVA, PA†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056

Effective as of 01-JAN-21

THOMAS, ROGER, PA

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-JUL-23

WALLACE, STEPHANIE, PA

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057

Effective as of 01-FEB-24

WRIGHT, DEREK, PA

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056

Effective as of 01-AUG-23

WRIGHT, DEREK, PA

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056

Effective as of 01-APR-24

BOBICK, BRIAN, DPM†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

BOBICK, BRIAN, DPM†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

BROOKS, JEFFREY, DPM

Provider ID: N/A

3230 WARING CT STE M
OCEANSIDE, CA 92056

Effective as of 01-APR-21

HAN, JAMES, DPM

Provider ID: N/A

2119 S EL CAMINO REAL
OCEANSIDE, CA 92054

Effective as of 01-DEC-11

SPRINGER, DEWAIN, DPM†

Provider ID: N/A

2191 S EL CAMINO REAL
STE 101

OCEANSIDE, CA 92054

Effective as of 01-JUL-18

PSYCHIATRY

BELL, JENNIFER, DO

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057

Effective as of 01-FEB-24

BELL, JENNIFER, DO

Provider ID: N/A

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

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-FEB-24

CHAUDHRI, YASHWANT, MD†
Provider ID: N/A

520 N COAST HWY STE 103
OCEANSIDE, CA 92054
Effective as of 01-AUG-22

CHAUDHRI, YASHWANT, MD†
Provider ID: N/A

520 N COAST HWY STE 103
OCEANSIDE, CA 92054
Effective as of 01-AUG-22

CHRISTIANSON, WARREN, DO
Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO
Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO
Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO
Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO
Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO
Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-AUG-21

PATEL, MITESH, MD
Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

PATEL, MITESH, MD
Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

PATEL, MITESH, MD
Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

PATEL, MITESH, MD
Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

PATEL, MITESH, MD
Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

PATEL, MITESH, MD
Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Teleservice

Effective as of 01-JAN-24

PULMONARY DISEASES

CORONA, FRANK, MD
Provider ID: N/A

3231 WARING CT STE D
OCEANSIDE, CA 92056
Effective as of 01-JUN-99

CORONA, FRANK, MD
Provider ID: N/A

3907 WARING RD STE 2
OCEANSIDE, CA 92056
Effective as of 01-AUG-23

VISEROI, MARIUS, MD†
Provider ID: N/A

3231 WARING CT STE D
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

YAMANAKA, MARK, MD
Provider ID: N/A

3907 WARING RD STE 2
OCEANSIDE, CA 92056
Effective as of 01-AUG-23

RADIATION ONCOLOGY

HOOPES, DAVID, MD
Provider ID: N/A

4002 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

RASH, DOMINIQUE, MD
Provider ID: N/A

4002 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

URBANIC, JAMES, MD
Provider ID: N/A

4002 VISTA WAY

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

OCEANSIDE, CA 92056
Effective as of 01-DEC-23

REGISTERED PHYSICAL THERAPIST

AMBROSE, CHRISTOPHER, PT

Provider ID: N/A

 467 COLLEGE BLVD STE 6
OCEANSIDE, CA 92057

Effective as of 01-DEC-21

BOUCHARD, REID, PT

Provider ID: N/A

 3905 WARING RD
OCEANSIDE, CA 92056

Effective as of 01-OCT-21

DOULL, MATTHEW, PT

Provider ID: N/A


 3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-JUN-23

FARRAR, COURTNEY, PT†

Provider ID: N/A

 3231 WARING CT STE K
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-JAN-23

FARRAR, COURTNEY, PT†

Provider ID: N/A


 3231 WARING CT STE K
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-JAN-23

GARBER, MARC, PT

Provider ID: N/A

 3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-OCT-21

LANGIS, TANYA, PT

Provider ID: N/A


 3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-OCT-21

MCGEE, JACQUELINE, PT


Provider ID: N/A

 467 COLLEGE BLVD STE 6
OCEANSIDE, CA 92057

Effective as of 01-DEC-21

OSORIO, SANTIAGO, PT

Provider ID: N/A

 2424 VISTA WAY STE 120
OCEANSIDE, CA 92054

Effective as of 01-SEP-22

PENNINGTON, JENNIFER, PT

Provider ID: N/A

 3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-OCT-21

TAMAYO, SYDNIE, PT

Provider ID: N/A

 3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-OCT-23

WILSON, JENNIFER, PT

Provider ID: N/A

 3905 WARING RD
OCEANSIDE, CA 92056


Teleservice

Effective as of 01-OCT-21

RHEUMATOLOGY

BEJKO, ETELEVA, MD

Provider ID: N/A

 3998 VISTA WAY STE E
OCEANSIDE, CA 92056
Effective as of 01-JAN-24

BRION, PAUL, MD

Provider ID: N/A

 3998 VISTA WAY STE E
OCEANSIDE, CA 92056

Effective as of 01-FEB-24

BRION, PAUL, MD

Provider ID: N/A


 3998 VISTA WAY STE E
OCEANSIDE, CA 92056

Effective as of 01-JUL-24

SURGERY COLON SURGERY

NASSERY, KRISTEN, MD†


Provider ID: N/A

 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-JUL-24

NASSERY, KRISTEN, MD†


Provider ID: N/A

 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-AUG-24

NASSERY, KRISTEN, MD†


Provider ID: N/A

 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-JAN-21

NASSERY, KRISTEN, MD†

Provider ID: N/A

 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-SEP-21

SURGERY GENERAL

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

DEEMER, ANDREW, MD†

Provider ID: N/A

📄 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

DEEMER, ANDREW, MD†

Provider ID: N/A

📄 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-JUL-24

DEEMER, ANDREW, MD†

Provider ID: N/A

📄 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

JAMSHIDI-NEZHAD,

MOHAMMAD, DO

Provider ID: N/A

📄 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-AUG-24

JAMSHIDI-NEZHAD,

MOHAMMAD, DO

Provider ID: N/A

📄 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-JUL-24

JAMSHIDI-NEZHAD,

MOHAMMAD, DO

Provider ID: N/A

📄 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SEIDEN, GRANT, MD†

Provider ID: N/A

📄 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice

Effective as of 01-SEP-21

WAKILY, HUSSNA, MD†

Provider ID: N/A

📄 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-AUG-24

WAKILY, HUSSNA, MD†

Provider ID: N/A

📄 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

WAKILY, HUSSNA, MD†

Provider ID: N/A

📄 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

WAKILY, HUSSNA, MD†

Provider ID: N/A

📄 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-JUL-24

SURGERY HAND

DAUGHERTY, DAVID, MD†

Provider ID: N/A

📄 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

HARTMAN, ANDREW, MD†

Provider ID: N/A

📄 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

SEIDEN, GRANT, MD†

Provider ID: N/A

📄 3905 WARING RD

OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

SURGERY ORTHOPEDIC

AMORY, DAVID, MD†

Provider ID: N/A

📄 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

DAUGHERTY, DAVID, MD†

Provider ID: N/A

📄 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

KANE, NORMAN, MD†

Provider ID: N/A

📄 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

KANE, NORMAN, MD†

Provider ID: N/A

📄 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

STARK, ERIK, MD†

Provider ID: N/A

📄 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

SURGERY THORACIC

WU, DARRELL, MD†

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

Provider ID: N/A

3156 VISTA WAY STE 100
OCEANSIDE, CA 92056
Effective as of 01-JUL-21

UROLOGY

BOONJINDASUP, AARON, MD

Provider ID: N/A

3907 WARING RD STE 4
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

FRASIER, BRADLEY, MD†

Provider ID: N/A

3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

FRASIER, BRADLEY, MD†

Provider ID: N/A

3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

FRASIER, BRADLEY, MD†

Provider ID: N/A

3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUN-99

GUERENA, MICHAEL, MD†

Provider ID: N/A

3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

GUERENA, MICHAEL, MD†

Provider ID: N/A

3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUN-99

GUERENA, MICHAEL, MD†

Provider ID: N/A

3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

PHILLIPS, JASON, MD†

Provider ID: N/A

3907 WARING RD STE 4
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SHAPIRO, ROBERT, MD

Provider ID: N/A

3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-23

VILCHIS, CAROLINE, MD†

Provider ID: N/A

3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-DEC-13

VILCHIS, CAROLINE, MD†

Provider ID: N/A

3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

VILCHIS, CAROLINE, MD†

Provider ID: N/A

3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

CERTIFIED NURSE PRACTITIONER

ADDU, BELINDA, NP†

Provider ID: N/A

524 W 4TH ST STE B
PERRIS, CA 92570
Effective as of 01-OCT-22

CHIROPRACTOR

SCHRIEFER, NOAH, DC

Provider ID: N/A

1675 N PERRIS BLVD STE G1
PERRIS, CA 92571
Effective as of 01-MAY-24

TRAINER, JASON, DC†

Provider ID: N/A

1675 N PERRIS BLVD STE G1
PERRIS, CA 92571
Effective as of 01-JUL-22

NEUROLOGY CHILD

ARCA, CHRIS, MD

Provider ID: N/A

215 W 4TH ST
PERRIS, CA 92570
Effective as of 01-NOV-23

PEDIATRICS

LEE, ALAN, MD†

Provider ID: N/A

215 W 4TH ST
PERRIS, CA 92570*
Effective as of 01-AUG-20

LEE, ALAN, MD†

Provider ID: N/A

215 W 4TH ST
PERRIS, CA 92570*
Effective as of 01-AUG-20

PREVENTATIVE MEDICINE GENERAL

LAFONTANT, JEAN, MD†

Provider ID: N/A

524 W 4TH ST STE B
PERRIS, CA 92570
Effective as of 01-JAN-21

LAFONTANT, JEAN, MD†

Provider ID: N/A

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

524 W 4TH ST STE B
PERRIS, CA 92570
Effective as of 01-SEP-22

LAFONTANT, JEAN, MD†
Provider ID: N/A

524 W 4TH ST STE B
PERRIS, CA 92570
Effective as of 01-SEP-22

LAFONTANT, JEAN, MD†
Provider ID: N/A

524 W 4TH ST STE B
PERRIS, CA 92570
Effective as of 01-MAY-24

ADDICTIVE MEDICINE

GILL, MANPREET, MD
Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064
Effective as of 01-JUN-24

ANESTHESIOLOGY

PRASAD, RUPA, MD†
Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064
Teleservice
Effective as of 01-NOV-23

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY, MD
Provider ID: N/A

15725 POMERADO RD STE
201
POWAY, CA 92064
Effective as of 01-JUL-24

BROWNLOW, ROY, MD

Provider ID: N/A

15725 POMERADO RD STE
201
POWAY, CA 92064
Effective as of 01-JUL-24

COHEN, ZACHARY, MD†
Provider ID: N/A

15725 POMERADO RD STE
210
POWAY, CA 92064
Effective as of 01-JAN-24

COHEN, ZACHARY, MD
Provider ID: N/A

15725 POMERADO RD STE
201
POWAY, CA 92064
Effective as of 01-JAN-23

FISHER, CASEY, MD
Provider ID: N/A

15725 POMERADO RD STE
210
POWAY, CA 92064
Effective as of 01-APR-24

FISHER, CASEY, MD
Provider ID: N/A

15725 POMERADO RD STE
201
POWAY, CA 92064
Effective as of 01-APR-23

PRASAD, RUPA, MD†
Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064
Teleservice
Effective as of 01-NOV-21

CARDIOVASCULAR DISEASE

NANAVATI, VIMAL, MD
Provider ID: N/A

15706 POMERADO RD STE
104
POWAY, CA 92064
Effective as of 01-FEB-23

SHEREV, DIMITRI, MD
Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064
Effective as of 01-SEP-23

ZAKOV, KAMEN, MD†
Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

CERTIFIED NURSE PRACTITIONER

BISHOP, LESLIE, NP†
Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064
Teleservice
Effective as of 01-JAN-21

WILLIAMS, SHANTRICE, NP
Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064*
Effective as of 01-FEB-24

WRIGHT, KIMBERLY, NP†
Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-JAN-21

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

CLINICAL

NEUROPSYCHOLOGIST

KAUP, ALLISON, PhD†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-MAR-21

DERMATOLOGY

ARMSTRONG, PATRICK, MD

Provider ID: N/A

15721 POMERADO RD STE
300
POWAY, CA 92064

Effective as of 01-MAR-24

BROGAN, JACQUELINE, MD

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-FEB-24

CELANO, NICHOLAS, MD

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-JUL-24

CELANO, NICHOLAS, MD

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-JAN-24

CELANO, NICHOLAS, MD

Provider ID: N/A

15725 POMERADO RD STE

102
POWAY, CA 92064
Effective as of 01-NOV-23

CHIANG, JENNIFER, MD

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-JAN-24

GONZALEZ, JOSE, MD

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-FEB-24

JOU, PAUL, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064

Effective as of 01-SEP-22

LIN, SHINKO, MD

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-APR-24

LIN, SHINKO, MD

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-MAR-24

NELSON, AISLYN, MD

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-FEB-24

SATEESH, BROOKE, MD

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-JAN-24

TYAGI, ABHILASHA, MD

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-JAN-24

UEBELHOER, NATHAN, DO†

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-JAN-24

ENDOCRINOLOGY

METABOLISM DIABETES

SCHNEIDER, DARIUS, MD

Provider ID: N/A

15525 POMERADO RD STE
A1
POWAY, CA 92064

Effective as of 01-JAN-23

SCHNEIDER, DARIUS, MD

Provider ID: N/A

15525 POMERADO RD STE
A1
POWAY, CA 92064

Effective as of 01-DEC-22

FAMILY PRACTICE

FLINN, SCOTT, MD†

Provider ID: N/A

15611 POMERADO RD STE
400

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

POWAY, CA 92064
Effective as of 01-JAN-21

NAJAND, SADAF, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

PATEL, RAKESH, MD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064
Effective as of 01-AUG-24

WHITE, KERI, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

GASTROENTEROLOGY

ZAKKO, MARAM, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-JAN-21

INTERNAL MEDICINE

CHEN, ANDREW, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

MOOLANI, UJJALA, MD

Provider ID: N/A

15708 POMERADO RD STE
N-205

POWAY, CA 92064
Effective as of 01-MAY-23

REDDY, SMITHA, MD†

Provider ID: N/A

15725 POMERADO RD STE
117
POWAY, CA 92064
Effective as of 01-JAN-21

THAPER, MOHINDERPAL, MD†

Provider ID: N/A

15611 POMERADO RD STE
575
POWAY, CA 92064
Effective as of 01-JAN-21

INTERVENTIONAL CARDIOLOGY

BAYAT, HAMED, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

MULVIHILL, DANIEL, MD†

Provider ID: N/A

15611 POMERADO RD FL 4
POWAY, CA 92064
Effective as of 01-SEP-22

VANICHSARN, CHRISTOPHER, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-MAR-24

LICENSED CLINICAL SOCIAL WORKER

BELINSKY, MARIA, LCSW

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064*
Effective as of 01-FEB-24

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064
Effective as of 01-MAY-23

BOISKIN, MARK, MD

Provider ID: N/A

15644 POMERADO RD STE
104
POWAY, CA 92064
Effective as of 01-JAN-24

BOISKIN, MARK, MD†

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064
Effective as of 01-JAN-21

BOISKIN, MARK, MD†

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064
Effective as of 01-JUL-22

BOISKIN, MARK, MD†

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064
Effective as of 01-JAN-16

GREENSTEIN, JOSHUA, MD†

Provider ID: N/A

15708 POMERADO RD STE

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

N-205
POWAY, CA 92064
Effective as of 01-JUL-22

NEYAZ, MOHAMMED, DO

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064
Effective as of 01-NOV-23

NEUROLOGY

DELANEY, MICHAEL, MD†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064
Teleservice
Effective as of 01-JAN-21

DELANEY, MICHAEL, MD

Provider ID: N/A

15611 POMERADO RD STE
580
POWAY, CA 92064
Teleservice
Effective as of 01-JUN-24

FARNSWORTH, WILLIAM, MD

Provider ID: N/A

15611 POMERADO RD STE
580
POWAY, CA 92064*
Effective as of 01-SEP-24

FARNSWORTH, WILLIAM, MD

Provider ID: N/A

15611 POMERADO RD STE
580
POWAY, CA 92064
Effective as of 01-JUN-24

FARNSWORTH, WILLIAM, MD

Provider ID: N/A

15611 POMERADO RD STE
580
POWAY, CA 92064
Effective as of 01-JUN-24

HO, GILBERT, MD

Provider ID: N/A

15708 POMERADO RD STE
N103
POWAY, CA 92064*
Effective as of 01-OCT-23

LUHAR, RIYA, DO

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064
Teleservice
Effective as of 01-JAN-23

LUHAR, RIYA, DO

Provider ID: N/A

15611 POMERADO RD STE
580
POWAY, CA 92064
Effective as of 01-JUN-24

SAVANI, AMAN, MD

Provider ID: N/A

15611 POMERADO RD STE
580
POWAY, CA 92064
Effective as of 01-JUN-24

WANG, ANCHI, MD†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064
Effective as of 01-JAN-21

WANG, CHUNYANG, MD†

Provider ID: N/A

15611 POMERADO RD STE
505

POWAY, CA 92064
Teleservice
Effective as of 01-JAN-24

WANG, CHUNYANG, MD†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064
Teleservice
Effective as of 01-NOV-23

WANG, CHUNYANG, MD

Provider ID: N/A

15611 POMERADO RD STE
580
POWAY, CA 92064
Effective as of 01-MAY-24

OBSTETRICS / GYNECOLOGY

FAN, LI, MD†

Provider ID: N/A

15525 POMERADO RD STE
C1
POWAY, CA 92064*
Effective as of 01-NOV-21

OPHTHALMOLOGY

LOZIER, JEFFREY, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

OPTOMETRIST

KIM, MICHELLE, OD

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064

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

Effective as of 01-SEP-22

***PHYSICAL MEDICINE /
REHABILITATION***

BULLOCK, ANDREW, DO†

Provider ID: N/A

15644 POMERADO RD STE
204
POWAY, CA 92064

Effective as of 01-JAN-21

BULLOCK, ANDREW, DO†

Provider ID: N/A

15644 POMERADO RD STE
204
POWAY, CA 92064

Effective as of 01-JUL-22

BULLOCK, ANDREW, DO†

Provider ID: N/A

15644 POMERADO RD STE
204
POWAY, CA 92064

Effective as of 01-SEP-22

FISHER, CASEY, MD

Provider ID: N/A

15725 POMERADO RD STE
210
POWAY, CA 92064

Effective as of 01-JAN-21

TAHAEI, SEYED, MD†

Provider ID: N/A

15708 POMERADO RD STE
N-207
POWAY, CA 92064

Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

ASTOURIAN, PATRICK, PA†

Provider ID: N/A

15725 POMERADO RD STE

117

POWAY, CA 92064

Teleservice

Effective as of 01-SEP-22

CAMERON, KENDALL, PA

Provider ID: N/A

15725 POMERADO RD STE
117
POWAY, CA 92064

Teleservice

Effective as of 01-AUG-22

CHATFIELD, ALEXANDRA, PA†

Provider ID: N/A

15611 POMERADO RD STE
525
POWAY, CA 92064

Effective as of 01-FEB-21

GRINDLE, SILVIA, PA†

Provider ID: N/A

13525 MIDLAND RD STE F
POWAY, CA 92064

Effective as of 01-JAN-21

HUANG, STEPHANIE, PA†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064

Effective as of 01-JAN-21

RAHIM, ARIANNA, PA

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064

Effective as of 01-OCT-23

WEBB, SHANNON, PA

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064

Teleservice

Effective as of 01-MAY-23

PODIATRIST

BANKS, JAMINELLI, DPM†

Provider ID: N/A

15706 POMERADO RD STE
S-102
POWAY, CA 92064

Effective as of 01-SEP-22

CHU, ANDREW, DPM†

Provider ID: N/A

15706 POMERADO RD STE
S-102
POWAY, CA 92064

Effective as of 01-SEP-22

CHU, ANDREW, DPM†

Provider ID: N/A

15706 POMERADO RD STE
S-102
POWAY, CA 92064

Effective as of 01-NOV-21

HAN, KYOUNG, DPM

Provider ID: N/A

15706 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-NOV-21

NEGRON, RICARDO, DPM

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064*

Effective as of 01-JAN-21

READ, TRENTON, DPM

Provider ID: N/A

15706 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-APR-23

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

SMITH, COLLIN, DPM†

Provider ID: N/A

15706 POMERADO RD STE
S102
POWAY, CA 92064
Effective as of 01-FEB-21

SMITH, COLLIN, DPM†

Provider ID: N/A

15706 POMERADO RD STE
S102
POWAY, CA 92064
Effective as of 01-SEP-22

SMITH, COLLIN, DPM†

Provider ID: N/A

15706 POMERADO RD STE
S102
POWAY, CA 92064
Effective as of 01-DEC-21

PSYCHIATRY

ANDERSEN, CLAIRE, MD

Provider ID: N/A

13020 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-21

ANDERSEN, CLAIRE, MD

Provider ID: N/A

13020 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-21

MODHWADIA, MAMTA, MD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064
Effective as of 01-FEB-24

MODHWADIA, MAMTA, MD

Provider ID: N/A

13010 POWAY RD

POWAY, CA 92064
Effective as of 01-FEB-24

PEDERSEN, SUESAN, MD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064
Effective as of 01-AUG-22

PEDERSEN, SUESAN, MD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064
Effective as of 01-AUG-22

POSTLETHWAITE, ALEJANDRA, MD†

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-24

POSTLETHWAITE, ALEJANDRA, MD†

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-24

PSYCHIATRY CHILD

ANDERSEN, CLAIRE, MD

Provider ID: N/A

13020 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-21

ANDERSEN, CLAIRE, MD

Provider ID: N/A

13020 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-21

PSYCHOLOGIST

KAUP, ALLISON, PhD†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064
Teleservice
Effective as of 01-NOV-23

KAUP, ALLISON, PhD

Provider ID: N/A

15611 POMERADO RD STE
580
POWAY, CA 92064
Effective as of 01-JUN-24

KAUP, ALLISON, PhD†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064
Teleservice
Effective as of 01-NOV-23

KAUP, ALLISON, PhD

Provider ID: N/A

15611 POMERADO RD STE
580
POWAY, CA 92064
Effective as of 01-JUN-24

MEJIAS, JUAN, PhD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-24

MEJIAS, JUAN, PhD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-24

VALLEZ-BARLAM, ANDREA, PhD

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

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-24

VALLEZ-BARLAM, ANDREA, PhD

Provider ID: N/A
13010 POWAY RD
POWAY, CA 92064
Effective as of 01-DEC-23

VALLEZ-BARLAM, ANDREA, PhD

Provider ID: N/A
13010 POWAY RD
POWAY, CA 92064
Effective as of 01-DEC-23

VALLEZ-BARLAM, ANDREA, PhD

Provider ID: N/A
13010 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-24

RHEUMATOLOGY

RAO, SOUMYA, MD†

Provider ID: N/A
15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

REDDY, SMITHA, MD

Provider ID: N/A
15525 POMERADO RD STE
E6
POWAY, CA 92064
Effective as of 01-JUL-24

REDDY, SMITHA, MD

Provider ID: N/A

15525 POMERADO RD STE
E6
POWAY, CA 92064
Effective as of 01-JUL-24

REDDY, SMITHA, MD†

Provider ID: N/A
15725 POMERADO RD STE
117
POWAY, CA 92064
Effective as of 01-SEP-22

REDDY, SMITHA, MD

Provider ID: N/A
15525 POMERADO RD STE
E6
POWAY, CA 92064
Effective as of 01-JUL-24

SLEEP MEDICINE

MASHAYEKHI, PEGAH, DO

Provider ID: N/A
15611 POMERADO RD STE
300
POWAY, CA 92064*
Effective as of 01-SEP-24

SURGERY ORTHOPEDIC

BALIKIAN, PHILIP, MD†

Provider ID: N/A
15611 POMERADO RD STE
400
POWAY, CA 92064
Teleservice
Effective as of 01-JAN-21

BRIED, JAMES, MD†

Provider ID: N/A
15611 POMERADO RD STE
525
POWAY, CA 92064
Effective as of 01-SEP-22

COHEN, BRAD, MD†

Provider ID: N/A
15611 POMERADO RD STE
525
POWAY, CA 92064
Effective as of 01-SEP-22

UROLOGY

ANTHONY, JULIAN, MD

Provider ID: N/A
15611 POMERADO RD FL 4
POWAY, CA 92064
Effective as of 01-MAR-24

PE, MARK-RALLY, MD†

Provider ID: N/A
12630 MONTE VISTA RD
STE 103
POWAY, CA 92064
Effective as of 01-SEP-22

CHIROPRACTOR

JIMENEZ, CLARIBEL, DC

Provider ID: N/A
220 ROTANZI ST
RAMONA, CA 92065
Effective as of 01-JUL-24

FAMILY PRACTICE

HARDISON, CHARLES, MD†

Provider ID: N/A
211 13TH ST
RAMONA, CA 92065*
Effective as of 01-SEP-22

WELLS, TODD, MD

Provider ID: N/A
211 13TH ST
RAMONA, CA 92065
Effective as of 01-JUN-23

PEDIATRICS

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

YUNG, DORIS, MD†

Provider ID: N/A

220 ROTANZI ST
RAMONA, CA 92065
Effective as of 01-DEC-18

**REGISTERED PHYSICAL
THERAPIST**

BOUTELLE, DAVID, PT

Provider ID: N/A

850 MAIN ST STE 105
RAMONA, CA 92065
Effective as of 01-FEB-24

BOUTELLE, BARBARA, PT

Provider ID: N/A

850 MAIN ST STE 105
RAMONA, CA 92065
Effective as of 01-FEB-24

CHIROPRACTOR

PIERSON, MICHAEL, DC

Provider ID: N/A

22411 ANTONIO PKWY STE
C215
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-18

DERMATOLOGY

DICESARE, DANIEL, MD

Provider ID: N/A

22032 EL PASEO STE 150
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-NOV-19

DICESARE, DANIEL, MD

Provider ID: N/A

22032 EL PASEO STE 150
RANCHO SANTA

MARGARITA, CA 92688

Effective as of 01-NOV-19

GUIDE, SHIREEN, MD†

Provider ID: N/A

29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-AUG-12

GUIDE, SHIREEN, MD†

Provider ID: N/A

29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-AUG-12

GUIDE, SHIREEN, MD†

Provider ID: N/A

29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-16

GUIDE, SHIREEN, MD†

Provider ID: N/A

29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-AUG-12

GUIDE, SHIREEN, MD†

Provider ID: N/A

29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-17

GUIDE, SHIREEN, MD†

Provider ID: N/A

29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-JAN-16

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-OCT-23

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-NOV-21

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JUL-21

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-MAR-19

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-NOV-21

LEVIN, JACQUELINE, DO†

Provider ID: N/A


22032 EL PASEO STE 220
RANCHO SANTA

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

MARGARITA, CA 92688
Effective as of 01-JAN-23


LEVIN, JACQUELINE, DO†

Provider ID: N/A

 22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JUN-18

SHIELL, RONALD, MD†

Provider ID: N/A


 22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688

Teleservice

Effective as of 01-JAN-17

SHIELL, RONALD, MD†

Provider ID: N/A


 22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688

Teleservice

Effective as of 01-DEC-21

WANG, JAMES, MD†


Provider ID: N/A

 29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-SEP-19

WANG, JAMES, MD†

Provider ID: N/A

 29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-SEP-19

WANG, JAMES, MD†


Provider ID: N/A

 29833 SANTA MARGARITA

PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-SEP-19

WANG, JAMES, MD†


Provider ID: N/A

 29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-SEP-19

WANG, JAMES, MD†


Provider ID: N/A

 29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-SEP-19

WANG, JAMES, MD†


Provider ID: N/A

 29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-APR-20

WANG, JAMES, MD†

Provider ID: N/A


 29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-JUL-18

ENDOCRINOLOGY METABOLISM DIABETES

HAMIDI, AFSHIN, MD


Provider ID: N/A

 30511 AVENIDA DE LAS
FLORES
1064

RANCHO SANTA
MARGARITA, CA 92688
Teleservice
Effective as of 01-SEP-23

HAMIDI, AFSHIN, MD

Provider ID: N/A

 30511 AVENIDA DE LAS
FLORES
1064
RANCHO SANTA
MARGARITA, CA 92688


Teleservice

Effective as of 01-SEP-23

INTERNAL MEDICINE

GORE, GWENDOLYN, MD†


Provider ID: N/A

 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688*

Effective as of 01-FEB-13

GORE, GWENDOLYN, MD†

Provider ID: N/A


 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688*

Effective as of 01-MAY-12

PHYSICIANS ASSISTANT

KANE, KARA, PA†

Provider ID: N/A

 22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-OCT-22

PODIATRIST

ANGAROLA, JEFF, DPM

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

Provider ID: N/A

29472 AVENIDA DE LAS BANDERA
RANCHO SANTA MARGARITA, CA 92688
Effective as of 01-JAN-22

ANGAROLA, JEFF, DPM

Provider ID: N/A

29472 AVENIDA DE LAS BANDERA
RANCHO SANTA MARGARITA, CA 92688
Effective as of 01-APR-11

ANGAROLA, JEFF, DPM

Provider ID: N/A

29472 AVENIDA DE LAS BANDERA
RANCHO SANTA MARGARITA, CA 92688
Effective as of 01-JAN-22

ANGAROLA, JEFF, DPM

Provider ID: N/A

29472 AVENIDA DE LAS BANDERA
RANCHO SANTA MARGARITA, CA 92688
Effective as of 01-MAY-12

ANGAROLA, JEFF, DPM

Provider ID: N/A

29472 AVENIDA DE LAS BANDERA
RANCHO SANTA MARGARITA, CA 92688
Effective as of 01-MAY-12

ANESTHESIOLOGY PAIN MANAGEMENT

MAASUMI, KASRA, MD

Provider ID: N/A

30212 TOMAS STE 180

RANCHO STA MARG, CA 92688

Teleservice

Effective as of 01-FEB-24

MAASUMI, KASRA, MD

Provider ID: N/A

30212 TOMAS STE 180
RANCHO STA MARG, CA 92688

Teleservice

Effective as of 01-FEB-24

ALLERGY IMMUNOLOGY

DYER, MARC, MD

Provider ID: N/A

665 CAMINO DE LOS MARES STE 201
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-17

ANESTHESIOLOGY

GERAYLI, AFSHIN, MD†

Provider ID: N/A

647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

GERAYLI, AFSHIN, MD†

Provider ID: N/A

647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

ANESTHESIOLOGY PAIN MANAGEMENT

BETTS, ANDRES, MD†

Provider ID: N/A

665 CAMINO DE LOS MARES STE 202

SAN CLEMENTE, CA 92673
Effective as of 01-SEP-16

BETTS, ANDRES, MD†

Provider ID: N/A

665 CAMINO DE LOS MARES STE 202
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-16

GERAYLI, AFSHIN, MD†

Provider ID: N/A

647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-19

GERAYLI, AFSHIN, MD†

Provider ID: N/A

647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-23

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

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

647 CAMINO DE LOS
MARES STE 223
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-20

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

647 CAMINO DE LOS
MARES STE 223
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-20

**CARDIAC
ELECTROPHYSIOLOGY**

DRURY, PAUL, MD†

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-24

DRURY, PAUL, MD†

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-24

**CARDIOVASCULAR
DISEASE**

KUO, ALLEN, MD†

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-FEB-23

**CERTIFIED NURSE
PRACTITIONER**

PARK, SE, NP

Provider ID: N/A

3553 CAMINO MIRA COSTA

STE A
SAN CLEMENTE, CA 92672
Effective as of 01-JUL-23

POLIZZI, BRITTANY, NP†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-22

WONG, KRISTLE, NP

Provider ID: N/A

1031 AVENIDA PICO STE
203
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-23

CHIROPRACTOR

THOMPSON, RUSSELL, DC†

Provider ID: N/A

629 CAMINO DE LOS
MARES STE 104
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

DERMATOLOGY

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-22

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-19

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-23

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

FOREMAN, TANYA, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-21

FOREMAN, TANYA, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

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

Effective as of 01-JUL-21

FOREMAN, TANYA, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-18

FOREMAN, TANYA, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

GUIDE, SHIREEN, MD†

Provider ID: N/A

629 CAMINO DE LOS
MARES STE 105
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-16

GUIDE, SHIREEN, MD†

Provider ID: N/A

629 CAMINO DE LOS
MARES STE 105
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-16

GUIDE, SHIREEN, MD†

Provider ID: N/A

629 CAMINO DE LOS
MARES STE 105
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-17

NAKHLA, TONY, DO

Provider ID: N/A

224 AVENIDA DEL MAR STE
B
SAN CLEMENTE, CA 92672

Effective as of 01-AUG-17

NAKHLA, TONY, DO

Provider ID: N/A

224 AVENIDA DEL MAR STE
B
SAN CLEMENTE, CA 92672

Effective as of 01-MAY-18

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-MAR-23

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-NOV-18

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-NOV-18

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-JUN-24

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-20

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150

SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-18

SHIELL, RONALD, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Teleservice

Effective as of 01-OCT-23

SHIELL, RONALD, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-17

SHIELL, RONALD, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Teleservice

Effective as of 01-SEP-18

SHIELL, RONALD, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Teleservice

Effective as of 01-DEC-21

SHIELL, RONALD, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150

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

SAN CLEMENTE, CA 92673
Teleservice
Effective as of 01-MAR-19

EMERGENCY MEDICINE

KENNEDY, GREGORY, MD†

Provider ID: N/A
1300 AVENIDA VISTA
HERMOSA STE 200
SAN CLEMENTE, CA 92673
Effective as of 01-MAY-24

GASTROENTEROLOGY

GUJRAL, NAVJYOT, MD†

Provider ID: N/A
655 CAMINO LOS MARES
123
SAN CLEMENTE, CA 92673
Effective as of 01-APR-11

GUJRAL, NAVJYOT, MD†

Provider ID: N/A
655 CAMINO LOS MARES
123
SAN CLEMENTE, CA 92673
Effective as of 01-MAY-12

HASSANEIN, TAREK, MD†

Provider ID: N/A
675 CAMINO DE LOS
MARES STE 301
SAN CLEMENTE, CA 92673
Effective as of 01-MAY-22

HASSANEIN, TAREK, MD†

Provider ID: N/A
675 CAMINO DE LOS
MARES STE 301
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

HASSANEIN, TAREK, MD†

Provider ID: N/A

675 CAMINO LOS MARES
210
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

ROSSARO, LORENZO, MD†

Provider ID: N/A
675 CAMINO DE LOS
MARES STE 210
SAN CLEMENTE, CA 92673
Effective as of 01-JUN-21

ROSSARO, LORENZO, MD†

Provider ID: N/A
675 CAMINO DE LOS
MARES STE 301
SAN CLEMENTE, CA 92673
Effective as of 01-MAY-22

INTERVENTIONAL CARDIOLOGY

DRURY, PAUL, MD†

Provider ID: N/A
724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-23

DRURY, PAUL, MD†

Provider ID: N/A
724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-23

DRURY, PAUL, MD†

Provider ID: N/A
724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-23

DRURY, PAUL, MD†

Provider ID: N/A
724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-SEP-19

DRURY, PAUL, MD†

Provider ID: N/A
724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-FEB-23

KUO, ALLEN, MD†

Provider ID: N/A
724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-SEP-20

KUO, ALLEN, MD†

Provider ID: N/A
724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-SEP-20

KUO, ALLEN, MD†

Provider ID: N/A
724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-SEP-20

VAN, HO HAI, MD†

Provider ID: N/A
724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-DEC-21

VAN, HO HAI, MD†

Provider ID: N/A
724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-FEB-23


VAN, HO HAI, MD†

Provider ID: N/A
724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-DEC-21

VAN, HO HAI, MD†

Provider ID: N/A


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

 724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-DEC-21

NEUROLOGY


PATEL, HITESH, MD†

Provider ID: N/A

 638 CAMINO DE LOS
MARES STE D4
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21


PATEL, HITESH, MD†

Provider ID: N/A

 638 CAMINO DE LOS
MARES STE D4
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

PATEL, HITESH, MD†


Provider ID: N/A

 638 CAMINO DE LOS
MARES STE D4
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

**OBSTETRICS /
GYNECOLOGY**


BAILEY, THOMAS, MD†

Provider ID: N/A

 665 CAMINO LOS MARES
303
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-18


BAILEY, THOMAS, MD†

Provider ID: N/A

 665 CAMINO LOS MARES
303
SAN CLEMENTE, CA 92672
Effective as of 01-MAR-01


JOHNSON, SUSAN, MD†

Provider ID: N/A

 1031 AVENIDA PICO STE
204
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-22


JOHNSON, SUSAN, MD†

Provider ID: N/A

 1031 AVENIDA PICO STE
204
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-20


JOHNSON, SUSAN, MD†

Provider ID: N/A

 1031 AVENIDA PICO STE
204
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-22


PRIESTLEY, ANGELIKA, MD

Provider ID: N/A

 1031 AVENIDA PICO STE
204
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-22


RAMIREZ, SARA, MD†

Provider ID: N/A

 665 CAMINO DE LOS
MARES
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-10


RAMIREZ, SARA, MD†

Provider ID: N/A

 665 CAMINO DE LOS
MARES
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

SALCIDO, CRAIG, MD†


Provider ID: N/A

 665 CAMINO DE LOS
MARES STE 303A

SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

SALCIDO, CRAIG, MD†


Provider ID: N/A

 665 CAMINO DE LOS
MARES STE 303A
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

OPHTHALMOLOGY


AHMAD, ASHRAF, MD†

Provider ID: N/A

 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23


AHMAD, ASHRAF, MD†

Provider ID: N/A

 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-22


BANUELOS, LYDIA, MD

Provider ID: N/A

 653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-FEB-23


BANUELOS, LYDIA, MD†

Provider ID: N/A

 653 CAMINO DE LOS
MARES STE 107
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-22

DHOOT, SONIA, MD†

Provider ID: N/A

 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-JAN-19

DHOOT, SONIA, MD†

Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-19

DHOOT, SONIA, MD†

Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-22

DHOOT, SONIA, MD†

Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

GUJRAL, SATVINDER, MD†

Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

GUJRAL, SATVINDER, MD†

Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-22

GWYNN, DAVID, MD

Provider ID: N/A

653 CAMINO DE LOS MARES STE 103
SAN CLEMENTE, CA 92673

Effective as of 01-FEB-23

GWYNN, DAVID, MD

Provider ID: N/A

653 CAMINO DE LOS MARES STE 103
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-24

GWYNN, DAVID, MD

Provider ID: N/A

653 CAMINO DE LOS MARES STE 103
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-24

GWYNN, DAVID, MD

Provider ID: N/A

653 CAMINO DE LOS MARES STE 103
SAN CLEMENTE, CA 92673

Effective as of 01-MAR-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-APR-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-APR-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

665 CAMINO DE LOS MARES STE 102

SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

665 CAMINO LOS MARES 102
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

665 CAMINO LOS MARES 102
SAN CLEMENTE, CA 92673

Effective as of 01-APR-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

665 CAMINO LOS MARES 102
SAN CLEMENTE, CA 92673

Effective as of 01-APR-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

665 CAMINO LOS MARES 102
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-22

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO LOS MARES 107
SAN CLEMENTE, CA 92673

Effective as of 01-APR-11

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO LOS MARES 107
SAN CLEMENTE, CA 92673

Effective as of 01-MAY-12

**C1. Lista de proveedores de la red
Médico de atención especializada**

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO LOS MARES
107
SAN CLEMENTE, CA 92673
Effective as of 01-MAR-23

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO LOS MARES
107
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-15

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-17

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-MAY-23

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-MAY-23

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO LOS MARES

107

SAN CLEMENTE, CA 92673
Effective as of 01-MAR-10

KELLER, CHARLES, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

KELLER, CHARLES, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

KERSTEN, DIANA, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-APR-23

KERSTEN, DIANA, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-APR-23

KERSTEN, DIANA, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

KIM, EDWARD, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

KIM, BRIAN, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

KIM, BRIAN, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

KIM, EDWARD, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-22

NOGUCHI, JONATHAN, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

ROUHANI, BEHNAZ, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

ROUHANI, BEHNAZ, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-22

SALEHI-HAD, HANI, MD†

Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

653 CAMINO DE LOS MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-JUN-21

SALEHI-HAD, HANI, MD†
Provider ID: N/A

653 CAMINO DE LOS MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-JUN-21

TAI, AUDREY, DO†
Provider ID: N/A

653 CAMINO DE LOS MARES STE 107
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-24

TAYANI, RAMIN, MD
Provider ID: N/A

653 CAMINO DE LOS MARES STE 107
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-24

TEYMOORIAN, SAVAK, MD†
Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

TEYMOORIAN, SAVAK, MD†
Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-22

WANG, YE, MD†
Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-NOV-19

WANG, YE, MD†
Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-19

OPTOMETRIST

CHOI-SIRITARATIWAT, ISABELL, OD†
Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

CHOI-SIRITARATIWAT, ISABELL, OD†
Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-JUN-19

CHOI-SIRITARATIWAT, ISABELL, OD†
Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

CHOI-SIRITARATIWAT, ISABELL, OD†
Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-JUN-19

LEIGHT, TERRA, OD†
Provider ID: N/A

685 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

LEIGHT, TERRA, OD†
Provider ID: N/A

685 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

MULICK, STEPHANIE, OD
Provider ID: N/A

653 CAMINO DE LOS MARES STE 107
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-24

NG, REBECCA, OD†
Provider ID: N/A

653 CAMINO LOS MARES 103
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-11

NG, REBECCA, OD
Provider ID: N/A

653 CAMINO DE LOS MARES STE 107
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-23

NG, REBECCA, OD†
Provider ID: N/A

653 CAMINO LOS MARES 103
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

STEFANIDIS, NICOLETTA, OD†
Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-SEP-22

STEFANIDIS, NICOLETTA, OD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

STEFANIDIS, NICOLETTA, OD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-FEB-18

STEFANIDIS, NICOLETTA, OD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-FEB-18

TERADA, SEIJU, OD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

TERADA, SEIJU, OD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-22

OTOLARYNGOLOGY

CROCKETT, DENNIS, MD†

Provider ID: N/A

675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673

Effective as of 01-JUL-19

CROCKETT, DENNIS, MD†

Provider ID: N/A

675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673

Effective as of 01-JUL-19

CROCKETT, DENNIS, MD†

Provider ID: N/A

675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-18

WELLS, PHILLIP, MD†

Provider ID: N/A

675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673

Effective as of 01-NOV-14

WELLS, PHILLIP, MD†

Provider ID: N/A

675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-18

WELLS, PHILLIP, MD†

Provider ID: N/A

675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-08

PEDIATRICS

DWINELL, LAUREN, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 200
SAN CLEMENTE, CA 92673

Effective as of 01-JUL-23

PHYSICIANS ASSISTANT

ESHOIEE, MIRIAM, PA†

Provider ID: N/A

224 AVENIDA DEL MAR STE
B
SAN CLEMENTE, CA 92672

Effective as of 01-AUG-20

MOHALE, SHARON, PA†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-18

NORMAN, STACY, PA

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-23

WANG, ALICE, PA

Provider ID: N/A

831 VIA SUERTE STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-FEB-24

PODIATRIST

HEHE, KYLE, DPM

Provider ID: N/A

665 CAMINO DE LOS
MARES
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-23

HEHE, KYLE, DPM

Provider ID: N/A

665 CAMINO DE LOS
MARES
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-23

LEAMING, ROBERT, DPM

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

655 CAMINO DE LOS MARES STE 120
SAN CLEMENTE, CA 92673

Teleservice

Effective as of 01-FEB-24

LEAMING, ROBERT, DPM

Provider ID: N/A

655 CAMINO DE LOS MARES STE 120
SAN CLEMENTE, CA 92673

Teleservice

Effective as of 01-FEB-24

SURGERY HAND

FRANKLIN, ADAM, MD

Provider ID: N/A

653 CAMINO DE LOS MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-APR-18

FRANKLIN, ADAM, MD

Provider ID: N/A

653 CAMINO DE LOS MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-APR-18

SURGERY

NEUROLOGICAL

PATEL, HITESH, MD†

Provider ID: N/A

638 CAMINO DE LOS MARES STE D4
SAN CLEMENTE, CA 92673

Effective as of 01-NOV-21

SURGERY ORTHOPEDIC

GIALAMAS, GUS, MD

Provider ID: N/A

653 CAMINO DE LOS MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-FEB-18

GIALAMAS, GUS, MD

Provider ID: N/A

653 CAMINO DE LOS MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-FEB-18

VAN DER REIS, WILLIAM, MD†

Provider ID: N/A

653 CAMINO DE LOS MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-MAY-12

VAN DER REIS, WILLIAM, MD†

Provider ID: N/A

653 CAMINO DE LOS MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-APR-11

UROLOGY

BUI, DON, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA STE A
SAN CLEMENTE, CA 92672

Effective as of 01-JAN-23

BUI, DON, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA STE A
SAN CLEMENTE, CA 92672

Effective as of 01-OCT-23

BUI, DON, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA

STE A

SAN CLEMENTE, CA 92672

Effective as of 01-DEC-23

ELKHOURY, FUAD, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA STE A
SAN CLEMENTE, CA 92672

Effective as of 01-OCT-23

HO, TAMMY, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA STE A
SAN CLEMENTE, CA 92672

Effective as of 01-OCT-23

KIM, MOSES, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA STE A
SAN CLEMENTE, CA 92672

Effective as of 01-OCT-23

KIM, MOSES, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA STE A
SAN CLEMENTE, CA 92672

Effective as of 01-JAN-23

MEAGLIA, JAMES, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA STE A
SAN CLEMENTE, CA 92672

Effective as of 01-JAN-23

MEAGLIA, JAMES, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA STE A
SAN CLEMENTE, CA 92672

Effective as of 01-OCT-23

**C1. Lista de proveedores de la red
Médico de atención especializada**

NAKAMURA, LEAH, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672

Effective as of 01-OCT-23

RANDALL, JOSH, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672

Effective as of 01-OCT-23

SINGH, KARAN, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672

Effective as of 01-OCT-23

SPITZ, AARON, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672

Effective as of 01-OCT-23

SU, DANIEL, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672

Effective as of 01-OCT-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672

Effective as of 01-OCT-23

ADDICTIVE MEDICINE

HEINRICI, ALEKA, MD

Provider ID: N/A

286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

Teleservice

Effective as of 01-APR-23

**SALGUERO GALLAND, MARIO
LUIS, MD**

Provider ID: N/A

4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

**SALGUERO GALLAND, MARIO
LUIS, MD**

Provider ID: N/A

4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

**SALGUERO GALLAND, MARIO
LUIS, MD**

Provider ID: N/A

4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

**SALGUERO GALLAND, MARIO
LUIS, MD†**

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-SEP-21

**SALGUERO GALLAND, MARIO
LUIS, MD**

Provider ID: N/A

4175 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

**ADVANCED HEART
FAILURE AND
TRANSPLANT
CARDIOLOGY**

HOAGLAND, PETER, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

JASKI, BRIAN, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-JAN-21

ALLERGY IMMUNOLOGY

ALKATIB, RHONDA, MD†

Provider ID: N/A

2655 CAMINO DEL RIO N
STE 425

SAN DIEGO, CA 92108

Effective as of 01-OCT-21

ALKATIB, RHONDA, MD†

Provider ID: N/A

2655 CAMINO DEL RIO N
STE 425

SAN DIEGO, CA 92108

Effective as of 01-APR-22

ALKATIB, RHONDA, MD†

Provider ID: N/A

2655 CAMINO DEL RIO N
STE 120

SAN DIEGO, CA 92108

Effective as of 01-SEP-22

C1. Lista de proveedores de la red Médico de atención especializada

COHEN, GARY, MD

Provider ID: N/A

9833 PACIFIC HEIGHTS
BLVD STE J
SAN DIEGO, CA 92121
Effective as of 01-OCT-95

COHEN, GARY, MD

Provider ID: N/A

9833 PACIFIC HEIGHTS
BLVD STE J
SAN DIEGO, CA 92121
Effective as of 01-FEB-07

KIM, ALEXANDER, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

MERCANDETTI, ALEX, MD†

Provider ID: N/A

3965 5TH AVE STE 430
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-NOV-20

OSTROM, NANCY, MD†

Provider ID: N/A

5776 RUFFIN RD
SAN DIEGO, CA 92123
Effective as of 01-JAN-13

SHARMA, KUSUM, MD

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131
Effective as of 01-JAN-23

SHARMA, KUSUM, MD

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Effective as of 01-JAN-21

SHARMA, KUSUM, MD

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131
Effective as of 01-SEP-15

ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

CHIEN, SHELBY, MD†

Provider ID: N/A

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

DOBECKI, DOUGLAS, MD†

Provider ID: N/A

5395 RUFFIN RD STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-22

FILIPOVIC, MAYA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

FUNDINGSLAND, BRENT, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

GROVEY, BRITTANY, MD†

Provider ID: N/A

8901 ACTIVITY RD STE 100

SAN DIEGO, CA 92126
Effective as of 01-JAN-21

GROVEY, BRITTANY, MD†

Provider ID: N/A

8901 ACTIVITY RD STE 104
SAN DIEGO, CA 92126
Effective as of 01-APR-21

LEE, GEMAYEL, MD†

Provider ID: N/A

8901 ACTIVITY RD STE 100
SAN DIEGO, CA 92126
Effective as of 01-JAN-21

LEE, INSUN, MD

Provider ID: N/A

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-AUG-24

NARLA, VINOD, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

NGO, DONALD, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

PARDO, PATRICIA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

PARDO, PATRICIA, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

C1. Lista de proveedores de la red Médico de atención especializada

ROY, KEVIN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

SAHA, DEVJANI, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

SAHA, DEVJANI, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

SAID, ENGY, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-OCT-21

SAID, ENGY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

SUYDAM, STEVEN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

TOLIVER, KEVIN, MD

Provider ID: N/A

4060 4TH AVE STE 408
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

TULLY, JEFFREY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

TZENG, ERIC, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

VAN NOORD, BRANDON, MD†

Provider ID: N/A

3969 4TH AVE STE 208
SAN DIEGO, CA 92103
Effective as of 01-FEB-19

VAUGHN, DOUGLAS, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ANESTHESIOLOGY CRITICAL CARE MEDICINE

KRAUSE, MARTIN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY, MD

Provider ID: N/A

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-APR-24

CHISHOLM, CHRISTOPHER, MD

Provider ID: N/A

16466 BERNARDO CENTER
DR STE 150

SAN DIEGO, CA 92128
Effective as of 01-JUN-20

CHONG, TIMOTHY, MD†

Provider ID: N/A

16466 BERNARDO CENTER
DR STE 150
SAN DIEGO, CA 92128
Effective as of 01-SEP-17

COHEN, ZACHARY, MD

Provider ID: N/A

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

COHEN, ZACHARY, MD

Provider ID: N/A

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

DAIRO, BRANDON, MD†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice
Effective as of 01-NOV-22

GROVEY, BRITTANY, MD†

Provider ID: N/A

8901 ACTIVITY RD STE 104
SAN DIEGO, CA 92126
Effective as of 01-FEB-21

LEE, GEMAYEL, MD†

Provider ID: N/A

8901 ACTIVITY RD STE 104
SAN DIEGO, CA 92126
Effective as of 01-APR-21

LEE, GEMAYEL, MD†

Provider ID: N/A

8901 ACTIVITY RD STE 104
SAN DIEGO, CA 92126

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-FEB-21

LEE, INSUN, MD

Provider ID: N/A

📍 5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123

Effective as of 01-APR-24

RICHARDSON, HENRY, MD†

Provider ID: N/A

📍 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Effective as of 01-MAY-21

THOMPSON, SANDRA, MD†

Provider ID: N/A

📍 4033 3RD AVE STE 430
SAN DIEGO, CA 92103

Effective as of 01-DEC-22

VAN NOORD, BRANDON, MD†

Provider ID: N/A

📍 3969 4TH AVE STE 208
SAN DIEGO, CA 92103

Effective as of 01-FEB-19

VAN NOORD, BRANDON, MD†

Provider ID: N/A

📍 3969 4TH AVE STE 208
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

VAN NOORD, BRANDON, MD†

Provider ID: N/A

📍 3969 4TH AVE STE 208
SAN DIEGO, CA 92103

Effective as of 01-MAR-23

AUDIOLOGIST

BAXTER, STEPHANIE, AuD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

BAXTER, STEPHANIE, AuD

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

BAXTER, STEPHANIE, AuD

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

HARRIS, GENEVIEVE, AuD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

SERENO, EMILY, AuD

Provider ID: N/A

📍 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-JUL-24

SHASKY, GARY, AuD†

Provider ID: N/A

📍 9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

SILVERSTEIN, KAYLI, AuD

Provider ID: N/A

📍 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-APR-24

TSANG, JOYCE, AuD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

WILLIAMS, ALICIA, AuD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUL-21

CARDIAC

ELECTROPHYSIOLOGY

ATHILL, CHARLES, MD†

Provider ID: N/A

📍 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

CHOI, ANTHONY, MD

Provider ID: N/A

📍 3131 BERGER AVE
SAN DIEGO, CA 92123

Effective as of 01-OCT-23

KAGAN, CALVIN, MD

Provider ID: N/A

📍 501 WASHINGTON ST STE
512

SAN DIEGO, CA 92103

Effective as of 01-JUL-24

LERNER, JONATHAN, MD

Provider ID: N/A

📍 412 WASHINGTON ST
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

LERNER, JONATHAN, MD

Provider ID: N/A

📍 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JUL-23

MAI, TUAN, MD†

Provider ID: N/A

📍 501 WASHINGTON ST STE

C1. Lista de proveedores de la red Médico de atención especializada

512
SAN DIEGO, CA 92103
Effective as of 01-MAR-20

MAI, TUAN, MD†

Provider ID: N/A

☒ 501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

PATEL, JIGAR, DO†

Provider ID: N/A

☒ 4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-FEB-23

PATEL, JIGAR, DO†

Provider ID: N/A

☒ 4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-DEC-22

SHAH, ABHISHEK, MD

Provider ID: N/A

☒ 412 WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

☒ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-JAN-23

WADHWA, MANISH, MD†

Provider ID: N/A

☒ 501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

CARDIOVASCULAR DISEASE

ABELHAD, NADIA, MD

Provider ID: N/A

☒ 412 WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

ABELHAD, NADIA, MD

Provider ID: N/A

☒ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-JAN-24

BHATT, JIKEN, MD

Provider ID: N/A

☒ 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

CARAZO, MATTHEW, MD†

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

CARLSON, STEVEN, MD†

Provider ID: N/A

☒ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Teleservice

Effective as of 01-APR-21

CARLSON, STEVEN, MD†

Provider ID: N/A

☒ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Teleservice

Effective as of 01-JAN-21

CARLSON, STEVEN, MD†

Provider ID: N/A

☒ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Teleservice

Effective as of 01-SEP-22

CHUNG, KIYON, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-AUG-16

CHUNG, KIYON, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

COX, JUSTIN, MD†

Provider ID: N/A

☒ 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-SEP-21

COX, JUSTIN, MD†

Provider ID: N/A

☒ 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-MAY-24

DIGGS, THOMAS, MD†

Provider ID: N/A

☒ 501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-JAN-14

DO, HULBERT, MD

Provider ID: N/A

☒ 412 WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-OCT-23

DO, HULBERT, MD

Provider ID: N/A

☒ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-OCT-23

C1. Lista de proveedores de la red Médico de atención especializada

DURAN, EDWARD, MD

Provider ID: N/A

2131 3RD AVE
SAN DIEGO, CA 92101
Effective as of 01-DEC-23

DURAN, EDWARD, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

FRIEDMAN, RICHARD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

FRIEDMAN, RICHARD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JAN-14

GARIBYAN, VARTAN, DO†

Provider ID: N/A

4060 4TH AVE STE 500
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

GLASSMAN, JERROLD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-AUG-20

GLASSMAN, JERROLD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

3131 BERGER AVE STE 200

SAN DIEGO, CA 92123
Effective as of 01-NOV-23

HOURLANI, RAYAN, MD

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-FEB-23

KERAMATI, SHAHIN, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-MAY-11

KERAMATI, SHAHIN, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

KHAN, HASHIM, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-APR-21

KIMURA, BRUCE, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-MAY-11

LY, NANCY, MD†

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-JUN-23

LY, NANCY, MD†

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-NOV-23

LY, NANCY, MD†

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-JAN-21

MAI, TUAN, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

MEHTA, HIRSCH, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-SEP-22

MULLVAIN, JEFFRY, MD†

Provider ID: N/A

4060 4TH AVE STE 500
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

NANAVATI, VIMAL, MD

Provider ID: N/A

11939 RANCHO BERNARDO
RD STE 120
SAN DIEGO, CA 92128

Teleservice

Effective as of 01-AUG-24

C1. Lista de proveedores de la red Médico de atención especializada

NANAVATI, VIMAL, MD

Provider ID: N/A

11939 RANCHO BERNARDO
RD STE 120
SAN DIEGO, CA 92128

Teleservice

Effective as of 01-AUG-23

NANAVATI, VIMAL, MD†

Provider ID: N/A

16776 BERNARDO CENTER
DR STE 209
SAN DIEGO, CA 92128

Teleservice

Effective as of 01-FEB-23

NARAYANAN, MEENA, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-SEP-22

NARAYANAN, MEENA, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-APR-21

NARULA, ARVIN, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

NAYAK, KESHAV, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512

SAN DIEGO, CA 92103

Effective as of 01-JUL-23

NAYAK, KESHAV, MD†

Provider ID: N/A

501 WASHINGTON ST STE

512

SAN DIEGO, CA 92103

Effective as of 01-MAY-19

NGUYEN, TRI, MD†

Provider ID: N/A

4551 EL CAJON BLVD
SAN DIEGO, CA 92115

Teleservice

Effective as of 01-JAN-23

NISHIMURA-KAMINSKI, MARIN, MD

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-MAR-23

OMRAN, JAD, MD

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-FEB-23

PARIKH, MILIND, DO†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-SEP-22

PARIZO, JUSTIN, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-SEP-21

PATEL, JIGAR, DO

Provider ID: N/A

4060 FOURTH AVENUE,
STE 650
SAN DIEGO, CA 92103

Effective as of 01-MAR-24

PROHASKA, THOMAS, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

SALAMI, ALI, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512

SAN DIEGO, CA 92103

Effective as of 01-MAY-11

SARSAM, LUAY, MD

Provider ID: N/A

412 WASHINGTON ST
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JUL-23

SHAH, KULIN, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JAN-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-SEP-22

C1. Lista de proveedores de la red Médico de atención especializada

SHAH, KULIN, MD†

Provider ID: N/A

412 WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

SHEREV, DIMITRI, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-FEB-21

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

412 WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-JAN-23

WILLIAMS, JEFFREY, MD

Provider ID: N/A

4033 3RD AVE STE 204
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

ZAVARO, SUHAIL, MD

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-FEB-23

CERTIFIED

ACUPUNCTURIST

ARELLANO, JACQUELINE, LAC†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

4910 DIRECTORS PL
SAN DIEGO, CA 92121
Effective as of 01-FEB-24

ARELLANO, JACQUELINE, LAC†

Provider ID: N/A

9333 GENESEE AVE STE
200
SAN DIEGO, CA 92121
Effective as of 01-MAR-21

ARELLANO, JACQUELINE, LAC†

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Effective as of 01-MAR-21

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

CALLISON, YANHUI, LAC

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

CALLISON, YANHUI, LAC

Provider ID: N/A

4167 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-OCT-23

JULIAN, FIDES, LAC†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

JULIAN, FIDES, LAC

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

JULIAN, FIDES, LAC†

Provider ID: N/A

9333 GENESEE AVE STE
200
SAN DIEGO, CA 92121
Effective as of 01-MAR-21

JULIAN, FIDES, LAC†

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Effective as of 01-MAR-21

JULIAN, FIDES, LAC

Provider ID: N/A

4910 DIRECTORS PL
SAN DIEGO, CA 92121
Effective as of 01-FEB-24

LAM, KHANH, LAC†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice
Effective as of 01-NOV-22

LAM, KHANH, LAC†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

C1. Lista de proveedores de la red Médico de atención especializada

Teleservice

Effective as of 01-SEP-21

MURRAY, STEVEN, LAC

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-24

MURRAY, STEVEN, LAC†

Provider ID: N/A

9333 GENESEE AVE STE
220

SAN DIEGO, CA 92121
Effective as of 01-AUG-21

MURRAY, STEVEN, LAC†

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131
Effective as of 01-AUG-21

MURRAY, STEVEN, LAC

Provider ID: N/A

4910 DIRECTORS PL
SAN DIEGO, CA 92121

Effective as of 01-FEB-24

MURRAY, STEVEN, LAC†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-AUG-21

NOVAK, ERIKA, LAC

Provider ID: N/A

3282 GOVERNOR DR
SAN DIEGO, CA 92122

Teleservice

Effective as of 01-NOV-22

SEITZ, GRETCHEN, LAC

Provider ID: N/A

10737 CAMINO RUIZ STE

235

SAN DIEGO, CA 92126

Effective as of 01-JAN-21

SEITZ, GRETCHEN, LAC

Provider ID: N/A

9995 CARMEL MOUNTAIN
RD STE B10-B11

SAN DIEGO, CA 92129
Effective as of 01-JAN-21

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

4910 DIRECTORS PL
SAN DIEGO, CA 92121

Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC†

Provider ID: N/A

9333 GENESEE AVE
SAN DIEGO, CA 92121

Effective as of 01-DEC-21

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131
Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

TANG-RITCHIE, LENG, LAC†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

CERTIFIED NURSE PRACTITIONER

AGUILA, YESENIA, NP

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-FEB-24

ALSTEEN, STEPHANIE, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

AMOS, MARIA, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

ANTHONY, SHARON, NP†

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103*

Effective as of 01-DEC-21

ASHMAN, ELLEN, NP†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-AUG-22

ASHMAN, ELLEN, NP†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-AUG-22

ATILLO, RONALD MAR, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

BILOTTA, NATALIE, NP†

Provider ID: N/A

200 W ARBOR DR

C1. Lista de proveedores de la red Médico de atención especializada

SAN DIEGO, CA 92103
Effective as of 01-AUG-22

BINAVI, HOWNAZ, NP†

Provider ID: N/A

📍 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

BINAVI, HOWNAZ, NP†

Provider ID: N/A

📍 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

BROWN, VICTORIA, NP

Provider ID: N/A

📍 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

BROWN, VICTORIA, NP

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

BUI, ANH, NPF

Provider ID: N/A

📍 7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
Teleservice
Effective as of 01-NOV-23

BULLER, RIYAN, NPF

Provider ID: N/A

📍 9909 MIRA MESA BLVD
STE 110
SAN DIEGO, CA 92131
Teleservice
Effective as of 01-JUN-24

BULLER, RIYAN, NPF

Provider ID: N/A

📍 3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Teleservice
Effective as of 01-JUN-24

BURNEY, BRAEANNE, NP†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CALCUTT, SUZANNE, NP

Provider ID: N/A

📍 6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-JUN-24

CAMAQUIN, MIA, NP

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CAMARGO-LOWTHERS, ANGELICA, NP†

Provider ID: N/A

📍 8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

CAMARGO-LOWTHERS, ANGELICA, NP†

Provider ID: N/A

📍 8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

CAMARGO-LOWTHERS, ANGELICA, NP

Provider ID: N/A

📍 8010 FROST ST STE 100

SAN DIEGO, CA 92123
Effective as of 01-AUG-24

CAMARGO-LOWTHERS, ANGELICA, NP

Provider ID: N/A

📍 8010 FROST ST STE 220
SAN DIEGO, CA 92123
Effective as of 01-JUL-23

CAPORELLO, AMY, NPF

Provider ID: N/A

📍 555 W C ST STE 102
SAN DIEGO, CA 92101
Teleservice
Effective as of 01-JUN-24

CARDENAS, MIRIAM, NPF

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

CARDENAS, MIRIAM, NPF

Provider ID: N/A

📍 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

CASE, ERINN, NP

Provider ID: N/A

📍 3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Effective as of 01-JAN-21

CAVIRIS, DIONYSIA, NPF

Provider ID: N/A

📍 375 CAMINO DE LA REINA
STE C
SAN DIEGO, CA 92108
Teleservice

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JUN-24

CELESTIN-RAMSEY, AKANKE, NPF

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114

Teleservice

Effective as of 01-DEC-21

CHANTALA, ELIZABETH, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

CHAVEZ, ALEXANDRIA, NP†

Provider ID: N/A

4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121

Effective as of 01-AUG-22

CHEATHAM, BRITTANY, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

CHEN, KATIE, NP

Provider ID: N/A

4440 EUCLID AVE STE A
SAN DIEGO, CA 92115

Effective as of 01-MAR-24

CHOATE, BERNADETTE, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

CHOATE, BERNADETTE, NP†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Effective as of 01-DEC-21

CHRISMAN, JESSICA, NP

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Effective as of 01-MAR-24

CHUNG, SUEMIN, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-24

CHUNG, SUEMIN, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-AUG-24

CHUNG, SUEMIN, NP

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-AUG-24

COLEMAN, PAGE, NP

Provider ID: N/A

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Effective as of 01-FEB-24

CONNER, PAMELA, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

CONNOR, CAROLINE, NP†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JUN-21

CONNOR, CAROLINE, NP†

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130

Effective as of 01-JUN-21

CUTLER, APRYL, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-JAN-24

DE DIOS, SARAH JANE, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

DE LARA, KAROL JOHN, NP

Provider ID: N/A

4440 EUCLID AVE STE A
SAN DIEGO, CA 92115

Effective as of 01-MAR-24

DEL VECCHIO, MEGAN, NP

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-SEP-23

DEL VECCHIO, MEGAN, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-SEP-23

DHARKAR-SURBER, SAPNA, NP

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-OCT-23

DHARKAR-SURBER, SAPNA,

C1. Lista de proveedores de la red Médico de atención especializada

NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-OCT-23

DILLEN, REBECCA, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

DOAN, ANGELA, NP†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

DOAN, ANGELA, NP†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-AUG-22

DRISCOLL, KARRIE, NP†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Effective as of 01-DEC-21

DRISCOLL, SUSAN, NP

Provider ID: N/A

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

Effective as of 01-OCT-23

DWYER, ERIN, NP†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

DWYER, ERIN, NP†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-SEP-22

DWYER, ERIN, NP

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-FEB-24

DWYER, ERIN, NP

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Effective as of 01-JAN-24

DWYER, ERIN, NP

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Effective as of 01-FEB-24

EDNACOT, KARYNNE, NPF

Provider ID: N/A

8010 FROST ST STE 100
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-JUL-24

ERICKSON, LISA, NP†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

ERICKSON, LISA, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

FEIZI, SEDI, NP†

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 207

SAN DIEGO, CA 92102

Effective as of 01-JAN-21

FEROLIE, PAM, NP

Provider ID: N/A

375 CAMINO DE LA REINA
STE C

SAN DIEGO, CA 92108

Effective as of 01-DEC-23

FILIPPELLO, LAUREN, NPF

Provider ID: N/A

3863 CLAIREMONT DR
SAN DIEGO, CA 92117

Teleservice

Effective as of 01-OCT-23

GIORGI, ASHLEY, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

GIORGI, ASHLEY, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

GOMEZ, LESLIE, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

GOMEZ, LESLIE, NP

Provider ID: N/A

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Effective as of 01-MAY-23

C1. Lista de proveedores de la red Médico de atención especializada

GOMEZ, LESLIE, NP

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

GONZALEZ, LISA, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

GORDON, DANIELLE, NP†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

GROSS, KIMBERLY, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

GROSS, KIMBERLY, NP†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

HA, THU, NP

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

HA, THU, NP

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

HARVEY, DELFINA, NP

Provider ID: N/A

3490 PALM AVE
SAN DIEGO, CA 92154
Effective as of 01-JUL-23

HAYS, SHEENA, NPF

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JUN-24

HAYS, SHEENA, NPF

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-JUN-24

HAYS, SHEENA, NPF

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-JUN-24

HEFNER, ANNA, NP

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-JUL-24

HILL, GENIELYN, NP

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-MAY-23

HILLIARD, THESALONICA, NP

Provider ID: N/A

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126
Effective as of 01-SEP-22

HOOPER, BONNIE, NP†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

HOOPER, BONNIE, NP

Provider ID: N/A

9095 RIO SAN DIEGO DR
STE 300
SAN DIEGO, CA 92108
Effective as of 01-MAY-24

HORNFELD, COURTNEY, NP

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

JENKINS, ERIN, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

JENKINS, ERIN, NP

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

JENSEN, ADRIENNE, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-APR-23

JENSEN, ADRIENNE, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-APR-23

JONES, CHRISTA, NP

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

JONES, CHRISTA, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

KAHL, NICHOLAS, NP

Provider ID: N/A

12843 EL CAMINO REAL
STE 203

SAN DIEGO, CA 92130

Effective as of 01-JAN-21

KELLEY, JESSICA, NP

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-APR-24

KI, TRISH, NP†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

KI, TRISH, NP†

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

KYI, MYA, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-MAR-24

LARSON, LINDSAY, NP

Provider ID: N/A

6386 ALVARADO CT STE
101

SAN DIEGO, CA 92120

Teleservice

Effective as of 01-JUN-24

LEE, MINDY, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

LEE, MINDY, NP

Provider ID: N/A

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Effective as of 01-MAY-23

LEE, MINDY, NP

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

LOWE, ASHLEY, NP

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201

SAN DIEGO, CA 92123

Effective as of 01-MAY-24

LOWE, ASHLEY, NP

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201

SAN DIEGO, CA 92123

Effective as of 01-MAY-24

MADGEDI, SHEILA, NP†

Provider ID: N/A

4282 GENESEE AVE STE
204

SAN DIEGO, CA 92117

Teleservice

Effective as of 01-JUL-21

MANRIQUEZ, LISETTE, NPF

Provider ID: N/A

286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

Effective as of 01-MAY-24

MANZANO, EUNICE, NP†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-AUG-22

MANZANO, EUNICE, NP†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-AUG-22

MAROSOK, MICHELLE, NP

Provider ID: N/A

16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127

Teleservice

Effective as of 01-MAR-24

MARTINEZ, CAROLYN, NP

Provider ID: N/A

1016 OUTER RD
SAN DIEGO, CA 92154

Effective as of 01-AUG-22

MCCLAIN, MEGAN, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

MCGILLOWAY, MELANIE, NP†

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

MCGOWAN, GLAIZA ANN, NP

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

MCGOWAN, GLAIZA ANN, NP

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

MEDINA, RUBELETA, NP

Provider ID: N/A

9995 CARMEL MOUNTAIN
RD STE B1011
SAN DIEGO, CA 92129
Effective as of 01-FEB-23

MELTZER, VIRGINIA, NP†

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

MEYER, ISAAC, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

MEYER, ISAAC, NP

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

MICK, SHARON, NP

Provider ID: N/A

8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

MOONEY, PATRICIA, NP†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-MAY-21

MOONEY, PATRICIA, NP†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JAN-24

MULVEY, CAOILFHIONN, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

MWAURA, WAIRIMU, NP†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice

Effective as of 01-JUN-21

NAGATA, CERAH, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

NAGATA, CERAH, NP

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

NETZEL, JENNIFER, NP†

Provider ID: N/A

8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-AUG-22

NETZEL, JENNIFER, NP†

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Effective as of 01-AUG-22

NETZEL, JENNIFER, NP†

Provider ID: N/A

9333 GENESEE AVE
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

NGO-BIGGE, ANGELA, NP

Provider ID: N/A

7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
Teleservice
Effective as of 01-JUN-23

NOCEDA, ANA, NP†

Provider ID: N/A

4305 UNIVERSITY AVE STE
150

C1. Lista de proveedores de la red Médico de atención especializada

SAN DIEGO, CA 92105
Effective as of 01-SEP-22

NOCEDA, ANA, NP†

Provider ID: N/A

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

OREJEL, EDITH, NP

Provider ID: N/A

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-23

OREJEL, EDITH, NP

Provider ID: N/A

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-23

ORPILLA, IMELDA, NP

Provider ID: N/A

📍 9995 CARMEL MOUNTAIN
RD STE B10-B11
SAN DIEGO, CA 92129
Effective as of 01-JAN-21

ORPILLA, IMELDA, NP

Provider ID: N/A

📍 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-AUG-21

PACE, RACHELLE, NP

Provider ID: N/A

📍 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

PACE, RACHELLE, NP

Provider ID: N/A

📍 350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

PACE, RACHELLE, NP

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

PATIAG, DANIEL, NP

Provider ID: N/A

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PATIAG, DANIEL, NP

Provider ID: N/A

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PEET, MELISSA, NPF

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

PEET, MELISSA, NPF

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

PEREZ, ALLYSSA, NP

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

PEREZ, ALLYSSA, NP†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

PEREZ, ALLYSSA, NP†

Provider ID: N/A

📍 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

PETTIS, BETH, NP†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

PITECK, CAITLIN, NPF

Provider ID: N/A

📍 555 W C ST STE 102
SAN DIEGO, CA 92101
Teleservice
Effective as of 01-JUN-24

POLIZZI, BRITTANY, NP†

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-JUN-22

POVOLI, LAUREN, NPF

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-24

RADMAN, MIRKA, NP

Provider ID: N/A

📍 6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-AUG-23

RAJAEI, NILOUFAR, NP†

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-AUG-22

C1. Lista de proveedores de la red Médico de atención especializada

REAL, MARIA, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-OCT-23

REAL, MARIA, NP

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-OCT-23

REDDY, PRIYA, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Effective as of 01-NOV-22

REDDY, PRIYA, NP

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Effective as of 01-NOV-22

REGEV, SHANEE, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

REGEV, SHANEE, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-APR-23

REINER, GAIL, NP†

Provider ID: N/A

4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121

Effective as of 01-OCT-21

REINER, GAIL, NP

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

RENZAS, JENNIFER, NP

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUL-21

RENZAS, JENNIFER, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUL-21

ROBERTSON, RACHAEL, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-22

RODENMEYER, EVE, NP

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-JUL-22

RODENMEYER, EVE, NP

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-JUL-22

ROSCOE, SYDNEY, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-MAR-24

ROSCOE, SYDNEY, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-MAR-24

ROSCOE, SYDNEY, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAR-24

ROSS, CRYSTAL, NP†

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

ROSSI, CATHERINE, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

ROZO, JOSE, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

RUFO, ROSAVIDA, NP

Provider ID: N/A

10672 WEXFORD ST STE
280

SAN DIEGO, CA 92131

Effective as of 01-JUN-23

SABIN, NANCY, NP

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

SABIN, NANCY, NP

Provider ID: N/A

6973 LINDA VISTA RD

C1. Lista de proveedores de la red Médico de atención especializada

SAN DIEGO, CA 92111
Effective as of 01-SEP-22

SALINAS, NIECEL, NP†

Provider ID: N/A
📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

SALOTTI, JOANIE, NP†

Provider ID: N/A
📄 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

SALOTTI, JOANIE, NP†

Provider ID: N/A
📄 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

SANADA, VIVIANE, NP

Provider ID: N/A
📄 995 GATEWAY CENTER
WAY STE 202
SAN DIEGO, CA 92102
Teleservice
Effective as of 01-APR-24

SANTANGELO, JOANNE, NP

Provider ID: N/A
📄 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

SANTANGELO, JOANNE, NP

Provider ID: N/A
📄 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

SATTERWHITE, MAURINE, NP

Provider ID: N/A
📄 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

SATTERWHITE, MAURINE, NP

Provider ID: N/A
📄 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

SCOTT, KELLY, NP

Provider ID: N/A
📄 2630 1ST AVE
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JUL-22

SEARS-WILEY, ELIZABETH, NP†

Provider ID: N/A
📄 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-21

SHARMA, RAKHI, NP

Provider ID: N/A
📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

SHAW, MARILYNN, NP

Provider ID: N/A
📄 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-MAR-23

SIETSMA, ALEXANDRA, NP†

Provider ID: N/A
📄 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

SMITH, JENNIFER, NP†

Provider ID: N/A
📄 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-AUG-22

SMITH, JENNIFER, NP†

Provider ID: N/A
📄 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

SNYDER, KIRSTIN, NP

Provider ID: N/A
📄 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-APR-23

SNYDER, KIRSTIN, NP

Provider ID: N/A
📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

SNYDER, KIRSTIN, NP

Provider ID: N/A
📄 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

SOLOMON, AMANDA, NP

Provider ID: N/A
📄 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SOLOMON, AMANDA, NP

Provider ID: N/A
📄 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

SPAULDING, ENJOLI, NP

Provider ID: N/A
📄 8010 FROST ST STE 510
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-AUG-23

C1. Lista de proveedores de la red Médico de atención especializada

SPAULDING, ENJOLI, NP

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-MAY-23

STAHL, STEPHANIE, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

STEFFENSMEIER, CHRISTA, NP

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-24

SUHIR, ERIN, NP

Provider ID: N/A

4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-MAR-24

SWEENEY, ZSA ZSA, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUL-21

TEJADA BRAS, SANDY, NP

Provider ID: N/A

2929 HEALTH CENTER DR
SAN DIEGO, CA 92123*
Effective as of 01-JUL-22

TILLEY, MONICA, NPF

Provider ID: N/A

12843 EL CAMINO REAL
STE 203

SAN DIEGO, CA 92130
Effective as of 01-DEC-21

TOMICICH, STEPHANIE, NP

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

TOMICICH, STEPHANIE, NP

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

TOMICICH, STEPHANIE, NP

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-FEB-24

TOMICICH, STEPHANIE, NP

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

TOPIK, AMANDA, NP†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

TOPIK, AMANDA, NP†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

TOWNS, ARTA, NP

Provider ID: N/A

4520 EXECUTIVE DR

SAN DIEGO, CA 92121
Effective as of 01-JUN-23

TOWNS, ARTA, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

TRAN, DAPHNE, NP

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

TREJO, ANA, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

TUCKER, LANIKA, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

TUCKER, LANIKA, NP

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-JUL-24

VILLANUEVA DE GUTIE, BERENICE, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-MAY-21

WHITEHURST, UNIQUE, NP

Provider ID: N/A


6655 ALVARADO RD
SAN DIEGO, CA 92120

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-AUG-24


WHITEHURST, UNIQUE, NP

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-24


WHITEHURST, UNIQUE, NP

Provider ID: N/A

 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-24


WIETZKE, MATTHEW, NP

Provider ID: N/A

 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24


WIETZKE, MATTHEW, NP

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24


WILLEY, MARTI, NP†

Provider ID: N/A

 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JUN-21

WILLEY, MARTI, NP†

Provider ID: N/A

 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JAN-21

WILLIAMS, BREAHA, NP


Provider ID: N/A

 4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105
Effective as of 01-DEC-21


WILLIAMS, BREAHA, NP

Provider ID: N/A

 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-DEC-21


WONG, MAYBELLE, NP

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24


WONG, MAYBELLE, NP

Provider ID: N/A

 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24


WOO, ANDY, NP

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

YARTSEVA, YULIYA, NP


Provider ID: N/A

 3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Effective as of 01-JAN-21

CERTIFIED REGISTERED NURSE ANESTHETIST


CALABRIA, MEGAN, CRNA

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23


CANTRELL, SARAH, CRNA

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23


COLE, JASON, CRNA†

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21


DOLLAND, STEVEN, CRNA†

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21


DULAY, JOTI, CRNA

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23


EVANS, CATHERINE, CRNA

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-23


FIEDLER, DEREK, CRNA

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23


GONZALEZ, LISA, CRNA

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

GRIFFIN, SETH, CRNA

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

C1. Lista de proveedores de la red Médico de atención especializada

JOHNSTON, RACHEL, CRNA

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

POLIKOWSKI, SAMANTHA, CRNA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

POLLOM, JESSICA, CRNA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

RAMIREZ, NICOLE, CRNA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ROADMAN, KEENE, CRNA

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SACKS, BRENT, CRNA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-21

SNODGRASS, JULIE, CRNA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

VINCENT, BERLIN, CRNA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CERTIFIED REGISTERED NURSE MIDWIFE

CHOI, NATHALIE, CRNM

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

CHOI, NATHALIE, CRNM

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

CORRY, ANDREA, CRNM

Provider ID: N/A

7910 FROST ST
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

CORRY, ANDREA, CRNM

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

CORRY, ANDREA, CRNM

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-SEP-23

CORRY, ANDREA, CRNM

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-SEP-23

CORTES, CHRISTINE, CRNM†

Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

EKHOLM, JANNA, CRNM†

Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

ELY-KONOSKE, RACHEL, CRNM

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

ELY-KONOSKE, RACHEL, CRNM

Provider ID: N/A

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Effective as of 01-DEC-23

ELY-KONOSKE, RACHEL, CRNM

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-DEC-23

GUNTHER, HOPE, CRNM†

Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

MAST, ASHLEY, CRNM

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-OCT-23

C1. Lista de proveedores de la red Médico de atención especializada

NATHAN, CARLY, CRNM

Provider ID: N/A

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Effective as of 01-AUG-23

NATHAN, CARLY, CRNM

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

RAY, BROOKE, CRNM†

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-SEP-21

STRAUSS, JOANNA, CRNM

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-MAY-21

TAYLOR, INGE, CRNM†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

VU HILL, ERICA, NP†

Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

CHIROPRACTOR

ASSADIAN, MEHRAK, DC

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114

Effective as of 01-JAN-21

CABALLERO, JAMES, DC

Provider ID: N/A

9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129
Effective as of 01-NOV-23

CABALLERO, JAMES, DC

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-NOV-23

DORADO, SUE, DC

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-OCT-23

GILIBERTO, JOSEPH, DC†

Provider ID: N/A

9995 CARMEL MOUNTAIN
RD STE D
SAN DIEGO, CA 92129
Effective as of 01-AUG-22

GILIBERTO, JOSEPH, DC†

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-AUG-22

HALEY, STEVEN, DC

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

LE, BRANDON, DC

Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

LE, BRANDON, DC

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

LUU, DANIEL, DC†

Provider ID: N/A

4419 EUCLID AVE STE 105
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

LUU, DANIEL, DC†

Provider ID: N/A

4419 EUCLID AVE STE 105
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

ROSENBERG, ERIK, DC

Provider ID: N/A

7612 LINDA VISTA RD STE
109
SAN DIEGO, CA 92111
Effective as of 01-NOV-23

TRUONG, VENNES, DC

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-OCT-23

DERMATOLOGY

AHLUWALIA, JUSLEEN, MD

Provider ID: N/A

9878 HIBERT ST STE 100
SAN DIEGO, CA 92131
Effective as of 01-DEC-20

ANGRA, KUNAL, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-JUL-21

ANGRA, KUNAL, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-DEC-22

ANGRA, KUNAL, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JUL-21

BOEN, MONICA, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-SEP-22

BOEN, MONICA, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-SEP-22

BOEN, MONICA, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-JAN-21

BOEN, MONICA, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-MAR-20

BRADSHAW, MICHAEL, MD

Provider ID: N/A

9878 HIBERT ST STE 100
SAN DIEGO, CA 92131
Effective as of 01-JUL-16

BRAUN, TARA, MD

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice

Effective as of 01-MAR-24

BROUHA, BROOK, MD

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-NOV-23

BROUHA, BROOK, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

BROUHA, BROOK, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JUN-18

BROUHA, BROOK, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

BROUHA, BROOK, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

CALAME, ANTOANELLA, MD†

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Effective as of 01-JUL-22

CELANO, NICHOLAS, MD

Provider ID: N/A

5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117
Teleservice

Effective as of 01-AUG-24

CHEN, BRYAN, MD

Provider ID: N/A

9878 HIBERT ST STE 100
SAN DIEGO, CA 92131†
Effective as of 01-JUL-16

CHEN, BRYAN, MD

Provider ID: N/A

9878 HIBERT ST STE 100
SAN DIEGO, CA 92131
Effective as of 01-JUL-16

CHIANG, JENNIFER, MD

Provider ID: N/A

5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117
Effective as of 01-AUG-24

DELA ROSA, KRISTINA, MD

Provider ID: N/A

9878 HIBERT ST STE 100
SAN DIEGO, CA 92131
Effective as of 01-AUG-17

DELA ROSA, KRISTINA, MD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

9878 HIBERT ST STE 100
SAN DIEGO, CA 92131
Effective as of 01-JAN-18

ERICKSON, CHRISTOPHER, MD†

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Effective as of 01-JUL-22

GERSTENFELD, ERIC, MD

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

GLADSJO, JULIE, MD

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-FEB-23

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-DEC-23

HAMMAN, MICHAEL, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-JUN-17

HAMMAN, MICHAEL, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

HAMMAN, MICHAEL, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-NOV-23

HAMMAN, MICHAEL, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

HAMMAN, MICHAEL, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JAN-21

HAMMAN, MICHAEL, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22

HAN, AMY, MD

Provider ID: N/A

6386 ALVARADO CT STE
209
SAN DIEGO, CA 92120
Effective as of 01-FEB-22

HEMPERLY, STEPHEN, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

HEMPERLY, STEPHEN, DO†

Provider ID: N/A

4060 4TH AVE STE 415

SAN DIEGO, CA 92103
Effective as of 01-JAN-21

HEMPERLY, STEPHEN, DO

Provider ID: N/A

9095 RIO SAN DIEGO DR
STE 300
SAN DIEGO, CA 92108
Effective as of 01-MAY-24

HIGHTOWER, GEORGE, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

KASSAB, GHADA, MD

Provider ID: N/A

3737 MORAGA AVE STE
A206
SAN DIEGO, CA 92117
Effective as of 01-MAR-23

KASSAB, GHADA, MD

Provider ID: N/A

3737 MORAGA AVE STE
A206
SAN DIEGO, CA 92117
Effective as of 01-JUL-23

KAUNITZ, GENEVIEVE, MD†

Provider ID: N/A

8899 UNIVERSITY CENTER
LN STE 350
SAN DIEGO, CA 92122
Effective as of 01-OCT-21

KEEL, DOUGLAS, DO

Provider ID: N/A

8899 UNIVERSITY CENTER
LN STE 150
SAN DIEGO, CA 92122
Effective as of 01-JAN-21

LIN, SHINKO, MD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

📍 5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117
Effective as of 01-AUG-24

LIN LEVY, JENNIFER, MD

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-AUG-24

LIOU, YUJIE, DO

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-JUL-24

LUPTON, JASON, MD

Provider ID: N/A

📍 12395 EL CAMINO REAL
STE 207
SAN DIEGO, CA 92130
Effective as of 01-MAR-16

LYFORD, WILLIS, MD

Provider ID: N/A

📍 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-MAY-23

MAFONG, ERICK, MD

Provider ID: N/A

📍 6386 ALVARADO CT STE
209
SAN DIEGO, CA 92120
Effective as of 01-FEB-22

MAFONG, ERICK, MD

Provider ID: N/A

📍 4060 4TH AVE STE 209
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

NAHM, WALTER, MD†

Provider ID: N/A

📍 7695 CARDINAL CT STE
200
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

NAHM, WALTER, MD†

Provider ID: N/A

📍 7695 CARDINAL CT STE
200
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

NAHM, WALTER, MD†

Provider ID: N/A

📍 7695 CARDINAL CT STE
200
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

REED, KELLY, DO†

Provider ID: N/A

📍 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JAN-21

REED, KELLY, DO†

Provider ID: N/A

📍 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

RILEY, JESSICA, DO†

Provider ID: N/A

📍 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

RILEY, JESSICA, DO†

Provider ID: N/A

📍 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-MAR-20

RILEY, JESSICA, DO†

Provider ID: N/A

📍 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-NOV-23

SATEESH, BROOKE, MD

Provider ID: N/A

📍 5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117
Effective as of 01-AUG-24

SCHMIEDECKE, RUDY, MD

Provider ID: N/A

📍 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-JUL-23

SHAHAN, FRED, MD

Provider ID: N/A

📍 6367 ALVARADO CT STE
107
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

SHAHAN, FRED, MD

Provider ID: N/A

📍 6367 ALVARADO CT STE
107
SAN DIEGO, CA 92120
Effective as of 01-JAN-14

SHIELL, RONALD, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

SHIELL, RONALD, MD†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

SIRICHOTIRATANA, MELISSA, MD†

Provider ID: N/A

4765 CARMEL MOUNTAIN
RD STE 201
SAN DIEGO, CA 92130
Effective as of 01-JAN-23

SOON, SEAVER, MD

Provider ID: N/A

3737 4TH AVE
SAN DIEGO, CA 92103
Effective as of 01-MAR-23

STEIN, ALEXANDER, MD†

Provider ID: N/A

6280 JACKSON DR STE 8
SAN DIEGO, CA 92119
Effective as of 01-SEP-22

STERN, MARLEIGH, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-JUN-24

TOMPKINS, STACY, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-JUL-22

TOMPKINS, STACY, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-JUL-22

TOMPKINS, STACY, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-DEC-22

TOMPKINS, STACY, MD

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-NOV-23

TSE, YARDY, MD†

Provider ID: N/A

4765 CARMEL MOUNTAIN
RD STE 201
SAN DIEGO, CA 92130
Effective as of 01-SEP-21

TYAGI, ABHILASHA, MD

Provider ID: N/A

5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117
Effective as of 01-AUG-24

UEBELHOER, NATHAN, DO

Provider ID: N/A

5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117
Effective as of 01-AUG-24

VENKAT, ARUN, MD†

Provider ID: N/A

4765 CARMEL MOUNTAIN
RD STE 201
SAN DIEGO, CA 92130
Effective as of 01-APR-20

ZALESKI-LARSEN, LISA, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22

ZALESKI-LARSEN, LISA, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JAN-21

ZUBAIR, RAHEEL, MD

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

ZUBAIR, RAHEEL, MD

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-MAR-24

ZUBAIR, RAHEEL, MD

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

ZUBAIR, RAHEEL, MD

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JUN-24

ZUBAIR, RAHEEL, MD

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-23

DERMATOLOGY

DERMATOPATHOLOGY

C1. Lista de proveedores de la red Médico de atención especializada

CALAME, ANTOANELLA, MD†

Provider ID: N/A

📍 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

Effective as of 01-JAN-23

ERICKSON, CHRISTOPHER, MD†

Provider ID: N/A

📍 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

Effective as of 01-JAN-21

SHEN, HONGGANG, MD

Provider ID: N/A

📍 4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Effective as of 01-JUL-19

EMERGENCY MEDICINE

ALKATIB, RHONDA, MD†

Provider ID: N/A

📍 2655 CAMINO DEL RIO N
STE 120

SAN DIEGO, CA 92108

Effective as of 01-AUG-20

CASTELLANO, TIFFANY, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

CHEN, ALICE, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

COYNE, CHRISTOPHER, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

DICKSON, MATTHEW, DO†

Provider ID: N/A

📍 1628 PALM AVE
SAN DIEGO, CA 92154

Effective as of 01-JAN-21

GUEFEN, URI, MD

Provider ID: N/A

📍 555 W C ST STE 102
SAN DIEGO, CA 92101

Effective as of 01-SEP-23

HARE, MARC, MD

Provider ID: N/A

📍 6719 ALVARADO RD STE
303

SAN DIEGO, CA 92120

Effective as of 01-APR-23

HOGUE, BRENNAN, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

JURKOWSKI, LEONARD, MD†

Provider ID: N/A

📍 3830 VALLEY CENTRE DR
STE 702

SAN DIEGO, CA 92130

Effective as of 01-JAN-21

KUTZ, CRAIG, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-21

LIOTTA, BENJAMIN, MD†

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-DEC-21

PARK, JAY, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-21

YU, ELAINE, DO

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

ENDOCRINOLOGY

METABOLISM DIABETES

EKANAYAKE, PREETHIKA, MD†

Provider ID: N/A

📍 4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-SEP-21

EKANAYAKE, PREETHIKA, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-21

FIRST, BRIAN, MD†

Provider ID: N/A

📍 4282 GENESEE AVE STE
103

SAN DIEGO, CA 92117

Effective as of 01-JAN-14

GUERIN, CHRIS, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-21

HOSEIN, NADEEN, MD

Provider ID: N/A

📍 4077 5TH AVE STE 35
SAN DIEGO, CA 92103

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-FEB-23

IYENGAR, RAVI, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

IYENGAR, RAVI, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-APR-23

NAGELBERG, JODI, MD†

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-NOV-21

NAGELBERG, JODI, MD†

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131

Effective as of 01-NOV-21

NAGELBERG, JODI, MD†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

NAGELBERG, JODI, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

SANDLER, JEFFREY, MD

Provider ID: N/A

4060 4TH AVE STE 340
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-AUG-23

SANDLER, JEFFREY, MD

Provider ID: N/A

4060 4TH AVE STE 340
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-AUG-23

SANDLER, JEFFREY, MD

Provider ID: N/A

4060 4TH AVE STE 340
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-OCT-23

SHAH, NANDI, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

SHAH, NANDI, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

STRAHM, LISA, MD†

Provider ID: N/A

1855 1ST AVE STE 200B
SAN DIEGO, CA 92101

Effective as of 01-JUL-20

TANTISIRA, LALITA, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Effective as of 01-DEC-21

ENDOCRINOLOGY REPRODUCTIVE

DANESHMAND, SAID, MD

Provider ID: N/A

11515 EL CAMINO REAL STE
100
SAN DIEGO, CA 92130

Effective as of 01-SEP-17

FOYOUZI-YOUSEFI, NASTARAN, MD

Provider ID: N/A

11425 EL CAMINO REAL
SAN DIEGO, CA 92130

Effective as of 01-JUN-23

FRIEDMAN, BROOKE, MD†

Provider ID: N/A

11425 EL CAMINO REAL
SAN DIEGO, CA 92130

Effective as of 01-SEP-17

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL, MD†

Provider ID: N/A

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Effective as of 01-SEP-23

BERNADETT, ALEX, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2100
SAN DIEGO, CA 92120

Effective as of 01-FEB-23

BERNADETT, ALEX, MD†

Provider ID: N/A

10505 SORRENTO VALLEY
RD STE 200
SAN DIEGO, CA 92121

Effective as of 01-FEB-23

CAMPBELL, BRIANNA, MD

Provider ID: N/A

950 S EUCLID AVE

**C1. Lista de proveedores de la red
Médico de atención especializada**

SAN DIEGO, CA 92114
Effective as of 01-MAY-23

DENYSIAK, JACQUELINE, MD†

Provider ID: N/A
📍 3969 4TH AVE STE 203
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-DEC-20

HILL, LINDA, MD†

Provider ID: N/A
📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

HILL, LINDA, MD†

Provider ID: N/A
📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

JOLICOEUR, MEGAN, DO

Provider ID: N/A
📍 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

JOLICOEUR, MEGAN, DO

Provider ID: N/A
📍 8899 UNIVERSITY CENTER
LN STE 350
SAN DIEGO, CA 92122
Effective as of 01-JUN-23

JOLICOEUR, MEGAN, DO

Provider ID: N/A
📍 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Effective as of 01-JUN-23

JOLICOEUR, MEGAN, DO

Provider ID: N/A
📍 9333 GENESEE AVE

SAN DIEGO, CA 92121
Effective as of 01-JUN-23

KUROSAKA, MOMO, MD†

Provider ID: N/A
📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-AUG-22

KUROSAKA, MOMO, MD†

Provider ID: N/A
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

MARSTON, JACQUELINE, DO

Provider ID: N/A
📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PERESS, LILIA, MD

Provider ID: N/A
📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-24

PERESS, LILIA, MD

Provider ID: N/A
📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-24

RODRIGUEZ, NATALIE, MD

Provider ID: N/A
📍 1685 HOLLISTER ST
SAN DIEGO, CA 92154*
Effective as of 01-NOV-23

ROJAS, SARAH, MD

Provider ID: N/A
📍 950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-JUL-24

**SHEKER-DICKSON, KIMBERLY,
DO†**

Provider ID: N/A
📍 1628 PALM AVE
SAN DIEGO, CA 92154
Effective as of 01-JAN-21

SOPHY, ELIZABETH, MD†

Provider ID: N/A
📍 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Effective as of 01-SEP-22

**SUMMERS-DAY, COURTNEY,
MD†**

Provider ID: N/A
📍 1016 OUTER RD
SAN DIEGO, CA 92154
Effective as of 01-JUL-22

***FAMILY PRACTICE
GERIATRIC MEDICINE***

MILLER, SCOTT, MD†

Provider ID: N/A
📍 9878 CARMEL MOUNTAIN
RD STE B
SAN DIEGO, CA 92129
Effective as of 01-JAN-21

***FAMILY PRACTICE
SPORTS MEDICINE***

UDOWENKO, MARINA, DO

Provider ID: N/A
📍 375 CAMINO DE LA REINA
STE C
SAN DIEGO, CA 92108
Effective as of 01-JUN-23

GASTROENTEROLOGY

BORTNIKER, ETHAN, MD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-MAY-24

BORTNIKER, ETHAN, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JUN-24

CHANDRADAS, SAJIV, MD†

Provider ID: N/A

4060 4TH AVE STE 240
SAN DIEGO, CA 92103
Effective as of 01-JUL-17

CUBAS, IVAN, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-DEC-14

CUBAS, IVAN, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

CUBAS, IVAN, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-MAR-15

CUMMINS, ANDREW, MD†

Provider ID: N/A

4060 4TH AVE STE 240
SAN DIEGO, CA 92103
Effective as of 01-JAN-15

DESTA, TADDESE, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-JAN-14

DESTA, TADDESE, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

DESTA, TADDESE, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-APR-24

DESTA, TADDESE, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-SEP-15

DUBOIS, SUJA, MD†

Provider ID: N/A

4060 4TH AVE STE 240
SAN DIEGO, CA 92103
Effective as of 01-SEP-20

GADDIPATI, KISHORE, MD†

Provider ID: N/A

4060 4TH AVE STE 240
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

GISH, ROBERT, MD†

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-21

GISH, ROBERT, MD†

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-21

GOLDKLANG, ROBERT, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-MAY-24

GOLDKLANG, ROBERT, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JUL-24

HASAN, AWS, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

HASSANEIN, TAREK, MD†

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 105
SAN DIEGO, CA 92102
Effective as of 01-SEP-22

HUA, MENG, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2306
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

KLAPHEKE, ROBERT, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

MITTAL, YASH, MD†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

4060 4TH AVE STE 240
SAN DIEGO, CA 92103
Effective as of 01-MAR-20

NGUYEN, TUAN, MD†

Provider ID: N/A

4141 FAIRMOUNT AVE STE
201
SAN DIEGO, CA 92105
Effective as of 01-JAN-21

NOVO, MEGAN, MD

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-MAY-23

NOVO, MEGAN, MD

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-JAN-23

REDDY, JOSEPH, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2301
SAN DIEGO, CA 92120
Effective as of 01-JAN-14

REDDY, JOSEPH, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2301
SAN DIEGO, CA 92120
Effective as of 01-AUG-20

REDDY, JOSEPH, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2301
SAN DIEGO, CA 92120
Effective as of 01-JUL-22

SCHAEFFER, CYNTHIA, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-SEP-15

SCHAEFFER, CYNTHIA, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-APR-21

SCHAEFFER, CYNTHIA, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

SHAFFER, KATHERINE, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

SHAFFER, KATHERINE, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-OCT-18

SHAFFER, KATHERINE, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-MAR-19

SHAH, SHAILJA, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SHAH, SHAILJA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-21

SHPANER, ALEXANDER, MD†

Provider ID: N/A

6719 ALVARADO RD STE
206
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

STIPHO, SALLY, MD†

Provider ID: N/A

4060 4TH AVE STE 240
SAN DIEGO, CA 92103
Effective as of 01-SEP-20

SYAL, GAURAV, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SYAL, GAURAV, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

THOMAS, CARLTON, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-JAN-14

THOMAS, CARLTON, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-SEP-15

THOMAS, CARLTON, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

**C1. Lista de proveedores de la red
Médico de atención especializada**

THOMAS, CARLTON, MD†

Provider ID: N/A

1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
Effective as of 01-MAR-16

YOUSSEF, FADY, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

YOUSSEF, FADY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

GENERAL PRACTICE

RECALDE, FRANCISCO, MD†

Provider ID: N/A

3811 EL CAJON BLVD
SAN DIEGO, CA 92105
Effective as of 01-JAN-21

GENETICS MEDICAL

JONES, MARILYN, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
200
SAN DIEGO, CA 92121
Effective as of 01-JUN-21

GYNECOLOGIC

ONCOLOGY

BAHADOR, AFSHIN, MD

Provider ID: N/A

5030 CAMINO DE LA
SIESTA STE 204
SAN DIEGO, CA 92108
Effective as of 01-APR-23

DUGGAN, BRIDGETTE, MD

Provider ID: N/A

5030 CAMINO DE LA
SIESTA STE 204
SAN DIEGO, CA 92108
Effective as of 01-MAY-23

GYNECOLOGY

WILLIAMS, ALISA, MD†

Provider ID: N/A

5555 RESERVOIR DR STE
307
SAN DIEGO, CA 92120
Effective as of 01-JAN-20

**HEARING AID DEALER /
SUPPLIER**

ANAYA, MANUEL, MA†

Provider ID: N/A

9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

ANDERSON, ELAINE, MA†

Provider ID: N/A

6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

ANDERSON, ELAINE, MA†

Provider ID: N/A

9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

ANDERSON, ELAINE, MA†

Provider ID: N/A

6367 ALVARADO CT
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

DANDURAND, JOHN, MA†

Provider ID: N/A

6367 ALVARADO CT
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-JAN-21

DANDURAND, JOHN, MA†

Provider ID: N/A

9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-MAY-22

DAVIS, KELLE, MA†

Provider ID: N/A

9340 CLAIREMONT MESA
BLVD
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

DAVIS, KELLE, MA†

Provider ID: N/A

9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

DAVIS, KELLE, MA†

Provider ID: N/A

6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

GALLAGHER, JEFFERY, MA

Provider ID: N/A

5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Effective as of 01-AUG-24

**HEMATOLOGY /
ONCOLOGY**

C1. Lista de proveedores de la red Médico de atención especializada

AHMED, SYED, MD

Provider ID: N/A

7432 LA MANTANZA
SAN DIEGO, CA 92127
Effective as of 01-FEB-24

ANDREY, JEFFREY, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

ANDREY, JEFFREY, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103*
Effective as of 01-APR-23

BASERI, BABAK, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-APR-24

BASERI, BABAK, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103*
Effective as of 01-APR-23

BASERI, BABAK, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

BESSUDO, ALBERTO, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-NOV-21

CHEN, YU-WEI, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

COGGAN, JAMES, DO

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-NOV-22

EISENBERG, STEVEN, DO†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

FISHER, JENNIFER, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-DEC-08

FISHER, JENNIFER, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-JAN-14

FRAKES, LAURIE, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-NOV-21

MARJON, PHILIP, MD

Provider ID: N/A

16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127

Teleservice

Effective as of 01-APR-24

MARJON, PHILIP, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103*
Effective as of 01-APR-23

MESLEH SHAYEB, AKRAM, MD†

Provider ID: N/A

9333 GENESEE AVE STE
310
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

NGUYEN, ANTHONY, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-AUG-23

PARSI, HOOMAN, MD

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

QUINN, CATHERINE, MD

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-APR-23

RAZZAQUE, SAQIB, MD


Provider ID: N/A

7377 VIA CRESTA RD
SAN DIEGO, CA 92129
Effective as of 01-FEB-24

REDFERN, CHARLES, MD†


Provider ID: N/A

CI. Lista de proveedores de la red Médico de atención especializada

 3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-JAN-14


REDFERN, CHARLES, MD†

Provider ID: N/A

 3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-SEP-15


RICE, KRISTEN, MD†

Provider ID: N/A

 3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-SEP-15


RICE, KRISTEN, MD†

Provider ID: N/A

 3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-JUN-11


SARWARI, NAWID, MD

Provider ID: N/A

 3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-JUL-23


SAUNDERS, PHILLIP, DO†

Provider ID: N/A

 3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-NOV-22

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

 3965 5TH AVE STE 230
SAN DIEGO, CA 92103*
Effective as of 01-APR-23


SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

 3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-MAY-22


SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

 3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-SEP-22


SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

 3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-JUL-23


SHAIKH, ANWER, MD†

Provider ID: N/A

 3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-JUL-22


SHENOY, CASIE, MD†

Provider ID: N/A

 3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-FEB-18


SHIEH, MARIE, MD†

Provider ID: N/A

 3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-DEC-16


SULLIVAN, JESSICA, DO

Provider ID: N/A

 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-DEC-23

SULLIVAN, JESSICA, DO


Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

HEPATOLOGY

HASSANEIN, TAREK, MD


Provider ID: N/A

 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-JUN-24

HOSPICE AND PALLIATIVE MEDICINE


RUBENSIK, TAMARA, MD†

Provider ID: N/A

 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-21

RUBENSIK, TAMARA, MD†


Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-21

HOSPITALIST MD/DO


DJEKIC, KRISTINA, DO†

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

FIRESTEIN, CATHERINE, MD†

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

HAMMOND, CHARLES, MD†

Provider ID: N/A

 200 W ARBOR DR

C1. Lista de proveedores de la red Médico de atención especializada

SAN DIEGO, CA 92103
Effective as of 01-APR-21

SHINDO, YURI, MD†

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

TONG, ALEXANDER, MD

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

YANG, BENJAMIN, MD

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

YASSIN, HAZEM, MD

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

INFECTIOUS DISEASE

ALDOUS, JEANNETTE, MD†

Provider ID: N/A
950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-JUL-22

CAPERNA, JOSEPH, MD†

Provider ID: N/A
2333 1ST AVE STE 104
SAN DIEGO, CA 92101
Effective as of 01-JUL-21

KUPPALLI, KRUTIKA, MD

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-23

MARTIN, THOMAS, MD†

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

MARTIN, THOMAS, MD†

Provider ID: N/A
4168 FRONT ST FL 3
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

RAMIREZ SANCHEZ, CLAUDIA, MD

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

INTERNAL MEDICINE

AIZIN, VITALI, MD

Provider ID: N/A
3802 NATIONAL AVE
SAN DIEGO, CA 92113*
Effective as of 01-OCT-23

AL-SALEH, YADANI, MD†

Provider ID: N/A
3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Effective as of 01-MAR-23

BALL, SHELDON, MD

Provider ID: N/A
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-OCT-22

BALL, SHELDON, MD

Provider ID: N/A
6973 LINDA VISTA RD

SAN DIEGO, CA 92111
Effective as of 01-OCT-22

BRAZEL, DANIELLE, MD

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

BRAZEL, DANIELLE, MD

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

CHAU, JOHN, MD†

Provider ID: N/A
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-MAY-23

CHAU, JOHN, MD†

Provider ID: N/A
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-MAY-23

CHONGKRAIRATANAKUL, TEPSIRI, MD†

Provider ID: N/A
8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-MAY-24

CHUNG, KIYON, MD†

Provider ID: N/A
4060 4TH AVE STE 650
SAN DIEGO, CA 92103*
Effective as of 01-NOV-12

CSAPOCZI, PETER, MD

Provider ID: N/A
950 S EUCLID AVE
SAN DIEGO, CA 92114
Teleservice

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JAN-21

DASHI, ARBEN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

DAVIS, JASON, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-NOV-23

DAVIS, JASON, MD†

Provider ID: N/A

7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DAVIS, JASON, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-NOV-16

GADIYARAM, VARUNA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

GELBERG, ANNA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

GRUNVALD, EDUARDO, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

GRUNVALD, EDUARDO, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

HAMMES, JOHN, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-NOV-23

HAMMES, JOHN, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

HASTIE, ELIZABETH, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

JAIN, SUPRABHA, MD

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-OCT-22

JEBAIN, JEBAIN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

JEBAIN, JEBAIN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

KATSNELSON, MARCELLA, DO

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

KOOKOOTSEDES, GAYLE, MD†

Provider ID: N/A

3633 CAMINO DEL RIO S
STE 300
SAN DIEGO, CA 92108
Effective as of 01-MAR-21

LAMANTIA, MICHELE, MD†

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114*
Effective as of 01-AUG-17

LIU, ANDREW, MD

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

LIU, ANDREW, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
100&102
SAN DIEGO, CA 92115
Effective as of 01-SEP-23

LIU, ANDREW, MD

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

LUND, GUY, MD†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-MAY-24

MARTINEZ, ARMANDO, MD†
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

MOOLANI, UJJALA, MD
Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

MOOLANI, UJJALA, MD
Provider ID: N/A

6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-MAY-23

NAMAZY, DAVID, MD†
Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-JAN-24

NARAYANAN, MEENA, MD†
Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114*
Effective as of 01-JAN-21

NGUYEN, VIET, MD†
Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-OCT-20

NGUYEN, TRI, MD†
Provider ID: N/A

4206 44TH ST

SAN DIEGO, CA 92115*
Teleservice
Effective as of 01-SEP-22

NOKES, BRANDON, MD†
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

PITT, WILLIAM, MD†
Provider ID: N/A

6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120
Effective as of 01-JAN-23

SONG, ALEXANDER, MD
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

TANTISIRA, LALITA, MD†
Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

TANTISIRA, LALITA, MD†
Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

TOPPEN, WILLIAM, MD†
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

TRIVEDI, MEHUL, MD
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

TRIVEDI, MEHUL, MD
Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

YANG, JENNY, MD†
Provider ID: N/A

4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
Effective as of 01-AUG-21

YANG, JENNY, MD†
Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

INTERNAL MEDICINE CRITICAL CARE MEDICINE

BOROK, ZEA, MD†
Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

BOROK, ZEA, MD†
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

BOROK, ZEA, MD†
Provider ID: N/A

4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

JAFFE, GILAD, MD
Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

JAFFE, GILAD, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-SEP-23

MERCANDETTI, ALEX, MD†

Provider ID: N/A

3965 5TH AVE STE 430
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-19

SULLIVAN, LAUREN, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

SULLIVAN, LAUREN, MD

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-SEP-23

SULLIVAN, LAUREN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

INTERVENTIONAL CARDIOLOGY

CARAMBAS, CLARITA, MD†

Provider ID: N/A

9190 MIRA MESA BLVD
SAN DIEGO, CA 92126
Effective as of 01-SEP-22

CHUNG, KIYON, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

CRUZ RODRIGUEZ, JOSE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

FRIEDMAN, RICHARD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

FRIEDMAN, RICHARD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

GLASSMAN, JERROLD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

GLASSMAN, JERROLD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-MAR-13

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

7901 FROST ST
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

JOHN, ALAN, MD

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-MAY-23

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

MULLVAIN, JEFFRY, MD†

Provider ID: N/A

4060 4TH AVE STE 500
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

NGUYEN, BRYANT, MD†

Provider ID: N/A

4440 EUCLID AVE STE A
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

PITT, WILLIAM, MD†

Provider ID: N/A

6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120
Effective as of 01-SEP-15

RUBIO GARCIA, MANOLO, MD†


Provider ID: N/A

412 WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-22

**C1. Lista de proveedores de la red
Médico de atención especializada**


- RUBIO GARCIA, MANOLO, MD†**
 Provider ID: N/A
 292 EUCLID AVE STE 210
 SAN DIEGO, CA 92114
 Effective as of 01-MAY-23
- RUBIO GARCIA, MANOLO, MD†**
 Provider ID: N/A
 292 EUCLID AVE STE 210
 SAN DIEGO, CA 92114
 Effective as of 01-DEC-22
- SALAMI, ALI, MD†**
 Provider ID: N/A
 501 WASHINGTON ST STE
 512
 SAN DIEGO, CA 92103
 Effective as of 01-SEP-15
- SCLAR, CRAIG, MD**
 Provider ID: N/A
 3880 MURPHY CANYON
 RD STE 120
 SAN DIEGO, CA 92123
 Teleservice
 Effective as of 01-DEC-23
- SCLAR, CRAIG, MD**
 Provider ID: N/A
 7830 CLAIREMONT MESA
 BLVD STE 100
 SAN DIEGO, CA 92111
 Effective as of 01-MAR-24
- SCOTT, EMILY, MD†**
 Provider ID: N/A
 4060 4TH AVE STE 500
 SAN DIEGO, CA 92103
 Effective as of 01-NOV-12
- SHAH, KULIN, MD†**
 Provider ID: N/A
 292 EUCLID AVE STE 210
 SAN DIEGO, CA 92114
- Effective as of 01-APR-23
- SHEREV, DIMITRI, MD†**
 Provider ID: N/A
 6402 EL CAJON BLVD STE
 102
 SAN DIEGO, CA 92115
 Effective as of 01-JAN-24
- SUDHAKAR, DEEPTHI, MD†**
 Provider ID: N/A
 292 EUCLID AVE STE 210
 SAN DIEGO, CA 92114
 Effective as of 01-APR-23
- LICENSED CLINICAL
SOCIAL WORKER**
- ALVAREZ, DIANA, LCSW**
 Provider ID: N/A
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Teleservice
 Effective as of 01-APR-21
- BASHAM, CLAUDIA, LCSW**
 Provider ID: N/A
 3025 BEYER BLVD STE E101
 SAN DIEGO, CA 92154
 Teleservice
 Effective as of 01-NOV-21
- BIGGER, ALAINA, LCSW**
 Provider ID: N/A
 4849 RONSON CT STE 207
 SAN DIEGO, CA 92111
 Effective as of 01-AUG-23
- BROWN, EDEN, LCSW†**
 Provider ID: N/A
 16950 VIA TAZON
 SAN DIEGO, CA 92127
 Effective as of 01-FEB-22
- DIAZ, JAENAI, LCSW**
- Provider ID: N/A
 350 DICKINSON ST
 SAN DIEGO, CA 92103
 Effective as of 01-JUL-23
- DSOUZA, NICOLE, LCSW†**
 Provider ID: N/A
 330 LEWIS ST
 SAN DIEGO, CA 92103
 Effective as of 01-AUG-22
- ESCAMILLA, KARLA, LCSW†**
 Provider ID: N/A
 950 S EUCLID AVE
 SAN DIEGO, CA 92114
 Effective as of 01-DEC-21
- GONZALEZ, ADRIANA, LCSW**
 Provider ID: N/A
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Effective as of 01-JUN-23
- GONZALEZ, ADRIANA, LCSW**
 Provider ID: N/A
 4510 EXECUTIVE DR
 SAN DIEGO, CA 92121
 Effective as of 01-JUN-23
- HAMM, DEANNA, LCSW**
 Provider ID: N/A
 350 DICKINSON ST
 SAN DIEGO, CA 92103
 Effective as of 01-JUN-23
- JASSO-RAMIREZ, MARTHA,
LCSW**
 Provider ID: N/A
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Teleservice
 Effective as of 01-SEP-21
- KHAMISA, SORAIYA, LCSW**
 Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

 4520 EXECUTIVE DR STE A
SAN DIEGO, CA 92121
Effective as of 01-JUN-23


LOWE, LINDSAY, LCSW

Provider ID: N/A

 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24


RABBAN, DIANA, LCSW

Provider ID: N/A

 286 EUCLID AVE STE 302
SAN DIEGO, CA 92114
Teleservice
Effective as of 01-NOV-22


SACHS, MELISSA, LCSW†

Provider ID: N/A

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-MAR-21


SCHWARTZMAN, BENJAMIN, LCSW

Provider ID: N/A

 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-FEB-23

SCHWARTZMAN, BENJAMIN, LCSW

Provider ID: N/A

 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

SCHWARTZMAN, BENJAMIN, LCSW


Provider ID: N/A

 4550 KEARNY VILLA RD

STE 116
SAN DIEGO, CA 92123
Effective as of 01-DEC-22


SCHWARTZMAN, BENJAMIN, LCSW

Provider ID: N/A

 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23


TABRIZI, SYAMAK, LCSW

Provider ID: N/A

 286 EUCLID AVE
STE 302
SAN DIEGO, CA 92114
Effective as of 01-AUG-24

WRIGHT, STEPHANIE, LCSW


Provider ID: N/A

 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-JAN-24

LICENSED PROFESSIONAL CLINICAL COUNSELOR


TITOVA, ANASTASIA, LPCC

Provider ID: N/A

 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-FEB-23

TITOVA, ANASTASIA, LPCC

Provider ID: N/A


 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

MARRIAGE FAMILY

THERAPIST


GULOTTA, SAMANTHA, MFT

Provider ID: N/A

 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Effective as of 01-JUN-23


HOLLEMAN, KEVIN, DO

Provider ID: N/A

 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-APR-23


HOLLEMAN, KEVIN, DO

Provider ID: N/A

 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-JUN-24


KUEK, JOHN, MFT

Provider ID: N/A

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-APR-21


LAIDLAW, JOHN, MFT

Provider ID: N/A

 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-JAN-24

SCHLOSSER, TARA, MFT

Provider ID: N/A

 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

SUTTLE, CAROLYN, MFT†

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-NOV-21

VILLAGOMEZ, JOSHUA, MFT

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

ZAYAS, MARIO, MFT

Provider ID: N/A

3025 BEYER BLVD STE
E-101
SAN DIEGO, CA 92154

Effective as of 01-JAN-21

MATERNAL AND FETAL MEDICINE

AHN, JENNIFER, MD†

Provider ID: N/A

12264 EL CAMINO REAL
STE 204
SAN DIEGO, CA 92130

Effective as of 01-FEB-21

BERGGREN, ERICA, MD†

Provider ID: N/A

12264 EL CAMINO REAL
STE 204
SAN DIEGO, CA 92130

Effective as of 01-JAN-21

DOWLING, DAVID, MD†

Provider ID: N/A

12264 EL CAMINO REAL
STE 204
SAN DIEGO, CA 92130

Effective as of 01-JAN-21

EMERUWA, UKACHI, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JUN-23

EMERUWA, UKACHI, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

EMERUWA, UKACHI, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

GOLLIN, YVONNE, MD†

Provider ID: N/A

12264 EL CAMINO REAL
STE 204
SAN DIEGO, CA 92130

Effective as of 01-JAN-21

MEDICAL ONCOLOGY

EISENBERG, STEVEN, DO†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Effective as of 01-JAN-21

FRAKES, LAURIE, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Teleservice

Effective as of 01-JAN-21

KOSSMAN, STEVEN, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123

Effective as of 01-SEP-15

SHAIKH, ANWER, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103*

Effective as of 01-APR-23

SHENOY, CASIE, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123

Effective as of 01-JAN-18

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

AL-DAHMAN, ZAID, MD

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123

Effective as of 01-MAY-23

AL-DAHMAN, ZAID, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115

Effective as of 01-MAY-23

AL-DAHMAN, ZAID, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115

Effective as of 01-MAY-23

BEHREND, TERRY, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115

Effective as of 01-JAN-21

C1. Lista de proveedores de la red Médico de atención especializada

BEHREND, TERRY, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

BEHREND, TERRY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

BEHREND, TERRY, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-MAR-16

BEHREND, TERRY, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-JUL-22

BOISKIN, MARK, MD

Provider ID: N/A

9610 GRANITE RIDGE DR
STE B
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

CALDERON MOLINA, JUAN, MD

Provider ID: N/A

9610 GRANITE RIDGE DR
STE B
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

CHONGKRAIRATANAKUL, TEPSIRI, MD

Provider ID: N/A

8010 FROST ST STE 100
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

CHONGKRAIRATANAKUL, TEPSIRI, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-SEP-21

DAVIS, JASON, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-SEP-20

DAVIS, JASON, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

DAVIS, JASON, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

DAVIS, JASON, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-NOV-23

DAVIS, JASON, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

DAVIS, JASON, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Effective as of 01-MAR-15

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

FARAVARDEH, ARMAN, MD

Provider ID: N/A

8010 FROST ST STE 100
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

FARAVARDEH, ARMAN, MD

Provider ID: N/A

8010 FROST ST STE 100
SAN DIEGO, CA 92123
Effective as of 01-JUL-24

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-NOV-16

FARAVARDEH, ARMAN, MD

Provider ID: N/A

8010 FROST ST STE 100
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

HAMMES, JOHN, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103*
Effective as of 01-JAN-24

HAMMES, JOHN, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

HAMMES, JOHN, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

☒ 4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-MAR-15

HUSSAIN, SHAHID, MD

Provider ID: N/A

☒ 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-JUL-24

HUSSAIN, SHAHID, MD

Provider ID: N/A

☒ 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-JUL-24

HUSSAIN, SHAHID, MD

Provider ID: N/A

☒ 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-AUG-23

HUSSAIN, SHAHID, MD

Provider ID: N/A

☒ 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-APR-24

HUSSAIN, SHAHID, MD

Provider ID: N/A

☒ 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-MAY-24

KHAING, KATHY, MD†

Provider ID: N/A

☒ 8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

LE, CHARLES, MD†

Provider ID: N/A

☒ 4440 EUCLID AVE
SAN DIEGO, CA 92115
Effective as of 01-JUL-21

LE, CHARLES, MD†

Provider ID: N/A

☒ 4440 EUCLID AVE STE A
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

LUND, GUY, MD

Provider ID: N/A

☒ 8010 FROST ST STE 100
SAN DIEGO, CA 92123
Effective as of 01-JUL-24

LUND, GUY, MD

Provider ID: N/A

☒ 8010 FROST ST STE 100
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

LUND, GUY, MD†

Provider ID: N/A

☒ 8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-NOV-16

NAMAZY, DAVID, MD†

Provider ID: N/A

☒ 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-JUL-22

NAMAZY, DAVID, MD†

Provider ID: N/A

☒ 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-JUN-23

NAMAZY, DAVID, MD†

Provider ID: N/A

☒ 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-APR-17

NGUYEN, VIET, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

PATEL, BIJAL, MD

Provider ID: N/A

☒ 8010 FROST ST STE 100
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

QUEVEDO, JUAN, MD†

Provider ID: N/A

☒ 995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-SEP-20

QUEVEDO, JUAN, MD†

Provider ID: N/A

☒ 995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-SEP-22

QUEVEDO, JUAN, MD†

Provider ID: N/A

☒ 995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-NOV-23

C1. Lista de proveedores de la red Médico de atención especializada

QUEVEDO, JUAN, MD†

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-AUG-21

RAHIMI, SINA, DO†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-MAR-23

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

SETHI, SUPREET, MD

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

STEER, DYLAN, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

THOMAS, THEODORE, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

ZHONG, YAN, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-NOV-22

ZHONG, YAN, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-MAY-22

ZHONG, YAN, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-MAR-22

ZHONG, YAN, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JUL-22

NEUROLOGY

BINDAL, ANKUR, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

BOBO, JERRY, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

FREDERICK, ALIYA, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

GRISOLIA, JAMES, MD†

Provider ID: N/A

4033 3RD AVE STE 410
SAN DIEGO, CA 92103
Effective as of 01-SEP-20

GUPTA, VISHAL, DO

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

GUTFLAIS, ERIC, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HAAS, RICHARD, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HAAS, RICHARD, MD†

Provider ID: N/A

200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

HAAS, RICHARD, MD†

Provider ID: N/A

4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
Effective as of 01-OCT-21

HEADLEY, ALISON, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HUSSAIN, SHAHID, MD

Provider ID: N/A

6402 EL CAJON BLVD STE

C1. Lista de proveedores de la red Médico de atención especializada

100
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-MAR-24

KARANJIA, NAVAZ, MD

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

KARANJIA, NAVAZ, MD†

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

KHAMISHON, BORIS, MD†

Provider ID: N/A
6699 ALVARADO RD STE
2301
SAN DIEGO, CA 92120
Effective as of 01-AUG-20

KHAMISHON, BORIS, MD†

Provider ID: N/A
6699 ALVARADO RD STE
2301
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

KHAMISHON, BORIS, MD†

Provider ID: N/A
6699 ALVARADO RD STE
2301
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

KHAMISHON, BORIS, MD†

Provider ID: N/A
6699 ALVARADO RD STE
2301
SAN DIEGO, CA 92120
Effective as of 01-JAN-14

KURESHI, SOHAIB, MD†

Provider ID: N/A
3750 CONVOY ST STE 301
SAN DIEGO, CA 92111
Effective as of 01-SEP-20

LASKER, BRUCE, MD†

Provider ID: N/A
3737 MORAGA AVE STE A5
SAN DIEGO, CA 92117
Effective as of 01-FEB-07

MALIK, SUDHIR, MD†

Provider ID: N/A
4033 3RD AVE STE 420
SAN DIEGO, CA 92103
Effective as of 01-DEC-20

MALIK, SUDHIR, MD†

Provider ID: N/A
4033 3RD AVE STE 420
SAN DIEGO, CA 92103
Effective as of 01-OCT-19

MALIK, SUDHIR, MD†

Provider ID: N/A
4033 3RD AVE STE 420
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

QAYOUMI, WALI, MD

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

QAYOUMI, WALI, MD†

Provider ID: N/A
4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
Effective as of 01-OCT-21

RAYNOWSKA, JENELLE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

RAYNOWSKA, JENELLE, MD

Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-APR-23

RIGGINS, NINA, MD

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SCHORR, EMILY, MD

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-MAR-24

SCHORR, EMILY, MD

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

SCHORR, EMILY, MD

Provider ID: N/A
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-MAR-24

SCHULTE, JESSICA, MD

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SIAVOSHI, SARA, DO

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

C1. Lista de proveedores de la red Médico de atención especializada

SIAVOSHI, SARA, DO†

Provider ID: N/A

📄 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-FEB-22

SIAVOSHI, SARA, DO†

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

WIEGAND, SARAH, DO

Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

NEUROLOGY CHILD

SATTAR, SHIFTEH, MD

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

NUCLEAR MEDICINE

ALEXANDER, SINDU, MD†

Provider ID: N/A

📄 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ALEXANDER, SINDU, MD†

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CHOI, ESTHER, MD

Provider ID: N/A

📄 330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

CHOI, ESTHER, MD

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

GAMIE, SHERIEF, MD

Provider ID: N/A

📄 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

GAMIE, SHERIEF, MD

Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

GAMIE, SHERIEF, MD

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

KIPPER, MICHAEL, MD

Provider ID: N/A

📄 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

METH, ERNIE, MD

Provider ID: N/A

📄 3444 KEARNY VILLA RD
STE 1
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-NOV-21

SHARIF TABRIZI, AHMAD, MD

Provider ID: N/A

📄 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

SHARIF TABRIZI, AHMAD, MD

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER, MD

Provider ID: N/A

📄 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

ASLIAN, AZITA, MD†

Provider ID: N/A

📄 950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-SEP-22

ASLIAN, AZITA, MD†

Provider ID: N/A

📄 950 S EUCLID AVE
SAN DIEGO, CA 92114*
Effective as of 01-JUL-24

BLAKE, GARY, MD†

Provider ID: N/A

📄 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

BRAHMBHATT, BHOOMI, MD

Provider ID: N/A

📄 2918 5TH AVE STE 100
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CARDENAS, MICHAEL, MD

Provider ID: N/A

📄 2918 5TH AVE STE 100
SAN DIEGO, CA 92103

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-FEB-24

CARDENAS, MICHAEL, MD†

Provider ID: N/A

📍 4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

CARDENAS, MICHAEL, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

CASTILLO, MARIA, MD†

Provider ID: N/A

📍 7930 FROST ST STE 103
SAN DIEGO, CA 92123

Effective as of 01-FEB-21

CHAC, RICK, MD†

Provider ID: N/A

📍 550 WASHINGTON ST STE
331
SAN DIEGO, CA 92103

Effective as of 01-NOV-22

CHUAN, SANDY, MD†

Provider ID: N/A

📍 11425 EL CAMINO REAL
SAN DIEGO, CA 92130

Effective as of 01-FEB-16

DAVIS, TRACIE, MD

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-OCT-23

DELCORE, LAURA, MD†

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-AUG-22

DELCORE, LAURA, MD†

Provider ID: N/A

📍 6030 VILLAGE WAY
SAN DIEGO, CA 92130

Effective as of 01-AUG-22

DELCORE, LAURA, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

DELCORE, LAURA, MD†

Provider ID: N/A

📍 4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

DELCORE, LAURA, MD†

Provider ID: N/A

📍 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

📍 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

📍 330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

📍 6030 VILLAGE WAY
SAN DIEGO, CA 92130

Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-AUG-22

FOLCH TORRES-AGUIAR, BEATRIZ, MD†

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-AUG-22

FOYOUZI-YOUSEFI, NASTARAN, MD

Provider ID: N/A

📍 11425 EL CAMINO REAL
SAN DIEGO, CA 92130

Effective as of 01-JUN-23

FRUGONI, GINA, MD†

Provider ID: N/A

📍 4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

GELLENS, ANDREW, MD†

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-NOV-21

HARVEY, SCOTT, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-21

HARVEY, SCOTT, MD†

Provider ID: N/A

📍 4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-MAY-21

HUI, KIM, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

2918 5TH AVE STE 100
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

JAIME, CINDY, MD†

Provider ID: N/A

2918 5TH AVE STE 100
SAN DIEGO, CA 92103
Effective as of 01-JUN-18

JENKINS, ENCHANTA, MD†

Provider ID: N/A

4050 BEYER BLVD
SAN DIEGO, CA 92173
Effective as of 01-JUN-22

MACKAY, GILLIAN, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-DEC-23

MACKAY, GILLIAN, MD

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-DEC-23

MELENDEZ, ARIANA, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

MELENDEZ, ARIANA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

MELENDEZ BERRIOS, IARA, MD

Provider ID: N/A

4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105

Teleservice

Effective as of 01-AUG-24

MENDEZ, DIEGO, MD

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-APR-23

MEURICE, MARIELLE

ERENDIRA LUCILLE, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

MEURICE, MARIELLE

ERENDIRA LUCILLE, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

PARK, SUSANNA, MD

Provider ID: N/A

11425 EL CAMINO REAL
SAN DIEGO, CA 92130
Effective as of 01-APR-16

PHAN, TIFFANI, MD

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-JUL-24

PICKETT, CHARLOTTE, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Effective as of 01-JUL-23

PINSON, KELSEY, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

PINSON, KELSEY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

PINSON, KELSEY, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
200
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

SHUCKETT, ARIEL, MD†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JUL-22

TAJРАН, DEENA, MD†

Provider ID: N/A

📍 10737 CAMINO RUIZ STE 114
SAN DIEGO, CA 92126

Effective as of 01-JAN-21

THOMSON, SAMANTHA, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-OCT-21

THOMSON, SAMANTHA, MD†

Provider ID: N/A

📍 4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-OCT-21

TRUJILLO, JENNIFER, DO†

Provider ID: N/A

📍 950 S EUCLID AVE
SAN DIEGO, CA 92114*

Effective as of 01-JUL-22

VAN DEN HEUVEL, KELLY, MD†

Provider ID: N/A

📍 2918 5TH AVE STE 100
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

VU, LAC, MD

Provider ID: N/A

📍 5555 RESERVOIR DR STE
205
SAN DIEGO, CA 92120

Effective as of 01-JUL-23

WILLIAMS, ALISA, MD†

Provider ID: N/A

📍 5555 RESERVOIR DR STE
307
SAN DIEGO, CA 92120*

Effective as of 01-JAN-20

OCCUPATIONAL MEDICINE

JACKSON, CODY, MD

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-MAY-22

OCCUPATIONAL THERAPIST

ARRIESGADO, MINNETT, OT

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JUN-23

BROWN, JOHNNY, OT

Provider ID: N/A

📍 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

Effective as of 01-AUG-24

CHOW, JENNIFER, OT

Provider ID: N/A

📍 3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111

Effective as of 01-DEC-23

CHOW, JENNIFER, OT

Provider ID: N/A

📍 3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111

Effective as of 01-DEC-23

CUA, NICOLE, OT

Provider ID: N/A

📍 3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111

Effective as of 01-MAR-24

FARHAT, KELLI, OT

Provider ID: N/A

📍 3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111

Effective as of 01-APR-22

HUDSON, BONNIE, OT

Provider ID: N/A

📍 4445 EASTGATE MALL STE
103

SAN DIEGO, CA 92121

Effective as of 01-NOV-21

HUDSON, BONNIE, OT

Provider ID: N/A

📍 88 E BONITA RD
STE C
SAN DIEGO, CA 92121

Effective as of 01-NOV-21

LOPEZ, ALYSSA-NICOLE, OT

Provider ID: N/A

📍 3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111

Effective as of 01-DEC-23

MANECKE, KRISTEN, OT

Provider ID: N/A

📍 9333 GENESEE AVE STE
350B
SAN DIEGO, CA 92121

Effective as of 01-SEP-22

OPHTHALMOLOGY

ARNETT, JUSTIN, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

ARNETT, JUSTIN, MD

Provider ID: N/A

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-SEP-23

ARNETT, JUSTIN, MD

Provider ID: N/A

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

AVALLONE, THOMAS, MD†

Provider ID: N/A

📍 3939 3RD AVE
SAN DIEGO, CA 92103

Effective as of 01-AUG-24

AVALLONE, THOMAS, MD

Provider ID: N/A

📍 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121

Effective as of 01-MAR-24

BINDER, NICHOLAS, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Effective as of 01-JAN-21

BINDER, NICHOLAS, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Effective as of 01-MAR-18

BOECKMANN, JESSICA, MD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Effective as of 01-JAN-21

BOLO, KYLE, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

BOLO, KYLE, MD

Provider ID: N/A

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Effective as of 01-SEP-23

BOLO, KYLE, MD

Provider ID: N/A

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

CHANG, TOM, MD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2

SAN DIEGO, CA 92111

Effective as of 01-SEP-22

CHOPLIN, NEIL, MD†

Provider ID: N/A

📍 3939 3RD AVE
SAN DIEGO, CA 92103

Effective as of 01-FEB-07

CHOPLIN, NEIL, MD†

Provider ID: N/A

📍 3939 3RD AVE
SAN DIEGO, CA 92103

Effective as of 01-JUL-21

CHOPLIN, NEIL, MD†

Provider ID: N/A

📍 3939 3RD AVE
SAN DIEGO, CA 92103

Effective as of 01-APR-22

COCKERHAM, KIMBERLY, MD

Provider ID: N/A

📍 3590 CAMINO DEL RIO N
STE 200

SAN DIEGO, CA 92108

Effective as of 01-MAY-24

COURIS, MICHAEL, MD†

Provider ID: N/A

📍 3969 4TH AVE STE 301
SAN DIEGO, CA 92103

Effective as of 01-FEB-07

CU-UNJIENG, ANDREW, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 405
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

ESLANI, MEDI, MD

Provider ID: N/A

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

C1. Lista de proveedores de la red Médico de atención especializada

ESLANI, MEDI, MD

Provider ID: N/A

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

ESLANI, MEDI, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

GUALTIERI, CHRISTOPHER, MD†

Provider ID: N/A

3969 4TH AVE STE 300
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

GUALTIERI, CHRISTOPHER, MD†

Provider ID: N/A

3969 4TH AVE STE 300
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

HAAK, LOGAN, MD†

Provider ID: N/A

1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
Effective as of 01-JAN-24

HANDLER, SUZANNE, MD†

Provider ID: N/A

3969 4TH AVE STE 301
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

HUDSON, HENRY, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-22

HUDSON, HENRY, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-APR-23

HUYNH, PAUL, MD†

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-JAN-21

HUYNH, PAUL, MD†

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-JAN-21

HUYNH, PAUL, MD†

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-OCT-22

JACOBSEN, BRADLEY, MD

Provider ID: N/A

7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123
Effective as of 01-OCT-23

JACOBSEN, BRADLEY, MD

Provider ID: N/A

7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

KEEFE, KELLY, MD†

Provider ID: N/A

3969 4TH AVE STE 301
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

KHAN, FAHAD, MD†

Provider ID: N/A

233 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

KHAN, FAHAD, MD†

Provider ID: N/A

233 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-22

KHATIB, NORA, MD†

Provider ID: N/A

4060 4TH AVE STE 640
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

KHATIB, NORA, MD†

Provider ID: N/A

4060 4TH AVE STE 640
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

KYTASTY, CHRISTINA, DO

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-MAY-24

KYTASTY, CHRISTINA, DO

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-MAY-24

LANG, PAUL, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-SEP-23

LANG, PAUL, MD

Provider ID: N/A

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

MANI, NASRIN, MD

Provider ID: N/A

📍 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Effective as of 01-AUG-24

MCGRAW, JOSEPH, MD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JUN-18

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD

SAN DIEGO, CA 92115
Effective as of 01-MAR-23

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-APR-23

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

MORTON, ASA, MD

Provider ID: N/A

📍 3939 3RD AVE BLDG B
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

MORTON, ASA, MD†

Provider ID: N/A

📍 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-APR-22

MORTON, ASA, MD

Provider ID: N/A

📍 3939 3RD AVE STE B
SAN DIEGO, CA 92103
Effective as of 01-APR-24

MORTON, ASA, MD†

Provider ID: N/A

📍 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-MAY-24

MORTON, ASA, MD†

Provider ID: N/A

📍 3939 3RD AVE
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

MOSS, JASON, MD†

Provider ID: N/A

📍 5555 RESERVOIR DR STE
201
SAN DIEGO, CA 92120
Effective as of 01-JAN-23

NGUYEN, VINCENT, MD

Provider ID: N/A

📍 7695 CARDINAL CT STE S
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

NGUYEN, VINCENT, MD†

Provider ID: N/A

📍 7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123
Effective as of 01-APR-20

PATEL, SARJAN, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-AUG-20

PATEL, SARJAN, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-14

PATEL, SARJAN, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

PATEL, GITANE, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

C1. Lista de proveedores de la red Médico de atención especializada

PATEL, SARJAN, MD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PATEL, GITANE, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-MAR-18

PERRY, ARTHUR, MD

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-APR-23

PHAN, RYAN, MD

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-APR-23

PHAN, RYAN, MD

Provider ID: N/A

10737 CAMINO RUIZ STE
100
SAN DIEGO, CA 92126
Effective as of 01-APR-23

PHAN, RYAN, MD

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-JAN-24

PHAN, RYAN, MD†

Provider ID: N/A

10737 CAMINO RUIZ
SAN DIEGO, CA 92126
Effective as of 01-SEP-22

PHAN, RYAN, MD†

Provider ID: N/A

10737 CAMINO RUIZ
SAN DIEGO, CA 92126
Effective as of 01-OCT-22

PONS, MAURICIO, MD

Provider ID: N/A

1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Effective as of 01-MAY-23

PRABHU, SUJATA, MD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PRABHU, SUJATA, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

PRABHU, SUJATA, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

PRABHU, SUJATA, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-FEB-18

PRABHU, SUJATA, MD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-APR-22

PRABHU, SUJATA, MD†

Provider ID: N/A

6945 EL CAJON BLVD

SAN DIEGO, CA 92115
Effective as of 01-AUG-20

PRABHU, SUJATA, MD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-DEC-20

PUIG LLANO, MANUEL, MD

Provider ID: N/A

4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

ROBINSON, FANE, MD†

Provider ID: N/A

7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123
Effective as of 01-SEP-15

ROBINSON, FANE, MD

Provider ID: N/A

7695 CARDINAL CT STE S
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

ROESKE, RICHMOND, MD

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-JUL-24

ROESKE, RICHMOND, MD

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-SEP-23

ROESKE, RICHMOND, MD

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-SEP-23

ROESKE, RICHMOND, MD

Provider ID: N/A

📄 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

ROESKE, RICHMOND, MD

Provider ID: N/A

📄 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

SATTERFIELD, KELLIE, MD

Provider ID: N/A

📄 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-MAR-24

SATTERFIELD, KELLIE, MD

Provider ID: N/A

📄 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

SATTERFIELD, KELLIE, MD

Provider ID: N/A

📄 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

SATTERFIELD, KELLIE, MD

Provider ID: N/A

📄 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-JUL-24

SHEILS, CATHERINE, MD

Provider ID: N/A

📄 5330 CARROLL CANYON
RD STE 210

SAN DIEGO, CA 92121
Effective as of 01-JUL-24

SHEILS, CATHERINE, MD

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SHEILS, CATHERINE, MD

Provider ID: N/A

📄 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-FEB-24

SHEILS, CATHERINE, MD

Provider ID: N/A

📄 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

📄 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

📄 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

📄 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

📄 3939 3RD AVE

SAN DIEGO, CA 92103
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

📄 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

SHOJI, MARISSA, MD

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

SHOJI, MARISSA, MD

Provider ID: N/A

📄 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

SMITH, WILLIAM, MD

Provider ID: N/A

📄 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-JUL-24

SMITH, MARK, MD

Provider ID: N/A

📄 7695 CARDINAL CT STE S
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

SMITH, WILLIAM, MD

Provider ID: N/A

📄 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

SONG, DELU, MD

Provider ID: N/A

📄 7695 CARDINAL CT STE 100

C1. Lista de proveedores de la red Médico de atención especializada

SAN DIEGO, CA 92123
Effective as of 01-DEC-23

SONG, DELU, MD

Provider ID: N/A
☒ 7695 CARDINAL CT STE S
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

SONG, DELU, MD

Provider ID: N/A
☒ 7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123
Effective as of 01-OCT-23

WARLEN, MARK, MD†

Provider ID: N/A
☒ 3720 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

YAMADA, KENTARO, MD†

Provider ID: N/A
☒ 1040 UNIVERSITY AVE STE
B209A
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

YAMADA, KENTARO, MD†

Provider ID: N/A
☒ 1040 UNIVERSITY AVE STE
B209A
SAN DIEGO, CA 92103
Effective as of 01-DEC-22

ZABANEH, ALEXANDER, MD†

Provider ID: N/A
☒ 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-JAN-21

ZABANEH, ALEXANDER, MD†

Provider ID: N/A
☒ 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Effective as of 01-JAN-21

ZHAO, TAILUN, MD

Provider ID: N/A
☒ 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-JAN-24

OPTOMETRIST

AOTO, KIM, OD†

Provider ID: N/A
☒ 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-JAN-21

AOTO, KIM, OD†

Provider ID: N/A
☒ 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

AOTO, KIM, OD†

Provider ID: N/A
☒ 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

AOTO, KIM, OD†

Provider ID: N/A
☒ 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

AOTO, KIM, OD†

Provider ID: N/A
☒ 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

AOTO, KIM, OD†

Provider ID: N/A
☒ 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

DYER, SHARON, OD

Provider ID: N/A
☒ 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-FEB-24

DYER, SHARON, OD†

Provider ID: N/A
☒ 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

EL-MOGHRABI, ROULA, OD†

Provider ID: N/A
☒ 9855 ERMA RD STE 105
SAN DIEGO, CA 92131
Effective as of 01-SEP-22

HAN, SUL KI, OD†

Provider ID: N/A
☒ 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-DEC-22

HO, HOANG, OD

Provider ID: N/A
☒ 7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
Effective as of 01-JAN-21

HO, HOANG, OD

Provider ID: N/A
☒ 10737 CAMINO RUIZ STE
215-220
SAN DIEGO, CA 92126
Effective as of 01-JAN-21

HO, HOANG, OD

Provider ID: N/A
☒ 4206 44TH ST
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

JOMOC, CAITLIN, OD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

JOMOC, CAITLIN, OD

Provider ID: N/A

📄 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-FEB-24

JULAZADEH, SARA, OD†

Provider ID: N/A

📄 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

KHALIL, VADY, OD†

Provider ID: N/A

📄 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-NOV-22

KHALIL, VADY, OD†

Provider ID: N/A

📄 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-NOV-22

KIM, PHILIP, OD†

Provider ID: N/A

📄 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-MAR-22

MARR, RYAN, OD

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JUL-24

MARR, RYAN, OD

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Effective as of 01-DEC-22

MARR, RYAN, OD

Provider ID: N/A

📄 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-DEC-22

MARR, RYAN, OD

Provider ID: N/A

📄 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-JUL-24

RING, ROBERT, OD

Provider ID: N/A

📄 13223 BLACK MOUNTAIN
RD STE 6
SAN DIEGO, CA 92129
Effective as of 01-FEB-24

SCHWAB, GARY, OD†

Provider ID: N/A

📄 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

SCHWAB, GARY, OD†

Provider ID: N/A

📄 4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

TAUNTON, PHILIP, OD†

Provider ID: N/A

📄 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

TAUNTON, PHILIP, OD†

Provider ID: N/A

📄 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

TONNU, ANH, OD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

TONNU, ANH, OD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-AUG-24

TONNU, ANH, OD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

TONNU, ANH, OD†

Provider ID: N/A

📄 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-JAN-21

TONNU, ANH, OD†

Provider ID: N/A

📄 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

VINH, JOHN, OD†

Provider ID: N/A

📄 2240 E PLAZA BLVD
STE F AND G
SAN DIEGO, CA 92102
Effective as of 01-SEP-20

VINH, JOHN, OD†

Provider ID: N/A

📄 2240 E PLAZA BLVD
STE F AND G
SAN DIEGO, CA 92102
Effective as of 01-JAN-21

YU, CAROL, OD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

YU, CAROL, OD

Provider ID: N/A

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

YU, CAROL, OD

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-SEP-23

ZVANUT, DONALD, OD

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-AUG-24

ORAL MAXILLOFACIAL SURGEON

ELI, BRADLEY, DMD

Provider ID: N/A

📍 5830 OBERLIN DR STE 202
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

MEHROTRA, SACHI, DDS

Provider ID: N/A

📍 5830 OBERLIN DR STE 202
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

OTOLARYNGOLOGY

ABDOU, RAMI, MD†

Provider ID: N/A

📍 5405 OBERLIN DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

BANTHIA, VISHAL, MD†

Provider ID: N/A

📍 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-AUG-21

BANTHIA, VISHAL, MD†

Provider ID: N/A

📍 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-SEP-21

BRUMUND, KEVIN, MD

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

BRUMUND, KEVIN, MD

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

BUSH, JAMES, MD†

Provider ID: N/A

📍 3805 FRONT ST
SAN DIEGO, CA 92103*
Effective as of 01-AUG-20

CALIFANO, JOSEPH, MD

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

CALZADA, AUDREY, MD†

Provider ID: N/A

📍 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Effective as of 01-OCT-22

CALZADA, AUDREY, MD†

Provider ID: N/A

📍 5405 OBERLIN DR
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-OCT-19

CALZADA, AUDREY, MD†

Provider ID: N/A

📍 5405 OBERLIN DR
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-JAN-21

CHANG, EDWARD, MD

Provider ID: N/A

📍 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Effective as of 01-MAR-24

COFFEY, CHARLES, MD

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

COFFEY, CHARLES, MD

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-MAY-23

COFFEY, CHARLES, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

DECONDE, ADAM, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

DECONDE, ADAM, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

DECONDE, ADAM, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

DONALDSON, CHADWICK, MD†

Provider ID: N/A

4033 3RD AVE STE 104
SAN DIEGO, CA 92103

Effective as of 01-OCT-21

DRISKILL, BRENT, MD†

Provider ID: N/A

4033 3RD AVE STE 104
SAN DIEGO, CA 92103

Effective as of 01-OCT-21

DRISKILL, BRENT, MD†

Provider ID: N/A

4033 3RD AVE STE 104
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

FRIEDMAN, RICK, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

FRIEDMAN, RICK, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

FRIEDMAN, RICK, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

GREENE, JACQUELINE, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

GREENE, JACQUELINE, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

GREENE, JACQUELINE, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

GUO, THERESA, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

GUO, THERESA, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

HAUFF, SAMANTHA, MD†

Provider ID: N/A

4282 GENESEE AVE STE
202
SAN DIEGO, CA 92117

Effective as of 01-JAN-21

C1. Lista de proveedores de la red Médico de atención especializada

HAUFF, SAMANTHA, MD

Provider ID: N/A

📄 4282 GENESEE AVE STE
201
SAN DIEGO, CA 92117
Effective as of 01-JAN-23

HAUFF, SAMANTHA, MD

Provider ID: N/A

📄 4282 GENESEE AVE STE
201
SAN DIEGO, CA 92117
Effective as of 01-APR-23

HAUFF, SAMANTHA, MD†

Provider ID: N/A

📄 4282 GENESEE AVE STE
202
SAN DIEGO, CA 92117
Effective as of 01-AUG-20

HAUFF, SAMANTHA, MD†

Provider ID: N/A

📄 4282 GENESEE AVE STE
202
SAN DIEGO, CA 92117
Effective as of 01-MAY-22

HOM, DAVID, MD

Provider ID: N/A

📄 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

HOM, DAVID, MD†

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

📄 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

📄 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

📄 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

HUSSEMAN, JACOB, MD

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

HUSSEMAN, JACOB, MD

Provider ID: N/A

📄 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-AUG-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

📄 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

📄 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

KARI, ELINA, MD

Provider ID: N/A

📄 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

KARI, ELINA, MD†

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

KARI, ELINA, MD

Provider ID: N/A

📄 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A

📄 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A

📄 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

CI. Lista de proveedores de la red Médico de atención especializada

MAGIT, ANTHONY, MD[†]

Provider ID: N/A

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
Effective as of 01-OCT-20

MATSUOKA, AKIHIRO, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

MIYA, GARY, MD[†]

Provider ID: N/A

4060 4TH AVE STE 410
SAN DIEGO, CA 92103
Effective as of 01-JAN-18

NGUYEN, QUYEN, MD[†]

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

NGUYEN, QUYEN, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

NGUYEN, QUYEN, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

SALL, EDWARD, DDS

Provider ID: N/A

5471 KEARNY VILLA RD STE
201
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

SCHALCH LEPE, PAUL, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD[†]

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

TORCHINSKY, CYRUS, MD[†]

Provider ID: N/A

4060 4TH AVE STE 410
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

TORCHINSKY, CYRUS, MD[†]

Provider ID: N/A

4060 4TH AVE STE 410
SAN DIEGO, CA 92103
Effective as of 01-FEB-18

TORCHINSKY, CYRUS, MD[†]

Provider ID: N/A

4060 4TH AVE STE 410
SAN DIEGO, CA 92103*
Effective as of 01-SEP-15

VAHABZADEH-HAGH, ANDREW, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

VAHABZADEH-HAGH, ANDREW, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

VAHABZADEH-HAGH, ANDREW, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

WATSON, DEBORAH, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

WATSON, DEBORAH, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

WATSON, DEBORAH, MD[†]

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

C1. Lista de proveedores de la red Médico de atención especializada

WEISSBROD, PHILIP, MD

Provider ID: N/A

200 W ARBOR DR STE 505
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

YAN, CAROL, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

YAN, CAROL, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

YAN, CAROL, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

PATHOLOGY ANATOMIC CLINICAL

LIN, GRACE, MD†

Provider ID: N/A

200 W ARBOR DR

SAN DIEGO, CA 92103
Effective as of 01-FEB-22

MAHOOTI, SEPI, MD†

Provider ID: N/A

16835 W BERNARDO DR
STE 212
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-DEC-22

SONG, WEI, MD

Provider ID: N/A

10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
Effective as of 01-JUL-23

STEPHENS, LAURA, MD

Provider ID: N/A

10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
Effective as of 01-JUL-23

USMANI, AMENA, MD

Provider ID: N/A

10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
Effective as of 01-APR-23

PEDIATRIC RADIOLOGY

DWEK, JERRY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

DWEK, JERRY, MD†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

DWEK, JERRY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

EVORA, DARRYL, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

EVORA, DARRYL, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

EVORA, DARRYL, MD†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

KONING, JEFFREY, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

KONING, JEFFREY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

KONING, JEFFREY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

KRUK, PETER, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

C1. Lista de proveedores de la red Médico de atención especializada

PUGMIRE, BRIAN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

PUGMIRE, BRIAN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

PUGMIRE, BRIAN, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

PEDIATRICS

ALLSUP, VICTORIA, MD

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-NOV-23

ALLSUP, VICTORIA, MD

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-NOV-23

ANDREE, GREGOR, MD

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

ANDREE, GREGOR, MD

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-SEP-22

BAI-TONG, SHIYU, MD

Provider ID: N/A

3750 CONVOY ST
STE 312
SAN DIEGO, CA 92111
Effective as of 01-AUG-24

DOAN STEPHENS, CRYSTAL, MD†

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

DOAN STEPHENS, CRYSTAL, MD†

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-SEP-22

GIBONEY, JENNIFER, MD

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-FEB-23

GIBONEY, JENNIFER, MD

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-23

GROBMAN, LILLIAN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAR-22

HUBBARD, EUSTRATIA, MD

Provider ID: N/A

3750 CONVOY ST

STE 312

SAN DIEGO, CA 92111
Effective as of 01-AUG-24

KARMAKAR, KANKA, MD

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Teleservice
Effective as of 01-JAN-21

LEFF, MICHELLE, MD

Provider ID: N/A

3750 CONVOY ST
STE 312
SAN DIEGO, CA 92111
Effective as of 01-AUG-24

MARC-AURELE, KRISHELLE, MD

Provider ID: N/A

7910 FROST ST STE 230
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

MATOBA, NANA, MD

Provider ID: N/A

3750 CONVOY ST
STE 312
SAN DIEGO, CA 92111
Effective as of 01-AUG-24

SAUER, CHARLES, DO

Provider ID: N/A

3750 CONVOY ST
STE 312
SAN DIEGO, CA 92111
Effective as of 01-AUG-24

SONG, RICHARD, MD

Provider ID: N/A

7910 FROST ST STE 230
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

C1. Lista de proveedores de la red Médico de atención especializada

SUTTNER, DENISE, MD

Provider ID: N/A

7910 FROST ST STE 230
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

WEISS, KATHERINE, MD

Provider ID: N/A

7910 FROST ST STE 230
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

ZAHEER, AARON, MD†

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

ZAHEER, AARON, MD†

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-SEP-22

PHYS MED/ REHAB PAIN MEDICINE

HURSCHMAN, ALAN, MD†

Provider ID: N/A

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-AUG-24

KATZEN, SETH, DO

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-MAY-23

KATZEN, SETH, DO

Provider ID: N/A

9333 GENESEE AVE STE

350
SAN DIEGO, CA 92121
Effective as of 01-MAR-24

KOLODGE, GAVIN, DO

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-JUN-23

RICHARDSON, HENRY, MD†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Effective as of 01-JUN-23

PHYSICAL MEDICINE / REHABILITATION

BULLOCK, ANDREW, DO†

Provider ID: N/A

1855 1ST AVE STE 200
SAN DIEGO, CA 92101
Effective as of 01-JUL-22

BULLOCK, ANDREW, DO†

Provider ID: N/A

1855 1ST AVE STE 200
SAN DIEGO, CA 92101
Effective as of 01-JAN-21

BULLOCK, ANDREW, DO

Provider ID: N/A

1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
Effective as of 01-APR-24

CHANG, ENOCH, MD

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JUN-24

CHANG, ENOCH, MD

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-SEP-23

CHANG, ENOCH, MD

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-AUG-23

GAVRILYUK, OLEG, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2302
SAN DIEGO, CA 92120
Effective as of 01-SEP-20

GAVRILYUK, OLEG, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2302
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

KATZEN, SETH, DO

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-22

KATZEN, SETH, DO

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-APR-23

KOLODGE, GAVIN, DO

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-SEP-23

MERCADO, JEFFRY, MD

Provider ID: N/A

☞ 6719 ALVARADO RD STE
308

SAN DIEGO, CA 92120

Effective as of 01-JUL-24

SCOTT, ROBERT, MD

Provider ID: N/A

☞ 6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-FEB-24

TAHAEI, SEYED, MD†

Provider ID: N/A

☞ 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice

Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

ABRAHAMSEN, KELSEY, PA

Provider ID: N/A

☞ 3737 MORAGA AVE STE
B103

SAN DIEGO, CA 92117

Effective as of 01-JAN-21

ABRAHAMSEN, KELSEY, PA

Provider ID: N/A

☞ 4142 ADAMS AVE STE 102
SAN DIEGO, CA 92116

Effective as of 01-APR-22

ABRAHAMSEN, KELSEY, PA

Provider ID: N/A

☞ 555 W C ST STE 102
SAN DIEGO, CA 92101

Effective as of 01-JAN-21

AHN, JORDAN, PA

Provider ID: N/A

☞ 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JUN-24

ALBRIGHT, KELSEY, PA†

Provider ID: N/A

☞ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-21

ALYAS, ALISIA, PA

Provider ID: N/A

☞ 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-21

ALYAS, ALISIA, PA

Provider ID: N/A

☞ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-21

ANDERSON, MATTHEW, PA

Provider ID: N/A

☞ 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Effective as of 01-FEB-24

ANDERSON, CARLEY, PA†

Provider ID: N/A

☞ 11865 CARMEL MOUNTAIN
RD STE 1104

SAN DIEGO, CA 92128

Effective as of 01-DEC-21

ARMENTA, JORGE, PA

Provider ID: N/A

☞ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-MAY-21

ARROYO, VANIA, PA

Provider ID: N/A

☞ 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Effective as of 01-MAR-23

BASIN, NATALIE, PA†

Provider ID: N/A

☞ 12843 EL CAMINO REAL
STE 203

SAN DIEGO, CA 92130

Teleservice

Effective as of 01-FEB-21

BEITTER, KEERSTIN, PA†

Provider ID: N/A

☞ 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Effective as of 01-MAR-22

BEITTER, KEERSTIN, PA

Provider ID: N/A

☞ 3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-JUL-24

BERRY, MEGHAN, PA

Provider ID: N/A

☞ 6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-AUG-24

BRAVO, RICARDO, PA

Provider ID: N/A

☞ 3490 PALM AVE
SAN DIEGO, CA 92154

Effective as of 01-JUL-23

BROWN, COLLEEN, PA

Provider ID: N/A

☞ 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-APR-24

BRUECKNER, TAMMIE, PA

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

CRITES, LAURA, PA

Provider ID: N/A

📍 3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117

Teleservice

Effective as of 01-SEP-22

DANESHVAR, ABRAHAM, PA†

Provider ID: N/A

📍 9610 GRANITE RIDGE DR
STE B
SAN DIEGO, CA 92123

Effective as of 01-SEP-22

DARZI, MARIAM, PA

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-OCT-23

DU, SARAH, PA

Provider ID: N/A

📍 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Teleservice

Effective as of 01-APR-24

ELLIOTT, GRACE, PA

Provider ID: N/A

📍 3180 UNIVERSITY AVE STE
120
SAN DIEGO, CA 92104

Teleservice

Effective as of 01-JUN-24

ELLIOTT, GRACE, PA

Provider ID: N/A

📍 3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117

Teleservice

Effective as of 01-JUN-24

ENCE, EMILY, PA

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

ESTES, SAMANTHA, PA†

Provider ID: N/A

📍 3969 4TH AVE STE 208
SAN DIEGO, CA 92103
Effective as of 01-MAR-23

ESTES, SAMANTHA, PA†

Provider ID: N/A

📍 3969 4TH AVE STE 208
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

FLORES, BRIANNA, PA

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice

Effective as of 01-JUN-24

GUTH, CARA, PA†

Provider ID: N/A

📍 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-JUL-21

GUTH, CARA, PA†

Provider ID: N/A

📍 9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Teleservice

Effective as of 01-JAN-24

GUZMAN, HORTENCIA, PA

Provider ID: N/A

📍 3490 PALM AVE
SAN DIEGO, CA 92154
Effective as of 01-JUL-23

HABBOUSH, RANA, PA

Provider ID: N/A

📍 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-OCT-23

HABBOUSH, RANA, PA

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-OCT-23

HARMEYER, JENNA, PA

Provider ID: N/A

📍 3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-OCT-23

HARRIS, CHRISTINA, PA

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice

Effective as of 01-APR-24

HAZAN, ALISON, PA

Provider ID: N/A

📍 12843 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130

Effective as of 01-DEC-21

HIGGINS, JOSHUA, PA†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

📄 203 W F ST
SAN DIEGO, CA 92101
Effective as of 01-JAN-22

HIGUERA, EDITH, PA

Provider ID: N/A

📄 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

HIGUERA, EDITH, PA

Provider ID: N/A

📄 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

HO, HOANG, PA

Provider ID: N/A

📄 4551 EL CAJON BLVD
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-OCT-23

HO, HOANG, PA

Provider ID: N/A

📄 2418 ULRIC ST
SAN DIEGO, CA 92111
Teleservice
Effective as of 01-OCT-23

HUNTER, JACOB, PA

Provider ID: N/A

📄 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

HUNTER, JACOB, PA†

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

HUNTER, JACOB, PA†

Provider ID: N/A

📄 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

KHALEGHI, MANI, PA†

Provider ID: N/A

📄 5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

KHALEGHI, MANI, PA†

Provider ID: N/A

📄 5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-AUG-24

LAM, CLAUDIA, PA

Provider ID: N/A

📄 3811 EL CAJON BLVD
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUL-24

LEWIS, DEVON, PA

Provider ID: N/A

📄 555 W C ST STE 102
SAN DIEGO, CA 92101
Teleservice
Effective as of 01-AUG-22

LINDEMANN, CHRISTINA, PA†

Provider ID: N/A

📄 4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
Effective as of 01-AUG-21

LONGOBARDO, FRANCESCA, PA†

Provider ID: N/A

📄 9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

MADAN, SAKSHI, PA†

Provider ID: N/A

📄 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-AUG-22

MARTIN, HALEY, PA

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

MERCER, KELLY, PA†

Provider ID: N/A

📄 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-APR-21

MERCER, KELLY, PA†

Provider ID: N/A

📄 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-APR-21

MOLINA, MYRNA, PA

Provider ID: N/A

📄 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-24

MOORMAN, KRISTA, PA

Provider ID: N/A

📄 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-MAR-23

MOREO, HUNTER, PA

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JUL-24

MOREO, HUNTER, PA

Provider ID: N/A

📍 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Teleservice

Effective as of 01-JUL-24

MURRAY, BREANNA, PA

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-FEB-21

NELMS, MICHAEL, PA†

Provider ID: N/A

📍 4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

NGUYEN, THUY-VY, PA†

Provider ID: N/A

📍 4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-MAR-22

NGUYEN, THUY-VY, PA†

Provider ID: N/A

📍 4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-NOV-23

NGUYEN, THUY-VY, PA†

Provider ID: N/A

📍 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-NOV-23

NGUYEN, THUY-VY, PA†

Provider ID: N/A

📍 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-AUG-22

NGUYEN, THUY-VY, PA†

Provider ID: N/A

📍 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-MAR-22

PAUL, ROBERT, PA

Provider ID: N/A

📍 5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123

Effective as of 01-JUL-24

PELIO, DARREN, PA†

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Effective as of 01-SEP-22

PELIO, DARREN, PA†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-22

PERREAULT, MARK, PA†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

PERREAULT, MARK, PA†

Provider ID: N/A

📍 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-AUG-21

PHAM, JENNIFER, PA

Provider ID: N/A

📍 3900 5TH AVE STE 220
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-OCT-23

PHAM, SANDY, PA

Provider ID: N/A

📍 6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-JUN-24

PHUNG, AIVI, PA†

Provider ID: N/A

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

PHUNG, AIVI, PA†

Provider ID: N/A

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

PICKERING, OANA, PA

Provider ID: N/A

📍 555 W C ST STE 102
SAN DIEGO, CA 92101

Effective as of 01-MAY-23

POGGI, SARA, PA

Provider ID: N/A

📍 5405 OBERLIN DR FL 2

C1. Lista de proveedores de la red Médico de atención especializada

SAN DIEGO, CA 92121
Teleservice
Effective as of 01-APR-24

POST, LACEY, PA

Provider ID: N/A
📄 12843 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130
Effective as of 01-DEC-21

PRIJATEL, SABRINA, PA

Provider ID: N/A
📄 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

PYLE, ALEXANDRA, PA

Provider ID: N/A
📄 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

PYLE, ALEXANDRA, PA

Provider ID: N/A
📄 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

QUIJANO, GLENN, PA

Provider ID: N/A
📄 5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-MAY-24

QUIJANO, GLENN, PA†

Provider ID: N/A
📄 2100 5TH AVE STE 200
SAN DIEGO, CA 92101
Teleservice
Effective as of 01-AUG-22

RAI, GEORGINA, PA†

Provider ID: N/A
📄 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

RALL, EMILY, PA

Provider ID: N/A
📄 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Effective as of 01-JAN-21

SCHOELLER, BIANCA, PA†

Provider ID: N/A
📄 3180 UNIVERSITY AVE STE
120
SAN DIEGO, CA 92104
Effective as of 01-DEC-21

SHARPE, NORMA, PA

Provider ID: N/A
📄 316 25TH ST
SAN DIEGO, CA 92102
Teleservice
Effective as of 01-JAN-23

SHIVELY, JEANNINE, PA†

Provider ID: N/A
📄 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-FEB-21

SMITH, ALLISON, PA

Provider ID: N/A
📄 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-MAY-24

SMITH, ALLISON, PA

Provider ID: N/A
📄 9095 RIO SAN DIEGO DR
STE 300
SAN DIEGO, CA 92108
Effective as of 01-AUG-24

SMITH, ALLISON, PA

Provider ID: N/A
📄 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-MAY-24

SMITH, ALLISON, PA

Provider ID: N/A
📄 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-MAY-24

SNYDER, AMANDA, PA

Provider ID: N/A
📄 4033 3RD AVE STE 104
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-OCT-23

SNYDER, AMANDA, PA

Provider ID: N/A
📄 4033 3RD AVE STE 104
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JUN-24

SPEH, BRIAN, PA

Provider ID: N/A
📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-MAR-24

STIFF, TYLER, PA

Provider ID: N/A
📄 5395 RUFFIN RD STE 201
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-APR-24

SUPERNAW, AMY, PA†

Provider ID: N/A
📄 3900 5TH AVE STE 110

C1. Lista de proveedores de la red Médico de atención especializada

SAN DIEGO, CA 92103
Teleservice
Effective as of 01-FEB-21

TAYLOR, RYAN, PA

Provider ID: N/A
📄 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-23

TAYLOR, RYAN, PA

Provider ID: N/A
📄 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-23

TAYLOR, RYAN, PA

Provider ID: N/A
📄 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

TRIMLETT, COLLEEN, PA

Provider ID: N/A
📄 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-MAY-21

VALENCIA, JESUS, PA

Provider ID: N/A
📄 995 GATEWAY CENTER
WAY STE 202
SAN DIEGO, CA 92102
Teleservice
Effective as of 01-NOV-23

VANOCKER, KARI, PA

Provider ID: N/A
📄 3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-MAR-23

VAQUERA, JACQUELINE, PA

Provider ID: N/A
📄 3811 EL CAJON BLVD
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-AUG-24

WAHLIN, TAMARA, PA

Provider ID: N/A
📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

WAHLIN, TAMARA, PA

Provider ID: N/A
📄 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-JUN-23

WAHLIN, TAMARA, PA

Provider ID: N/A
📄 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

WALSH, HEATHER, PA†

Provider ID: N/A
📄 3969 4TH AVE STE 208
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

WEBB, SHANNON, PA

Provider ID: N/A
📄 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-MAR-24

WEBB, SHANNON, PA

Provider ID: N/A
📄 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Teleservice

Effective as of 01-MAY-23

WEIR, JACQUELINE, PA†

Provider ID: N/A
📄 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Effective as of 01-APR-21

WEIR, JACQUELINE, PA†

Provider ID: N/A
📄 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-APR-21

WEIR, JACQUELINE, PA†

Provider ID: N/A
📄 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-APR-21

WHITEAKER, ARIKA, PA

Provider ID: N/A
📄 12843 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130
Teleservice
Effective as of 01-JUN-24

WILAND, WINONA, PA

Provider ID: N/A
📄 5405 OBERLIN DR STE 2
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-JUN-23

WRIGHT, DEREK, PA

Provider ID: N/A
📄 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice
Effective as of 01-AUG-23

WRIGHT, DEREK, PA

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice

Effective as of 01-JUL-23

WRIGHT, DEREK, PA

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice

Effective as of 01-NOV-23

PODIATRIST

ALMIRANTE, MARIA ELENA, DPM

Provider ID: N/A

1016 OUTER RD
SAN DIEGO, CA 92154

Effective as of 01-JUL-22

ALMIRANTE, MARIA ELENA, DPM

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-JUL-22

ALMIRANTE, MARIA ELENA, DPM

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

Effective as of 01-JUL-22

ALMIRANTE, MARIA ELENA, DPM

Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105

Effective as of 01-JUL-22

BROOKSHIER, TRENT, DPM

Provider ID: N/A

3989 32ND ST
SAN DIEGO, CA 92104

Teleservice

Effective as of 01-DEC-23

BUI, JOSEPH, DPM

Provider ID: N/A

5354 UNIVERSITY AVE STE
2

SAN DIEGO, CA 92105

Effective as of 01-AUG-23

BUI, JOSEPH, DPM

Provider ID: N/A

11205 VIA CARROZA
SAN DIEGO, CA 92124

Effective as of 01-APR-23

COLLINS, MICHAEL, DPM†

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-NOV-15

COLLINS, MICHAEL, DPM†

Provider ID: N/A

9333 GENESEE AVE STE
350A

SAN DIEGO, CA 92121

Effective as of 01-SEP-22

COLLINS, MICHAEL, DPM†

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JAN-21

COLLINS, MICHAEL, DPM†

Provider ID: N/A

9333 GENESEE AVE STE
350A

SAN DIEGO, CA 92121

Effective as of 01-AUG-23

COLLINS, MICHAEL, DPM†

Provider ID: N/A

9333 GENESEE AVE STE
350A

SAN DIEGO, CA 92121

Effective as of 01-JAN-21

COLLINS, MICHAEL, DPM†

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-APR-23

CULLEN, BENJAMIN, DPM†

Provider ID: N/A

2650 CAMINO DEL RIO N
STE 101

SAN DIEGO, CA 92108

Effective as of 01-APR-17

FOYGELMAN, ALEKSANDR, DPM†

Provider ID: N/A

4712 EL CAJON BLVD STE D
SAN DIEGO, CA 92115

Effective as of 01-JAN-21

FOYGELMAN, ALEKSANDR, DPM†

Provider ID: N/A

4712 EL CAJON BLVD STE D
SAN DIEGO, CA 92115

Effective as of 01-JAN-24

FOYGELMAN, ALEKSANDR, DPM†

Provider ID: N/A

4712 EL CAJON BLVD STE D
SAN DIEGO, CA 92115

Effective as of 01-JUL-22

FOYGELMAN, ALEKSANDR,

C1. Lista de proveedores de la red Médico de atención especializada

DPM†

Provider ID: N/A

4712 EL CAJON BLVD STE D
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

JOLLEY, WALTER, DPM

Provider ID: N/A

5222 BALBOA AVE STE 41
SAN DIEGO, CA 92117
Effective as of 01-SEP-20

JOLLEY, WALTER, DPM

Provider ID: N/A

5222 BALBOA AVE STE 41
SAN DIEGO, CA 92117
Effective as of 01-APR-15

LEE, RYAN, DPM†

Provider ID: N/A

2650 CAMINO DEL RIO N
STE 101
SAN DIEGO, CA 92108
Effective as of 01-APR-17

MANCHEL, BRUCE, DPM

Provider ID: N/A

1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Effective as of 01-JUL-24

QUINN, MICHAEL, DPM†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-FEB-07

QUINN, MICHAEL, DPM†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-JUL-17

RICE, BRITTANY, DPM†

Provider ID: N/A

2650 CAMINO DEL RIO N
STE 200
SAN DIEGO, CA 92108
Effective as of 01-OCT-17

TOUMA, ELIE, DPM

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Effective as of 01-APR-23

VALLONE, ROBERT, DPM†

Provider ID: N/A

3363 4TH AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-17

WILSON, MATTHEW, DPM†

Provider ID: N/A

5555 RESERVOIR DR STE
104
SAN DIEGO, CA 92120
Effective as of 01-FEB-22

PREVENTATIVE MEDICINE GENERAL

HERR, RAYMOND, MD

Provider ID: N/A

3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Teleservice
Effective as of 01-MAR-23

JACKSON, CODY, MD

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22

JACKSON, CODY, MD

Provider ID: N/A

6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-SEP-22

NAJAR, FAUZI, MD

Provider ID: N/A

3490 PALM AVE
SAN DIEGO, CA 92154
Effective as of 01-JUL-23

ROMERO, CAMILA, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

ROMERO, CAMILA, MD

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

ROMERO, CAMILA, MD

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

STERN, ANNA, MD

Provider ID: N/A

4142 ADAMS AVE STE 102
SAN DIEGO, CA 92116
Effective as of 01-JAN-21

PSYCHIATRY

BECKER, OLGA, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

C1. Lista de proveedores de la red Médico de atención especializada

BECKER, OLGA, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

BEVINS, ELIZABETH, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BEVINS, ELIZABETH, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BINDAL, ANKUR, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

BINDAL, ANKUR, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

BINDAL, ANKUR, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

BINDAL, ANKUR, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121

Effective as of 01-SEP-22

BINDAL, ANKUR, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

BINDAL, ANKUR, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

BOBO, JERRY, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

BOBO, JERRY, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

CHAUHAN, SMIT, MD†

Provider ID: N/A

7850 VISTA HILL AVE
SAN DIEGO, CA 92123
Effective as of 01-MAY-22

CHAUHAN, SMIT, MD†

Provider ID: N/A

7850 VISTA HILL AVE
SAN DIEGO, CA 92123
Effective as of 01-MAY-22

FANOUS, ASHRAF, MD

Provider ID: N/A

8775 AERO DR STE 238

SAN DIEGO, CA 92123
Effective as of 01-JUN-24

FANOUS, ASHRAF, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

FANOUS, ASHRAF, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

FANOUS, ASHRAF, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

FITZGERALD, MICHAEL, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-APR-22

FITZGERALD, MICHAEL, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-APR-22

GLEICHMAN, JULIA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

GLEICHMAN, JULIA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-SEP-21

GUTFLAIS, ERIC, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

GUTFLAIS, ERIC, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

HANAGAMI, CORI, MD

Provider ID: N/A

☐ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-JAN-23

HANAGAMI, CORI, MD

Provider ID: N/A

☐ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-JAN-23

HANAGAMI, CORI, MD

Provider ID: N/A

☐ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-FEB-23

HANAGAMI, CORI, MD

Provider ID: N/A

☐ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-JAN-23

HANAGAMI, CORI, MD

Provider ID: N/A

☐ 4550 KEARNY VILLA RD

STE 116

SAN DIEGO, CA 92123

Effective as of 01-FEB-23

HANAGAMI, CORI, MD

Provider ID: N/A

☐ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-JAN-23

HERSEVOORT, SHAWN, MD

Provider ID: N/A

☐ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-FEB-23

HERSEVOORT, SHAWN, MD

Provider ID: N/A

☐ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-JAN-23

HERSEVOORT, SHAWN, MD

Provider ID: N/A

☐ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-JAN-23

HERSEVOORT, SHAWN, MD

Provider ID: N/A

☐ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-FEB-23

HOLLEMAN, KEVIN, DO

Provider ID: N/A

☐ 8775 AERO DR STE 238
SAN DIEGO, CA 92123

Effective as of 01-APR-23

HOLLEMAN, KEVIN, DO

Provider ID: N/A

☐ 8775 AERO DR STE 238
SAN DIEGO, CA 92123

Effective as of 01-JUN-24

HOLLEMAN, KEVIN, DO

Provider ID: N/A

☐ 8775 AERO DR STE 238
SAN DIEGO, CA 92123

Effective as of 01-APR-23

HOLLEMAN, KEVIN, DO

Provider ID: N/A

☐ 8775 AERO DR STE 238
SAN DIEGO, CA 92123

Effective as of 01-JUN-24

JOHN, TANNER, MD

Provider ID: N/A

☐ 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Teleservice

Effective as of 01-OCT-23

JOHN, TANNER, MD

Provider ID: N/A

☐ 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Teleservice

Effective as of 01-OCT-23

JOSHI, YASH, MD

Provider ID: N/A

☐ 350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

JOSHI, YASH, MD

Provider ID: N/A

☐ 350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

KARANJIA, NAVAZ, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

KARANJIA, NAVAZ, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

KARANJIA, NAVAZ, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

KARANJIA, NAVAZ, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-SEP-15

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-SEP-15

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUN-22

KARRIS, BIANCA, MD

Provider ID: N/A

📍 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

KARRIS, BIANCA, MD

Provider ID: N/A

📍 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAR-23

KARRIS, BIANCA, MD

Provider ID: N/A

📍 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

KARRIS, BIANCA, MD

Provider ID: N/A

📍 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAR-23

KEIFER, JASON, MD

Provider ID: N/A

📍 4452 PARK BLVD STE 302
SAN DIEGO, CA 92116
Effective as of 01-APR-23

KEIFER, JASON, MD

Provider ID: N/A

📍 4452 PARK BLVD STE 302
SAN DIEGO, CA 92116
Effective as of 01-APR-23

LEDBETTER, ALEX, DO

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

LEDBETTER, ALEX, DO

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

LI, XIA, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-AUG-21

LI, XIA, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-AUG-21

MIRON, JEAN-PHILIPPE, MD

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-MAR-24

MIRON, JEAN-PHILIPPE, MD

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-MAR-24

MOORE, SHAVON, MD†

Provider ID: N/A

📍 4510 EXECUTIVE DR
SAN DIEGO, CA 92121

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-NOV-21

MOORE, SHAVON, MD†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-NOV-21

MORRIS, RAPHAEL, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130

Effective as of 01-JAN-21

MORRIS, RAPHAEL, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 202
SAN DIEGO, CA 92130

Effective as of 01-NOV-22

MORRIS, RAPHAEL, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 202
SAN DIEGO, CA 92130

Effective as of 01-NOV-22

MORRIS, RAPHAEL, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130

Effective as of 01-JAN-21

NICHOLS, ALPHONSO, MD

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JAN-23

NICHOLS, ALPHONSO, MD

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JAN-23

NICHOLS, ALPHONSO, MD

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUL-22

OJHA, PRITI, MD

Provider ID: N/A

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

Effective as of 01-JUN-23

OJHA, PRITI, MD

Provider ID: N/A

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

Effective as of 01-JUN-23

PARASHAR, ANUSHREE, MD

Provider ID: N/A

8775 AERO DR STE 238 FL 3
SAN DIEGO, CA 92123

Effective as of 01-JUN-24

PARASHAR, ANUSHREE, MD

Provider ID: N/A

8775 AERO DR STE 238 FL 3

SAN DIEGO, CA 92123

Effective as of 01-JUN-24

PARASHAR, ANUSHREE, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123

Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123

Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123

Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123

Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD

Provider ID: N/A

8775 AERO DR STE 238 FL 3
SAN DIEGO, CA 92123

Effective as of 01-JUN-24

PARASHAR, ANUSHREE, MD

Provider ID: N/A

8775 AERO DR STE 238 FL 3
SAN DIEGO, CA 92123

Effective as of 01-JUN-24

PLOESSER, MARKUS, MD

Provider ID: N/A

1855 1ST AVE STE 200B
SAN DIEGO, CA 92101

Effective as of 01-FEB-23

**C1. Lista de proveedores de la red
Médico de atención especializada**

PLOESSER, MARKUS, MD

Provider ID: N/A

1855 1ST AVE STE 200B
SAN DIEGO, CA 92101

Effective as of 01-FEB-23

PLOESSER, MARKUS, MD

Provider ID: N/A

1855 1ST AVE STE 200B
SAN DIEGO, CA 92101

Effective as of 01-FEB-23

PLOESSER, MARKUS, MD

Provider ID: N/A

1855 1ST AVE STE 200B
SAN DIEGO, CA 92101

Effective as of 01-FEB-23

QAYOUMI, WALI, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

QAYOUMI, WALI, MD†

Provider ID: N/A

4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121

Effective as of 01-OCT-21

QAYOUMI, WALI, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

QAYOUMI, WALI, MD†

Provider ID: N/A

4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121

Effective as of 01-OCT-21

RIBEIRO CALDAS DOMINGUES,

ISABEL, MD†

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-FEB-21

**RIBEIRO CALDAS DOMINGUES,
ISABEL, MD†**

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-FEB-21

**SALGUERO GALLAND, MARIO
LUIS, MD**

Provider ID: N/A

4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

**SALGUERO GALLAND, MARIO
LUIS, MD**

Provider ID: N/A

4175 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

**SALGUERO GALLAND, MARIO
LUIS, MD**

Provider ID: N/A

4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

**SALGUERO GALLAND, MARIO
LUIS, MD†**

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-SEP-21

**SALGUERO GALLAND, MARIO
LUIS, MD**

Provider ID: N/A

4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

**SALGUERO GALLAND, MARIO
LUIS, MD**

Provider ID: N/A

4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

**SALGUERO GALLAND, MARIO
LUIS, MD**

Provider ID: N/A

4175 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

**SALGUERO GALLAND, MARIO
LUIS, MD**

Provider ID: N/A

4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

**SALGUERO GALLAND, MARIO
LUIS, MD†**

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-SEP-21

SALGUERO GALLAND, MARIO

C1. Lista de proveedores de la red Médico de atención especializada

LUIS, MD

Provider ID: N/A

📍 4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

TADROS, EMAD, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 102
SAN DIEGO, CA 92103

Effective as of 01-FEB-07

TADROS, EMAD, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 102
SAN DIEGO, CA 92103

Effective as of 01-JAN-23

TADROS, EMAD, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 102
SAN DIEGO, CA 92103

Effective as of 01-JAN-23

TADROS, EMAD, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 102
SAN DIEGO, CA 92103

Effective as of 01-FEB-07

WEISSMAN, CORY, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127

Effective as of 01-DEC-21

WEISSMAN, CORY, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127

Effective as of 01-DEC-21

YAGUDAYEVA, RAISA, DO†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-22

YAGUDAYEVA, RAISA, DO†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-22

PSYCHIATRY CHILD

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-SEP-15

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JAN-23

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JAN-23

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-SEP-15

NICHOLS, ALPHONSO, MD

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JAN-23

NICHOLS, ALPHONSO, MD

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131
Teleservice
Effective as of 01-JAN-23

PSYCHIATRY SLEEP MEDICINE

KARIPPOT, ANOOP, MD†
Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131
Teleservice
Effective as of 01-JAN-23

PSYCHOLOGIST

BADER, RACHEL, PSYD
Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-JUN-23

BADER, RACHEL, PSYD
Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-JUN-23

**BAHENA-COLLEY, SANDRA,
PSYD†**
Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-APR-21

**BAHENA-COLLEY, SANDRA,
PSYD†**
Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-APR-21

BHAJU, JESHMIN, PhD†
Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

BHAJU, JESHMIN, PhD†
Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

BOGUNIA, ARIKA, PSYD†
Provider ID: N/A

4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

BOGUNIA, ARIKA, PSYD†
Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

BOGUNIA, ARIKA, PSYD†
Provider ID: N/A

4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

BOGUNIA, ARIKA, PSYD†
Provider ID: N/A

4189 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

BOGUNIA, ARIKA, PSYD†
Provider ID: N/A

4189 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Effective as of 01-NOV-22

BOGUNIA, ARIKA, PSYD†
Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

BOGUNIA, ARIKA, PSYD†
Provider ID: N/A

4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

BOGUNIA, ARIKA, PSYD†
Provider ID: N/A

4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

CARBONELL, SONIA, PSYD†
Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUL-21

CARBONELL, SONIA, PSYD†
Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUL-21

**ESTRADA PATINO, ANGELA,
PSYD**
Provider ID: N/A

4080 CENTRE ST STE 104
SAN DIEGO, CA 92103
Effective as of 01-MAR-23

**ESTRADA PATINO, ANGELA,
PSYD**
Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

 4080 CENTRE ST STE 104
SAN DIEGO, CA 92103
Effective as of 01-MAR-23

GALANT, DANIEL, PhD

Provider ID: N/A

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-APR-21

GALANT, DANIEL, PhD


Provider ID: N/A

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-APR-21

GOMEZ, JUANITA, PhD†

Provider ID: N/A

 6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-AUG-22


GOMEZ, JUANITA, PhD†

Provider ID: N/A

 6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-AUG-22


MINASSIAN, ARPI, PhD†

Provider ID: N/A

 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

MINASSIAN, ARPI, PhD†

Provider ID: N/A

 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

MIRANDA, CYNTHIA, PhD†

Provider ID: N/A

 4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105

Teleservice

Effective as of 01-APR-21

MIRANDA, CYNTHIA, PhD†


Provider ID: N/A

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-APR-21

PARK, JESSIE, PSYD†


Provider ID: N/A

 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Effective as of 01-DEC-21

PARK, JESSIE, PSYD†


Provider ID: N/A

 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Effective as of 01-DEC-21


TARLE, STEPHANIE, PhD

Provider ID: N/A

 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-DEC-23


TARLE, STEPHANIE, PhD

Provider ID: N/A

 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-DEC-23

VANFOSSEN, BRIAN, PhD†


Provider ID: N/A

 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice

Effective as of 01-SEP-22

VANFOSSEN, BRIAN, PhD†


Provider ID: N/A

 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice

Effective as of 01-NOV-23

VANFOSSEN, BRIAN, PhD†


Provider ID: N/A

 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice

Effective as of 01-NOV-23

VANFOSSEN, BRIAN, PhD†

Provider ID: N/A


 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice

Effective as of 01-SEP-22

PULMONARY DISEASES


BAILEY, JACOB, MD

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23


BAILEY, JACOB, MD

Provider ID: N/A

 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

BAO, GANG, MD†

Provider ID: N/A

 6699 ALVARADO RD STE
2306
SAN DIEGO, CA 92120

Teleservice

Effective as of 01-SEP-22

LE, HUAN, MD†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115

Teleservice

Effective as of 01-JAN-21

LE, HUAN, MD†

Provider ID: N/A

5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115

Teleservice

Effective as of 01-JAN-21

LE, HUAN, MD†

Provider ID: N/A

5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115

Teleservice

Effective as of 01-JUL-22

LE, HUAN, MD†

Provider ID: N/A

5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115

Teleservice

Effective as of 01-JAN-14

MCGUIRE, WILLIAM, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

MUNOZ PINEDA, JORGE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

MUNOZ PINEDA, JORGE, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

MUNOZ PINEDA, JORGE, MD

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-DEC-23

PEARCE, ALEX, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

POKALA, SATHYA, MD

Provider ID: N/A

8031 LINDA VISTA RD STE
100
SAN DIEGO, CA 92111

Teleservice

Effective as of 01-JUN-24

RANCHES, GREGORY, MD†

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-AUG-20

RANCHES, GREGORY, MD†

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-APR-19

RANCHES, GREGORY, MD†

Provider ID: N/A

501 WASHINGTON ST STE
508
SAN DIEGO, CA 92103

Effective as of 01-MAY-20

RESNIKOFF, PAMELA, MD†

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-MAR-22

SPITZ, BRADLEY, MD

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

SPITZ, BRADLEY, MD

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

WONG, STEVEN, MD†

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-APR-19

WONG, STEVEN, MD†

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-APR-19

RADIATION ONCOLOGY

BRUGGEMAN, ANDREW, MD

Provider ID: N/A

3075 HEALTH CENTER DR
SAN DIEGO, CA 92123

Effective as of 01-JAN-24

BRUGGEMAN, ANDREW, MD†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-MAR-21

BRUGGEMAN, ANDREW, MD†
Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

CARMONA, RUBEN, MD
Provider ID: N/A

7901 FROST ST
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

COLEMAN, LORI, MD†
Provider ID: N/A

3075 HEALTH CENTER DR
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

FULLER, DONALD, MD†
Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

FULLER, DONALD, MD†
Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

FULLER, DONALD, MD†
Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

FULLER, DONALD, MD†
Provider ID: N/A

3366 5TH AVE

SAN DIEGO, CA 92103
Effective as of 01-JUL-22

FULLER, DONALD, MD

Provider ID: N/A

5395 RUFFIN RD
SAN DIEGO, CA 92123
Effective as of 01-MAY-24

FULLER, DONALD, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

FULLER, DONALD, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

FULLER, DONALD, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

FULLER, DONALD, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-MAY-24

**HATTANGADI-GLUTH, JONA,
MD†**

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

HOOPES, DAVID, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127
Effective as of 01-SEP-22

HOOPES, DAVID, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

IJAZ, TAHIR, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

IJAZ, TAHIR, MD†

Provider ID: N/A

5395 RUFFIN RD STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

IJAZ, TAHIR, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

IJAZ, TAHIR, MD

Provider ID: N/A

5395 RUFFIN RD
SAN DIEGO, CA 92123
Effective as of 01-MAY-24

IJAZ, TAHIR, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

IJAZ, TAHIR, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

C1. Lista de proveedores de la red Médico de atención especializada

IJAZ, TAHIR, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103*
Effective as of 01-SEP-15

IJAZ, TAHIR, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

IJAZ, TAHIR, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-MAY-24

JABBARI, SIAVASH, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
LEVEL 0
SAN DIEGO, CA 92123
Effective as of 01-OCT-22

MACEWAN, IAIN, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

MELL, LOREN, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

MURPHY, KEVIN, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Effective as of 01-JAN-21

PEJAVAR, SUNANDA, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

SANDHU, AJAY PAL, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

SHARABI, ANDREW, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

SHIRAZI, REZA, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

SHIRAZI, REZA, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

SHIRAZI, REZA, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

SHIRAZI, REZA, MD

Provider ID: N/A

5395 RUFFIN RD
SAN DIEGO, CA 92123
Effective as of 01-MAY-24

SHIRAZI, REZA, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

SHIRAZI, REZA, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

SHIRAZI, REZA, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-MAY-24

SHIRAZI, REZA, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

SHIRAZI, REZA, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

SIMPSON, DANIEL, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

STRAKA, CHRISTOPHER, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-APR-23

C1. Lista de proveedores de la red Médico de atención especializada

STRAKA, CHRISTOPHER, MD†

Provider ID: N/A

☐ 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Teleservice

Effective as of 01-JAN-21

TYE, KAREN, MD

Provider ID: N/A

☐ 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Teleservice

Effective as of 01-JUN-23

TYE, KAREN, MD

Provider ID: N/A

☐ 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Teleservice

Effective as of 01-SEP-23

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

☐ 5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-MAY-21

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

☐ 5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-JUL-21

VAKILIAN, SIAVOSH, MD

Provider ID: N/A

☐ 5395 RUFFIN RD
SAN DIEGO, CA 92123

Effective as of 01-MAY-24

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

☐ 5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-SEP-22

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

☐ 3366 5TH AVE
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-MAY-24

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

☐ 3366 5TH AVE
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-MAY-21

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

☐ 3366 5TH AVE
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JUL-21

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

☐ 3366 5TH AVE
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-SEP-22

VOLPP, PAUL, MD†

Provider ID: N/A

☐ 3075 HEALTH CENTER DR
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

WHITE, EVAN, MD†

Provider ID: N/A

☐ 16918 DOVE CANYON RD

STE 103

SAN DIEGO, CA 92127

Teleservice

Effective as of 01-NOV-22

YORK, JOHN, MD

Provider ID: N/A

☐ 330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

YORK, JOHN, MD

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

RADIOLOGY DIAGNOSTIC

AGANOVIC, LEJLA, MD

Provider ID: N/A

☐ 408 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

AGANOVIC, LEJLA, MD

Provider ID: N/A

☐ 8929 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Effective as of 01-APR-23

AGANOVIC, LEJLA, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

ANDERSON, GREGORY, MD

Provider ID: N/A

☐ 150 W WASHINGTON ST
SAN DIEGO, CA 92103

Effective as of 01-MAY-24

ANDERSON, GREGORY, MD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

9095 RIO SAN DIEGO DR
STE 150
SAN DIEGO, CA 92108
Effective as of 01-OCT-23

ANDERSON, GREGORY, MD†

Provider ID: N/A

3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123
Effective as of 01-AUG-23

ANDERSON, GREGORY, MD†

Provider ID: N/A

3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123
Effective as of 01-AUG-22

BOLAR, DIVYA, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

BOLAR, DIVYA, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

BOLAR, DIVYA, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BOSWELL, GILBERT, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

BOSWELL, GILBERT, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

BRANCH, CODY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

BRANCH, CODY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BROUHA, SHARON, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BROUHA, SHARON, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

BROUHA, SHARON, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

BUI, KEVIN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BUI, KEVIN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUL-21

BUI, KEVIN, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

CARSWELL, AIMEE, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

CARSWELL, AIMEE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

CARSWELL, AIMEE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CHANG, JENNIFER, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CHANG, JENNIFER, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CHANG, JENNIFER, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

C1. Lista de proveedores de la red Médico de atención especializada

CHEN, KAREN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CHEN, CHRISTINE, MD

Provider ID: N/A

150 W WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

CHENG, KAREN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

CHENG, KAREN, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

CHENG, KAREN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CHENG, KAREN, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

CHENG, KAREN, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CHO, AARON, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CHO, AARON, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

CHO, AARON, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CHUNG, CHRISTINE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CHUNG, CHRISTINE, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

CHUNG, CHRISTINE, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

COOPER, JAMES, MD†

Provider ID: N/A

3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123
Effective as of 01-MAY-22

COOPER, JAMES, MD

Provider ID: N/A

150 W WASHINGTON ST

SAN DIEGO, CA 92103
Effective as of 01-MAY-24

DORROS, STEPHEN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

DORROS, STEPHEN, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

DORROS, STEPHEN, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

EAJAZI, ALIREZA, MD†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

EAJAZI, ALIREZA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

EGHTEDARI, MOHAMMAD, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

EGHTEDARI, MOHAMMAD, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

**C1. Lista de proveedores de la red
Médico de atención especializada**

EGHTEDARI, MOHAMMAD, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-APR-23

FARID, NIKDOKHT, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-APR-23

FARID, NIKDOKHT, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

FARID, NIKDOKHT, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

FAZELI, SOUDABEH, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

FAZELI, SOUDABEH, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

FAZELI, SOUDABEH, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

FEDERHART, JAY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-AUG-24

FEDERHART, JAY, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-AUG-24

FEDERHART, JAY, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-24

FLISZAR, EVELYNE, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

FLISZAR, EVELYNE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

FLISZAR, EVELYNE, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-APR-23

FOWLER, KATHRYN, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-APR-23

FOWLER, KATHRYN, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

GENTILI, AMILCARE, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

GENTILI, AMILCARE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

GENTILI, AMILCARE, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-APR-23

HAHN, MICHAEL, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-APR-23

HAHN, LEWIS, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-APR-23

HAHN, LEWIS, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

HAHN, LEWIS, MD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

HAHN, MICHAEL, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

HANDWERKER, JASON, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

HANDWERKER, JASON, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HANDWERKER, JASON, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

HAWLEY, DANIEL, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HAWLEY, DANIEL, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

HAWLEY, DANIEL, MD

Provider ID: N/A

330 LEWIS ST

SAN DIEGO, CA 92103

Effective as of 01-JUN-23

HOROWITZ, MICHAEL, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

HOROWITZ, MICHAEL, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HOROWITZ, MICHAEL, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

HSIAO, ALBERT, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

HSIAO, ALBERT, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HSIAO, ALBERT, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

HUANG, BRADY, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

HUANG, BRADY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HUANG, BRADY, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

HUGHES, TUDOR, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

JACOBS, KATHLEEN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

JACOBS, KATHLEEN, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

JACOBS, KATHLEEN, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

JACOBSON, JON, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

C1. Lista de proveedores de la red Médico de atención especializada

JACOBSON, JON, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

JACOBSON, JON, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

JAFFRAY, PAUL, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

JAFFRAY, PAUL, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

JAFFRAY, PAUL, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

KANSAGRA, AKASH, MD

Provider ID: N/A

11199 SORRENTO VALLEY
RD STE 203
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

KAROW, DAVID, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

KAROW, DAVID, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

KAROW, DAVID, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

KAROW, DAVID, MD†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

KAROW, DAVID, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

KARUNAMUNI, JENNIFER, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

KARUNAMUNI, JENNIFER, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

KHURANA, AMAN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

KIM, ERIC, MD†

Provider ID: N/A

330 LEWIS ST STE 202

SAN DIEGO, CA 92103
Effective as of 01-AUG-21

KIM, ERIC, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

KIM, ERIC, MD

Provider ID: N/A

150 W WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

KLIGERMAN, SETH, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

KLIGERMAN, SETH, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

KLIGERMAN, SETH, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

KONDILI, DHIMITER, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

KONDILI, DHIMITER, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

C1. Lista de proveedores de la red Médico de atención especializada

LAKE, MENORE, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

LAKE, MENORE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

LEE, ROLAND, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

LEE, ROLAND, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

LEE, ROLAND, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

LIM, VIVIAN, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

LIM, VIVIAN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

LIM, VIVIAN, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

MAREK BYKOWSKI, JULIE, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

MAREK BYKOWSKI, JULIE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

MAREK BYKOWSKI, JULIE, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

MARKS, ROBERT, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

MARKS, ROBERT, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

MCDONALD, MARIN, MD†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

MCDONALD, MARIN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

MCDONALD, MARIN, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

MCDONALD, MARIN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

MCDONALD, MARIN, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

MCNAMEE, CAIRINE, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

MCNAMEE, CAIRINE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

MCNAMEE, CAIRINE, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

MCNAMEE, CAIRINE, MD

Provider ID: N/A

408 DICKINSON ST

C1. Lista de proveedores de la red Médico de atención especializada

SAN DIEGO, CA 92103
Effective as of 01-APR-23

MCNAMEE, CAIRINE, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

MURPHY, PAUL, MD

Provider ID: N/A

📍 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

MURPHY, PAUL, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

MURPHY, PAUL, MD

Provider ID: N/A

📍 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

NORBASH, ALEXANDER, MD

Provider ID: N/A

📍 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

NORBASH, ALEXANDER, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

NORBASH, ALEXANDER, MD

Provider ID: N/A

📍 408 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

OBOYLE, MARY, MD

Provider ID: N/A

📍 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

OBOYLE, MARY, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

OBOYLE, MARY, MD†

Provider ID: N/A

📍 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

OBOYLE, MARY, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

OBOYLE, MARY, MD

Provider ID: N/A

📍 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

OBOYLE, MARY, MD†

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-FEB-22

OJEDA-FOURNIER, HAYDEE, MD

Provider ID: N/A

📍 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-APR-23

OJEDA-FOURNIER, HAYDEE, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

OJEDA-FOURNIER, HAYDEE, MD

Provider ID: N/A

📍 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

PATHRIA, MINI, MD

Provider ID: N/A

📍 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

PATHRIA, MINI, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

PATHRIA, MINI, MD

Provider ID: N/A

📍 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

RAKOW-PENNER, REBECCA, MD

Provider ID: N/A

📍 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

RAKOW-PENNER, REBECCA, MD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

RAKOW-PENNER, REBECCA, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

RATTNER, ZACHARY, MD†

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-SEP-20

RATTNER, ZACHARY, MD†

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-JAN-21

RATTNER, ZACHARY, MD†

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-SEP-22

RATTNER, ZACHARY, MD†

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-JUL-23

RATTNER, ZACHARY, MD†

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102

Effective as of 01-AUG-21

RESNICK, DONALD, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

RESNICK, DONALD, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

RESNICK, DONALD, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

RITCHIE, DAVID, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

ROTHENBERG, EDWARD, MD

Provider ID: N/A

150 W WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

SABIR, SHARJEEL, MD

Provider ID: N/A

150 W WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

SADAT, SAYED, DO

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SADAT, SAYED, DO

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SADAT, SAYED, DO

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SAMPATH, SRIHARI, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

SAMPATH, SRINATH, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

SAMPATH, SRIHARI, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

SAMPATH, SRINATH, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

SANTILLAN, CYNTHIA, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

C1. Lista de proveedores de la red Médico de atención especializada

SANTILLAN, CYNTHIA, MD

Provider ID: N/A

📄 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

SEARLEMAN, ADAM, MD

Provider ID: N/A

📄 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SEARLEMAN, ADAM, MD

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SLATER, JERRY, MD†

Provider ID: N/A

📄 330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

SLATER, JERRY, MD†

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

SMITAMAN, EDWARD, MD

Provider ID: N/A

📄 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

SMITAMAN, EDWARD, MD

Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SMITAMAN, EDWARD, MD

Provider ID: N/A

📄 8929 UNIVERSITY CENTER

LN

SAN DIEGO, CA 92122
Effective as of 01-APR-23

SPENGLER, NATHAN, MD

Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SPENGLER, NATHAN, MD

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

SPENGLER, NATHAN, MD

Provider ID: N/A

📄 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

STRAKA, CHRISTOPHER, MD†

Provider ID: N/A

📄 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-FEB-21

SWEET, JASON, MD

Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-MAR-24

TAMAYO-MURILLO,

DORATHY, MD

Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

TAMAYO-MURILLO,

DORATHY, MD

Provider ID: N/A

📄 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

TAMAYO-MURILLO,

DORATHY, MD

Provider ID: N/A

📄 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

THOMPSON, COLE, MD

Provider ID: N/A

📄 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

THOMPSON, COLE, MD

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

THOMPSON, COLE, MD

Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

TRINH, BRIAN, MD

Provider ID: N/A

📄 150 W WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

UNSDORFER, KYLE, MD


Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23


UNSDORFER, KYLE, MD

Provider ID: N/A


C1. Lista de proveedores de la red Médico de atención especializada

 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23


VAHDAT, NOUSHIN, MD
Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23


VAHDAT, NOUSHIN, MD
Provider ID: N/A

 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-23


VAKILIAN, SIAVOSH, MD†
Provider ID: N/A

 3366 5TH AVE
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22


VAKILIAN, SIAVOSH, MD†
Provider ID: N/A

 5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-SEP-22


WONG, FELIX, MD†
Provider ID: N/A

 3939 RUFFIN RD
SAN DIEGO, CA 92123
Effective as of 01-MAY-22

WONG, FELIX, MD†
Provider ID: N/A


 3939 RUFFIN RD
SAN DIEGO, CA 92123
Effective as of 01-AUG-23

WONG, FELIX, MD
Provider ID: N/A


 9095 RIO SAN DIEGO DR

STE 150
SAN DIEGO, CA 92108
Effective as of 01-OCT-23


YORK, JOHN, MD
Provider ID: N/A

 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24


YORK, VINCENT, MD†
Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21


YORK, VINCENT, MD†
Provider ID: N/A

 330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-AUG-21


ZAPALA, MATTHEW, MD
Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-24


ZAPALA, MATTHEW, MD
Provider ID: N/A

 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-24


ZAPALA, MATTHEW, MD
Provider ID: N/A

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Effective as of 01-JUL-24


ZINK-BRODY, GORDON, MD†
Provider ID: N/A

 3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123
Effective as of 01-OCT-23

ZINK-BRODY, GORDON, MD
Provider ID: N/A


 9095 RIO SAN DIEGO DR
STE 150
SAN DIEGO, CA 92108
Effective as of 01-OCT-23

ZINK-BRODY, GORDON, MD†
Provider ID: N/A


 3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123
Effective as of 01-DEC-21

REGISTERED DIETITIAN / NUTRITIONIST


BRECKON, SAMANTHA, RD
Provider ID: N/A

 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-24


BUNDY, KATHLEEN, RD
Provider ID: N/A

 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

CALLAWAY, MALLORY, RD
Provider ID: N/A

 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-MAR-22

DRIVICK, VALERIE, RD
Provider ID: N/A

 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-21

DRIVICK, VALERIE, RD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-SEP-22

FISHER, JENNIFER, RD

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

Effective as of 01-DEC-21

FISHER, JENNIFER, RD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

FISHER, JENNIFER, RD

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-JAN-24

GONZALEZ, KRISTEN, RDN

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

RUBENSTEIN, KELLY, RD

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

Effective as of 01-JAN-24

RUBENSTEIN, KELLY, RD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

SALCEDO, ALEXANDRA, RD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

SALCEDO, CARLA, RD

Provider ID: N/A

4910 DIRECTORS PL
SAN DIEGO, CA 92121

Effective as of 01-JAN-24

SALCEDO, CARLA, RD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JAN-24

VALDEZ, KELLY, RD

Provider ID: N/A

4168 FRONT ST FL 3
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

VERGARA RODRIGUEZ, DIANA, RD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

REGISTERED PHYSICAL THERAPIST

ALLOS, ALEXANDER, PT

Provider ID: N/A

4445 EASTGATE MALL STE
105

SAN DIEGO, CA 92121

Effective as of 01-NOV-23

BOUTELLE, DAVID, PT

Provider ID: N/A

9909 MIRA MESA BLVD
STE 120

SAN DIEGO, CA 92131

Effective as of 01-JAN-24

BOUTELLE, BARBARA, PT

Provider ID: N/A

9909 MIRA MESA BLVD
STE 120

SAN DIEGO, CA 92131

Effective as of 01-JAN-24

BOUTELLE, DAVID, PT

Provider ID: N/A

9888 CARMEL MOUNTAIN
RD STE D

SAN DIEGO, CA 92129

Effective as of 01-JAN-24

BOUTELLE, BARBARA, PT

Provider ID: N/A

9888 CARMEL MOUNTAIN
RD STE D

SAN DIEGO, CA 92129

Effective as of 01-JAN-24

CORTEZ, AARON, PT†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JUN-21

DANG, KAYLEE, PT†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-21

FARRAR, COURTNEY, PT†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Effective as of 01-DEC-22

FARRAR, COURTNEY, PT†

Provider ID: N/A

7525 METROPOLITAN DR

C1. Lista de proveedores de la red Médico de atención especializada

STE 302
SAN DIEGO, CA 92108
Teleservice
Effective as of 01-JAN-21

FARRAR, COURTNEY, PT†

Provider ID: N/A
3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Effective as of 01-AUG-24

FARRAR, COURTNEY, PT†

Provider ID: N/A
7525 METROPOLITAN DR
STE 302
SAN DIEGO, CA 92108
Teleservice
Effective as of 01-AUG-24

FERRER, MIRON, PT

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

FUREY, CINDY, PT

Provider ID: N/A
5677 OBERLIN DR STE 106
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

FUREY, CINDY, PT

Provider ID: N/A
5555 RESERVOIR DR STE
300
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

GRIMES, KELLY, PT

Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

JOHNSON, KENNADY, PT

Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAR-24

LEVIE, ADAM, PT

Provider ID: N/A
5643 COPLEY DR STE 230
SAN DIEGO, CA 92111
Teleservice
Effective as of 01-AUG-24

MONROE, MAX, PT

Provider ID: N/A
11750 SORRENTO VALLEY
RD STE 130
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

OKINAGA, PATRICK, PT

Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JAN-24

OKINAGA, PATRICK, PT

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

PAPA, AMY, PT

Provider ID: N/A
4445 EASTGATE MALL STE
103
SAN DIEGO, CA 92121
Effective as of 01-AUG-23

PAPA, AMY, PT

Provider ID: N/A
4445 EASTGATE MALL STE
103
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

PERRONE, AIMEE, PT

Provider ID: N/A
4445 EASTGATE MALL STE
103
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

PHILLIP, OMARI, PT†

Provider ID: N/A
4445 EASTGATE MALL STE
103
SAN DIEGO, CA 92121
Effective as of 01-DEC-21

ROSS, JENNY, PT

Provider ID: N/A
7525 METROPOLITAN DR
SAN DIEGO, CA 92108
Effective as of 01-JAN-23

TITH, JENNY, PT

Provider ID: N/A
4445 EASTGATE MALL STE
103
SAN DIEGO, CA 92121
Effective as of 01-MAY-22

TSAI, CINDY, PT

Provider ID: N/A
3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111
Effective as of 01-AUG-23

TSAI, CINDY, PT

Provider ID: N/A
3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111
Effective as of 01-JUN-23

VANDEWIELE, EMILY, PT†

Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-OCT-21

CI. Lista de proveedores de la red Médico de atención especializada

VASQUEZ, BENJAMIN, PT

Provider ID: N/A

4910 DIRECTORS PL
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

RHEUMATOLOGY

CHITKARA, PUJA, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 400
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

HUYNH, DOQUYEN, MD

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-APR-23

HUYNH, DOQUYEN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

KHANNA, SURABHI, MD

Provider ID: N/A

4282 GENESEE AVE STE
202
SAN DIEGO, CA 92117
Effective as of 01-JUL-24

KHANNA, SURABHI, MD

Provider ID: N/A

4282 GENESEE AVE STE
202
SAN DIEGO, CA 92117
Effective as of 01-NOV-23

PATEL, PUJA, DO

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-MAY-24

PATEL, PUJA, DO

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-MAY-24

PATEL, PUJA, DO

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-24

PRESS, RAYMOND, MD†

Provider ID: N/A

3965 5TH AVE STE 430
SAN DIEGO, CA 92103
Effective as of 01-OCT-19

SLEEP MEDICINE

BAO, GANG, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2306
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-JUN-21

DOMBROWSKY, JOSEPH, MD

Provider ID: N/A

5471 KEARNY VILLA RD STE
202
SAN DIEGO, CA 92123
Effective as of 01-APR-24

FINCH, CHRISTINA, MD

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

FINCH, CHRISTINA, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

FLEMING, WESLEY, MD†

Provider ID: N/A

5471 KEARNY VILLA RD STE
202
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-APR-22

PATEL, NIMIT, MD

Provider ID: N/A

5471 KEARNY VILLA RD STE
200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-JUN-24

SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS, SP

Provider ID: N/A

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127
Effective as of 01-JUN-22

AROCHO-SALGADO, MIRELIS, SP

Provider ID: N/A

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127
Effective as of 01-JUN-22

AROCHO-SALGADO, MIRELIS, SP

Provider ID: N/A

9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-JUN-22

AROCHO-SALGADO, MIRELIS, SP

Provider ID: N/A

9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

Effective as of 01-JUN-22

BLUMENFELD, LIZA, SP

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

CALDERON MORALES, ASTRID, SP

Provider ID: N/A

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127

Effective as of 01-APR-24

CALDERON MORALES, ASTRID, SP

Provider ID: N/A

9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

Effective as of 01-APR-24

CALDERON MORALES, ASTRID, SP

Provider ID: N/A

7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111

Effective as of 01-APR-24

CLARK, MELISSA, SP

Provider ID: N/A

7510 CLAIREMONT MESA

BLVD STE 102
SAN DIEGO, CA 92111

Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

7510 CLAIREMONT MESA
BLVD STE 102
SAN DIEGO, CA 92111

Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127

Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127

Effective as of 01-APR-22

DOCKTER, ANDI, SP†

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

DURNAN, CASSANDRA, SP

Provider ID: N/A

9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

Effective as of 01-JUL-24

DURNAN, CASSANDRA, SP

Provider ID: N/A

8929 AERO DR STE E
SAN DIEGO, CA 92123

Effective as of 01-JUL-24

DURNAN, CASSANDRA, SP

Provider ID: N/A

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127

Effective as of 01-JUL-24

KOUKEYAN, KARIN, SP

Provider ID: N/A

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127

Effective as of 01-JAN-23

KOUKEYAN, KARIN, SP

Provider ID: N/A

9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

Effective as of 01-JAN-23

KOUKEYAN, KARIN, SP

Provider ID: N/A

7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111

Teleservice

Effective as of 01-JAN-23

NAPOLEAN, REBECCA, SP

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111
Effective as of 01-JUN-22

NAPOLEAN, REBECCA, SP

Provider ID: N/A

7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111
Effective as of 01-JUN-22

SCHIEDERMAYER, BENJAMIN, SP†

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-22

THOMPSON, DANIELLE, SP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

THOMPSON, DANIELLE, SP

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JAN-24

WALSH, ERIN, SP

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

SURGERY COLON

SURGERY

EISENSTEIN, SAMUEL, MD†

Provider ID: N/A

200 W ARBOR DR

SAN DIEGO, CA 92103
Effective as of 01-DEC-21

EISENSTEIN, SAMUEL, MD†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-DEC-21

EISENSTEIN, SAMUEL, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

ISHO, MATHEW, MD†

Provider ID: N/A

4060 4TH AVE STE 510
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

ISHO, MATHEW, MD†

Provider ID: N/A

4060 4TH AVE STE 510
SAN DIEGO, CA 92103
Effective as of 01-NOV-11

ISHO, MATHEW, MD†

Provider ID: N/A

4060 4TH AVE STE 510
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

LOPEZ, NICOLE, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

LOPEZ, NICOLE, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Effective as of 01-DEC-21

PARRY, LISA, MD†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-APR-21

PARRY, LISA, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

RAMAMOORTHY, SONIA, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

TOMAN, JEFFREY, MD†

Provider ID: N/A

4060 4TH AVE STE 510
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

SURGERY CRITICAL CARE

ADAMS, LAURA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

OLSON, ERIK, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

VENTRO, GEORGE, MD†

Provider ID: N/A

200 W ARBOR DR

**C1. Lista de proveedores de la red
Médico de atención especializada**

SAN DIEGO, CA 92103
Effective as of 01-SEP-21

SURGERY GENERAL

ARMANI, AVA, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

BARNES, RYAN, DO†

Provider ID: N/A

📍 7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

BATRA, MUNISH, MD

Provider ID: N/A

📍 12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

📍 12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

📍 12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

📍 12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

BENCH, SHAWN, MD†

Provider ID: N/A

📍 7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

BRODERICK, RYAN, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

BRODERICK, RYAN, MD†

Provider ID: N/A

📍 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

**CASILLAS BERUMEN, SERGIO,
MD**

Provider ID: N/A

📍 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-FEB-24

**CASILLAS BERUMEN, SERGIO,
MD**

Provider ID: N/A

📍 6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

DIEFFENBACH, BRYAN, MD

Provider ID: N/A

📍 550 WASHINGTON ST STE
641
SAN DIEGO, CA 92103
Effective as of 01-MAY-24

ELLNER, JULIE, MD

Provider ID: N/A

📍 2878 CAMINO DEL RIO S
STE 303
SAN DIEGO, CA 92108
Effective as of 01-OCT-21

FARINAS, LEAH, MD†

Provider ID: N/A

📍 6699 ALVARADO RD STE
2309
SAN DIEGO, CA 92120
Effective as of 01-OCT-20

GIURGIU, DAN, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 440
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

HALLDORSON, JEFFREY, MD

Provider ID: N/A

📍 8010 FROST ST STE 100
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

HALLDORSON, JEFFREY, MD†

Provider ID: N/A

📍 8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-FEB-18

HALLDORSON, JEFFREY, MD†

Provider ID: N/A

📍 8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-DEC-17

HART, MARQUIS, MD

Provider ID: N/A

📍 8010 FROST ST STE 100
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

HART, MARQUIS, MD†

Provider ID: N/A

📍 8010 FROST ST STE 510

C1. Lista de proveedores de la red Médico de atención especializada

SAN DIEGO, CA 92123
Effective as of 01-JAN-21

HART, MARQUIS, MD†

Provider ID: N/A

📍 8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JUL-21

HORGAN, SANTIAGO, MD

Provider ID: N/A

📍 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

HORGAN, SANTIAGO, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

JACOBSEN, GARTH, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

JACOBSEN, GARTH, MD†

Provider ID: N/A

📍 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

JACOBSEN, GARTH, MD†

Provider ID: N/A

📍 4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121
Effective as of 01-DEC-21

KING, JUSTIN, MD†

Provider ID: N/A

📍 6699 ALVARADO RD STE
2309

SAN DIEGO, CA 92120
Effective as of 01-JAN-21

LANGENBERG, BRET, DO†

Provider ID: N/A

📍 4033 3RD AVE STE 204
SAN DIEGO, CA 92103
Effective as of 01-JAN-19

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

📍 6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-AUG-24

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

📍 6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-MAR-24

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

📍 6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-MAR-24

MUELLER, GEORGE, MD†

Provider ID: N/A

📍 7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

POLLACK, LARRY, MD†

Provider ID: N/A

📍 7910 FROST ST STE 250
SAN DIEGO, CA 92123*
Effective as of 01-JAN-21

PRICE, ERIN, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 440
SAN DIEGO, CA 92103
Effective as of 01-SEP-20

SANDLER, BRYAN, MD†

Provider ID: N/A

📍 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

SANDLER, BRYAN, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

SISE, MICHAEL, MD†

Provider ID: N/A

📍 550 WASHINGTON ST STE
641
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

WOODWARD, STEPHANIE, MD†

Provider ID: N/A

📍 7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

ZORN, GEORGE, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 330
SAN DIEGO, CA 92103
Effective as of 01-JAN-14

SURGERY GENERAL VASCULAR

CHAMMAS, JOSEPH, MD†

Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Effective as of 01-JUL-24

DIEFFENBACH, BRYAN, MD

Provider ID: N/A

550 WASHINGTON ST STE
641
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

**MORENO MARTINEZ,
ENRIQUE, MD†**

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-JUN-23

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-JAN-23

SISE, MICHAEL, MD†

Provider ID: N/A

550 WASHINGTON ST STE
641
SAN DIEGO, CA 92103
Effective as of 01-JAN-14

SISE, MICHAEL, MD†

Provider ID: N/A

550 WASHINGTON ST STE
641
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

SURGERY HAND

RICKARDS, ENASS, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

SHILLITO, MATTHEW, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

***SURGERY HAND
ORTHOPEDIC***

STEPHENSON, SAMUEL, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

SURGERY

NEUROLOGICAL

FLORES, BRUNO, MD†

Provider ID: N/A

11199 SORRENTO VALLEY
RD STE 203
SAN DIEGO, CA 92121
Effective as of 01-JAN-23

FLORES, BRUNO, MD†

Provider ID: N/A

5395 RUFFIN RD STE 102
SAN DIEGO, CA 92123
Effective as of 01-APR-22

FLORES, BRUNO, MD†

Provider ID: N/A

5395 RUFFIN RD STE 102
SAN DIEGO, CA 92123
Effective as of 01-FEB-21

GOEL, GUNJAN, MD†

Provider ID: N/A

3750 CONVOY ST STE 301
SAN DIEGO, CA 92111
Effective as of 01-JUL-19

LEVINE, REED, MD

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Effective as of 01-FEB-24

OSTRUP, RICHARD, MD†

Provider ID: N/A

3750 CONVOY ST STE 301
SAN DIEGO, CA 92111*
Effective as of 01-SEP-20

UDANI, VIKRAM, MD

Provider ID: N/A

11199 SORRENTO VALLEY
RD STE 203

C1. Lista de proveedores de la red Médico de atención especializada

SAN DIEGO, CA 92121
Effective as of 01-JAN-23

ZACHARIAH, MARCUS, MD

Provider ID: N/A

3750 CONVOY ST STE 301
SAN DIEGO, CA 92111
Effective as of 01-MAY-23

SURGERY ORTHOPEDIC

ABITBOL, JEAN-JACQUES, MD†

Provider ID: N/A

7625 MESA COLLEGE DR
STE 315A
SAN DIEGO, CA 92111
Effective as of 01-JUN-22

ANDRY, JAMES, MD

Provider ID: N/A

7910 FROST ST STE 340
SAN DIEGO, CA 92123
Effective as of 01-MAR-24

ANDRY, JAMES, MD

Provider ID: N/A

7910 FROST ST STE 340
SAN DIEGO, CA 92123*
Effective as of 01-MAR-24

BAWA, MANEESH, MD†

Provider ID: N/A

4060 4TH AVE STE 700
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

BEHR, CHRISTOPHER, MD†

Provider ID: N/A

4060 4TH AVE STE 700
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

BLAIS, MICAH, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

BOURLAND, BRYAN, DO

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-OCT-23

BOURLAND, BRYAN, DO

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121*
Effective as of 01-SEP-23

BRERETON, DANIEL, DO†

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-22

BUKATA, SUSAN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BUKATA, SUSAN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

BURNIKEL, DAVID, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-FEB-23

BURNIKEL, DAVID, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

BURNIKEL, DAVID, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JUN-24

BURNIKEL, DAVID, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-SEP-23

CAGE, DORI, MD†

Provider ID: N/A

8008 FROST ST STE 403
SAN DIEGO, CA 92123
Effective as of 01-NOV-14

CHOI, JIHOON, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

DAVID, TAL, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

DOWNING, KRISTOPHER, MD

Provider ID: N/A

7910 FROST ST STE 340
SAN DIEGO, CA 92123*
Effective as of 01-MAR-24

C1. Lista de proveedores de la red Médico de atención especializada

DOWNING, KRISTOPHER, MD

Provider ID: N/A

7910 FROST ST STE 340
SAN DIEGO, CA 92123
Effective as of 01-MAR-24

DUTTON, PASCUAL, MD

Provider ID: N/A

5395 RUFFIN RD STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 401
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

5395 RUFFIN RD STE 201
SAN DIEGO, CA 92123
Effective as of 01-OCT-23

DUTTON, PASCUAL, MD

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

GOEB, YANNICK, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

GROTTING, JOHN, MD

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

GROTTING, JOHN, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-AUG-23

GROTTING, JOHN, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

GROTTING, JOHN, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

GROTTING, JOHN, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 401
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

GROTTING, JOHN, MD

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-JAN-24

HOFMEISTER, ERIC, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 401
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

JAIN, RINA, MD†

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-JAN-21

KANSARA, DEVANSHU, MD†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-JUN-22

KANSARA, DEVANSHU, MD†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-MAY-22

KASIR, RAFID, MD

Provider ID: N/A

4060 4TH AVE STE 700
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

KIM, PAUL, MD†

Provider ID: N/A

6719 ALVARADO RD STE
308
SAN DIEGO, CA 92120
Effective as of 01-JAN-14

KIM, PAUL, MD†

Provider ID: N/A

6719 ALVARADO RD STE

**C1. Lista de proveedores de la red
Médico de atención especializada**

308
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

KIMBALL, MICHAEL, MD†
Provider ID: N/A
9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

KIMBALL, MICHAEL, MD†
Provider ID: N/A
9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

KIMBALL, MICHAEL, MD†
Provider ID: N/A
9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-DEC-14

KIMBALL, MICHAEL, MD†
Provider ID: N/A
9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

KIMBALL, MICHAEL, MD†
Provider ID: N/A
9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-SEP-20

KIMBALL, MICHAEL, MD†
Provider ID: N/A
9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JUL-23

KOLODGE, GAVIN, DO†
Provider ID: N/A
9339 GENESEE AVE STE
150
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

KOLODGE, GAVIN, DO
Provider ID: N/A
3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-AUG-23

KRUEGER, VAN, MD
Provider ID: N/A
4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121†
Effective as of 01-OCT-23

KRUEGER, VAN, MD
Provider ID: N/A
4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-OCT-23

KUSNEZOV, NICHOLAS, MD
Provider ID: N/A
7910 FROST ST STE 340
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-APR-24

LENIHAN, MICHAEL, MD
Provider ID: N/A
3444 KEARNY VILLA RD
STE 401
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

MACK, GREGORY, MD
Provider ID: N/A
8008 FROST ST STE 403

SAN DIEGO, CA 92123
Effective as of 01-JAN-15
MCCANDLESS, JEREMY, MD†
Provider ID: N/A
4060 4TH AVE STE 700
SAN DIEGO, CA 92103
Effective as of 01-OCT-17

MCKNIGHT, BRADEN, MD
Provider ID: N/A
7910 FROST ST STE 340
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-APR-24

MOHLER, LESTER, MD†
Provider ID: N/A
7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-JAN-14

MOHLER, LESTER, MD†
Provider ID: N/A
7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-FEB-07

MULDOON, MICHAEL, MD†
Provider ID: N/A
3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-NOV-21

MULDOON, MICHAEL, MD†
Provider ID: N/A
3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-AUG-23

MYER, JONATHAN, MD†
Provider ID: N/A
4910 DIRECTORS PL STE

C1. Lista de proveedores de la red Médico de atención especializada

350
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

MYER, JONATHAN, MD†

Provider ID: N/A

📄 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-AUG-23

NELSON, MARK, MD

Provider ID: N/A

📄 7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-MAY-24

POMERANTZ, MICHAEL, MD

Provider ID: N/A

📄 3444 KEARNY VILLA RD
STE 401
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

RAISZADEH, RAMIN, MD†

Provider ID: N/A

📄 6719 ALVARADO RD STE
308
SAN DIEGO, CA 92120
Effective as of 01-JAN-23

RAISZADEH, RAMIN, MD†

Provider ID: N/A

📄 6719 ALVARADO RD STE
308
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

RICKARDS, ENASS, MD†

Provider ID: N/A

📄 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-FEB-17

RICKARDS, ENASS, MD†

Provider ID: N/A

📄 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-APR-23

RICKARDS, ENASS, MD†

Provider ID: N/A

📄 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JUL-23

RICKARDS, ENASS, MD†

Provider ID: N/A

📄 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

RICKARDS, ENASS, MD†

Provider ID: N/A

📄 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

ROBKER, JERRICK, DO†

Provider ID: N/A

📄 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-AUG-23

ROBKER, JERRICK, DO†

Provider ID: N/A

📄 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-MAY-22

ROSENFELD, ALAN, MD†

Provider ID: N/A

📄 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-15

ROSENFELD, ALAN, MD†

Provider ID: N/A

📄 9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

ROSENFELD, ALAN, MD†

Provider ID: N/A

📄 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

ROSENFELD, ALAN, MD†

Provider ID: N/A

📄 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

ROSENFELD, ALAN, MD†

Provider ID: N/A

📄 9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-AUG-23

ROSENFELD, ALAN, MD†

Provider ID: N/A

📄 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-APR-23

ROSENFELD, ALAN, MD†

Provider ID: N/A

📄 9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121*

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-SEP-20

SCHULTZ, JEFFREY, MD†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A

SAN DIEGO, CA 92108

Effective as of 01-FEB-07

SCHULTZ, JEFFREY, MD†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A

SAN DIEGO, CA 92108

Effective as of 01-JAN-14

SCHULTZEL, MARK, MD†

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-NOV-21

SHAH, KALPIT, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

SHILLITO, MATTHEW, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-JAN-21

SHILLITO, MATTHEW, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-AUG-23

SHILLITO, MATTHEW, MD†

Provider ID: N/A

6719 ALVARADO RD STE

200

SAN DIEGO, CA 92120

Effective as of 01-JUN-24

SHILLITO, MATTHEW, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-SEP-23

SIROTA, MICHAEL, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-JUN-24

SIROTA, MICHAEL, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-JAN-21

SIROTA, MICHAEL, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-AUG-23

SULLIVAN, THOMAS, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

SUN, MICHAEL, MD

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A

SAN DIEGO, CA 92108

Effective as of 01-DEC-23

TANAKA, SCOTT, MD†

Provider ID: N/A

4060 4TH AVE STE 700
SAN DIEGO, CA 92103

Effective as of 01-AUG-17

TASTO, JAMES, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120*

Effective as of 01-AUG-23

TASTO, JAMES, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-JAN-21

TASTO, JAMES, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-SEP-23

TAYYAB, NEIL, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-MAR-16

TAYYAB, NEIL, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350A

SAN DIEGO, CA 92121

Effective as of 01-AUG-23

TAYYAB, NEIL, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350

C1. Lista de proveedores de la red Médico de atención especializada

SAN DIEGO, CA 92121
Effective as of 01-JAN-21

TAYYAB, NEIL, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

TAYYAB, NEIL, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

TRADONSKY, STEVEN, MD†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-JAN-14

TRADONSKY, STEVEN, MD†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-SEP-15

URBAND, LINDSEY, MD†

Provider ID: N/A

8008 FROST ST STE 403
SAN DIEGO, CA 92123
Effective as of 01-JUL-19

WHEATLEY, BENJAMIN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

WHEATLEY, BENJAMIN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-OCT-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-NOV-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-OCT-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-OCT-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-OCT-23

SURGERY PLASTIC

APOSTOLIDES, JOHN, MD

Provider ID: N/A

1322 SCOTT ST STE 102
SAN DIEGO, CA 92106
Effective as of 01-AUG-15

BATRA, MUNISH, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-MAR-02

CHAO, JAMES, MD†

Provider ID: N/A

8901 ACTIVITY RD
SAN DIEGO, CA 92126
Effective as of 01-JUL-15

CHEN, STEVEN, MD†

Provider ID: N/A

8901 ACTIVITY RD
SAN DIEGO, CA 92126
Effective as of 01-JUL-15

GOSMAN, AMANDA, MD†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

GOSMAN, AMANDA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

HANDLER, BARRY, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2305
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

KUPFER, DAVID, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

5395 RUFFIN RD STE 201
SAN DIEGO, CA 92123
Effective as of 01-JUL-14

NGUYEN, KHANG, MD

Provider ID: N/A

6610 FLANDERS DR STE 101
SAN DIEGO, CA 92121
Effective as of 01-FEB-23

SURGERY THORACIC

HEMP, JAMES, MD†

Provider ID: N/A

4033 3RD AVE STE 210
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

HUDSON, JESSICA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

SURGICAL ONCOLOGY

MEHTSUN, WINTA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

UROLOGY

ABITBOL, JEAN-JACQUES, MD†

Provider ID: N/A

5395 RUFFIN RD STE 202
SAN DIEGO, CA 92123*
Effective as of 01-NOV-21

ANGER, JENNIFER, MD†

Provider ID: N/A

4520 EXECUTIVE DR STE

360

SAN DIEGO, CA 92121
Effective as of 01-OCT-21

ANGER, JENNIFER, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

BAGRODIA, ADITYA, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

BASTUBA, MARTIN, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2207
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

BUTLER, PHILIP, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

BUTLER, PHILIP, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

BUTLER, PHILIP, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

BUTLER, PHILIP, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-24

CHEN, TONY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

COHEN, EDWARD, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-SEP-21

COHEN, EDWARD, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

COHEN, EDWARD, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

COHEN, EDWARD, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

COHEN, EDWARD, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-NOV-22

C1. Lista de proveedores de la red Médico de atención especializada

COHEN, EDWARD, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-24

COHEN, EDWARD, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DATO, PAUL, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-FEB-24

DATO, PAUL, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

DICKS, BRIAN, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

DICKS, BRIAN, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DICKS, BRIAN, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-FEB-24

HOLDEN, MARC, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-SEP-22

HOLDEN, MARC, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-OCT-22

HOLDEN, MARC, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

HOLDEN, MARC, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

HOLDEN, MARC, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

JUMA, SAAD, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

JUMA, SAAD, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

CI. Lista de proveedores de la red Médico de atención especializada

JUMA, SAAD, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-FEB-24

KATZ, JONATHAN, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

KEILLER, DANNY, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-24

KEILLER, DANNY, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

KEILLER, DANNY, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

KEILLER, DANNY, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Effective as of 01-FEB-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

NGUYEN, HUNG, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

NGUYEN, HUNG, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

NGUYEN, HUNG, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

NGUYEN, HUNG, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Teleservice

Effective as of 01-SEP-21

NGUYEN, HUNG, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Teleservice

Effective as of 01-JAN-24

NGUYEN, HUNG, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Teleservice
Effective as of 01-NOV-22

PE, MARK-RALLY, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-24

PE, MARK-RALLY, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

PE, MARK-RALLY, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

ROBERTS, JAMES, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

ROBERTS, JAMES, MD

Provider ID: N/A

4060 4TH AVE STE 310

C1. Lista de proveedores de la red Médico de atención especializada

SAN DIEGO, CA 92103
Effective as of 01-JAN-24

ROBERTS, JAMES, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

ROBERTS, JAMES, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

SALEM, CAROL, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-OCT-07

SALEM, CAROL, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

SALEM, CAROL, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-OCT-19

SALEM, CAROL, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

SALEM, CAROL, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

SALEM, CAROL, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

SALEM, CAROL, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

SALEM, CAROL, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

3444 KEARNY VILLA RD

STE 202
SAN DIEGO, CA 92123
Effective as of 01-JUL-21

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-NOV-22

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JUN-21

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-NOV-22

SHEETZ, TYLER, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-NOV-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22

C1. Lista de proveedores de la red Médico de atención especializada

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JAN-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-DEC-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-AUG-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☒ 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Effective as of 01-SEP-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☒ 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Effective as of 01-SEP-22

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☒ 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Effective as of 01-DEC-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☒ 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Effective as of 01-JAN-21

VAPNEK, EVAN, MD†

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Effective as of 01-JUL-22

VAPNEK, EVAN, MD†

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Effective as of 01-JAN-24

VAPNEK, EVAN, MD†

Provider ID: N/A

☒ 4033 3RD AVE STE 400
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

VAPNEK, EVAN, MD

Provider ID: N/A

☒ 230 PROSPECT PL STE 210
SAN DIEGO, CA 92118

Effective as of 01-JAN-24

VAPNEK, EVAN, MD†

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-SEP-21

VAPNEK, EVAN, MD†

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Effective as of 01-SEP-21

VAPNEK, EVAN, MD

Provider ID: N/A

☒ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

VAPNEK, EVAN, MD†

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

VAPNEK, EVAN, MD†

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Effective as of 01-JAN-23

VAPNEK, EVAN, MD†

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

VAPNEK, EVAN, MD†

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

WANG, LUKE, MD

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

ADDICTIVE MEDICINE

NAFICY, K, MD†

Provider ID: N/A

☒ 30448 RANCHO VIEJO RD

C1. Lista de proveedores de la red Médico de atención especializada

STE 150
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-MAY-21

CLINICAL NEUROPSYCHOLOGIST

HOCHBERGER, WILLIAM, PhD

Provider ID: N/A

☐ 29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

HOCHBERGER, WILLIAM, PhD

Provider ID: N/A

☐ 29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A

☐ 30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A

☐ 30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

EMERGENCY MEDICINE

FAHIM, ASHRAF, MD

Provider ID: N/A

☐ 27372 CALLE ARROYO
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-APR-24

REZVAN, KAVEH, DO†

Provider ID: N/A

☐ 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

FAMILY PRACTICE

LEWIS, GEORGE, MD

Provider ID: N/A

☐ 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

LEWIS, GEORGE, MD

Provider ID: N/A

☐ 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

LEWIS, GEORGE, MD

Provider ID: N/A

☐ 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

OBZEJTA, NATALIA, MD†

Provider ID: N/A

☐ 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

CA 92675

Effective as of 01-APR-22

OBZEJTA, NATALIA, MD†

Provider ID: N/A

☐ 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-22

OBZEJTA, NATALIA, MD†

Provider ID: N/A

☐ 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-22

PETERSON, TYLER, DO

Provider ID: N/A

☐ 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

PETERSON, TYLER, DO

Provider ID: N/A

☐ 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

PETERSON, TYLER, DO

Provider ID: N/A

☐ 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

RAD, SHERVIN, MD

Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-24

RAD, SHERVIN, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-24

RAD, SHERVIN, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-24

TAKHAR, JASMINE, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

TAKHAR, JASMINE, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

TAKHAR, JASMINE, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

INTERNAL MEDICINE

CARABULEA, GABRIEL, MD

Provider ID: N/A

30250 RANCHO VIEJO RD
STE C
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-23

CARABULEA, GABRIEL, MD

Provider ID: N/A

30250 RANCHO VIEJO RD
STE C
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-23

KALE, RAHUL, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-19

KOHLI, SANJIVAN, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

KOHLI, SANJIVAN, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

KOHLI, SANJIVAN, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD

STE 200

SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-17

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-NOV-22

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-NOV-22

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

KALE, RAHUL, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

KALE, RAHUL, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

KALE, RAHUL, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,

C1. Lista de proveedores de la red Médico de atención especializada

CA 92675
Effective as of 01-JUN-17

KOHLI, SANJIVAN, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-19

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-24

NEPHROLOGY

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-22

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-22

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-22

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-22

LUI, STEPHEN, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-24

PANG, JASON, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-14

PANG, JASON, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-NOV-14

OPHTHALMOLOGY

KIM, ESTHER, MD

Provider ID: N/A

31451 RANCHO VIEJO RD

STE 101

SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

KIM, ESTHER, MD

Provider ID: N/A

31451 RANCHO VIEJO RD
STE 101
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

WILLIAMS, MARK, MD

Provider ID: N/A

31451 RANCHO VIEJO RD
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-24

WILLIAMS, MARK, MD

Provider ID: N/A

31451 RANCHO VIEJO RD
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

WILLIAMS, MARK, MD

Provider ID: N/A

31451 RANCHO VIEJO RD
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

PODIATRIST

ANGAROLA, JEFF, DPM

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-22

ANGAROLA, JEFF, DPM

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-22

PSYCHIATRY

KURKJIAN, AZAD, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-18

KURKJIAN, AZAD, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-18

PSYCHIATRY CHILD

KURKJIAN, AZAD, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-18

KURKJIAN, AZAD, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-18

PSYCHOLOGIST

HANSINK, RAYMOND, PhD†

Provider ID: N/A

30290 RANCHO VIEJO RD
STE 104
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-20

HANSINK, RAYMOND, PhD†

Provider ID: N/A

30290 RANCHO VIEJO RD
STE 104
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-20

HANSINK, RAYMOND, PhD†

Provider ID: N/A

30290 RANCHO VIEJO RD
STE 104
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-20

HANSINK, RAYMOND, PhD†

Provider ID: N/A

30290 RANCHO VIEJO RD
STE 104
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-20

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A

30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A

30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,

CA 92675

Effective as of 01-AUG-23

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A

30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A

30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

SEIDER, TALIA, PhD

Provider ID: N/A

29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

SEIDER, TALIA, PhD

Provider ID: N/A

29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

SEIDER, TALIA, PhD

Provider ID: N/A

29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

SEIDER, TALIA, PhD

Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

PULMONARY DISEASES

KALE, RAHUL, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-24

KALE, RAHUL, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-NOV-19

KALE, RAHUL, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-17

KALE, RAHUL, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-18

KOHLI, SANJIVAN, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,

CA 92675

Effective as of 01-JAN-18

KOHLI, SANJIVAN, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-20

KOHLI, SANJIVAN, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-17

KOHLI, SANJIVAN, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-24

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-DEC-22

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-JUN-24

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-JUN-24

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-JUN-23

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-OCT-22

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-NOV-22

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-NOV-22

**C1. Lista de proveedores de la red
Médico de atención especializada**

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-DEC-22

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-18

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-18

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-24

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD

STE 200

SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-24

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-24

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-FEB-21

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-FEB-21

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-20

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-21

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-24

YEAM, INCHEL, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

YEAM, INCHEL, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUL-21

YEAM, INCHEL, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-16

YEAM, INCHEL, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,

C1. Lista de proveedores de la red Médico de atención especializada

CA 92675
Effective as of 01-JUL-21

YEAM, INCHEL, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-16

SURGERY HAND

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-20

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-20

SURGERY ORTHOPEDIC

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
92675
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
92675
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

HUO, KEUN-HENG, MD

Provider ID: N/A

31920 DEL OBISPO ST STE

170

SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

HUO, KEUN-HENG, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
92675
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

HUO, KEUN-HENG, MD

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAR-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-23

C1. Lista de proveedores de la red Médico de atención especializada

LEE, RICHARD, MD

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-21

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-21

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-21

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,

CA 92675

Effective as of 01-FEB-20

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-FEB-20

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-FEB-20

CARDIAC ELECTROPHYSIOLOGY

LERNER, JONATHAN, MD

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-JUL-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-JAN-23

CARDIOVASCULAR DISEASE

CARLSON, STEVEN, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Teleservice

Effective as of 01-APR-21

CARLSON, STEVEN, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-JAN-21

CARLSON, STEVEN, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-SEP-22

DO, HULBERT, MD

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-OCT-23

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-SEP-22

NARAYANAN, MEENA, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-SEP-22

NARAYANAN, MEENA, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-APR-21

PARIKH, MILIND, DO†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-SEP-22

SARSAM, LUAY, MD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-JUL-23

SHAH, KULIN, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-JAN-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-SEP-22

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-JAN-23

CERTIFIED

ACUPUNCTURIST

CARRA, BARBARA, LAC

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUL-24

GONZALEZ, ANDRES, LAC

Provider ID: N/A

1595 GRAND AVE STE 100
SAN MARCOS, CA 92078
Effective as of 01-MAY-23

CERTIFIED NURSE

PRACTITIONER

FAIQ, JAMILA, NP†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-JAN-21

FAIQ, JAMILA, NP†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-NOV-22

FODDA, RAMI, NPF

Provider ID: N/A

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Effective as of 01-FEB-23

KOHOUT, KATHRYN, NP†

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069

Effective as of 01-SEP-22

KROCHMAL, RACHEL, NP

Provider ID: N/A

120 CRAVEN RD STE 101
SAN MARCOS, CA 92078

Effective as of 01-OCT-23

MAROSOK, MICHELLE, NP

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

MOONEY, PATRICIA, NP†

Provider ID: N/A

838 NORDAHL RD STE 300

SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAY-21

MOONEY, PATRICIA, NP†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-JUL-21

MWAURA, WAIRIMU, NP†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-SEP-22

MWAURA, WAIRIMU, NP†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-JUN-21

PARSONS, MEKRAE, NP

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069

Effective as of 01-DEC-23

VAHDAT, VALERIE, NP†

Provider ID: N/A

2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069

Effective as of 01-NOV-22

VICK, ALINA, NP

Provider ID: N/A

314 S TWIN OAKS VALLEY
RD STE 114

SAN MARCOS, CA 92078

Teleservice

Effective as of 01-NOV-23

C1. Lista de proveedores de la red Médico de atención especializada

WILLEY, MARTI, NP[†]

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-JUN-21

YCASAS, EMILY, NP

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUN-24

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA, CRNM[†]

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

MATEO, MARIE, CRNM[†]

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

CHIROPRACTOR

HINES, TAYTE, DC

Provider ID: N/A

2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-JAN-24

JEPPESEN, LANCE, DC

Provider ID: N/A

1146 SAN MARINO DR STE L
SAN MARCOS, CA 92078
Effective as of 01-JAN-01

JIMENEZ, CLARIBEL, DC

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUL-24

MAUSER, JILL ELLEN, DC

Provider ID: N/A

1146 SAN MARINO DR
SAN MARCOS, CA 92078
Effective as of 01-JUN-21

PATEL, BRIJESH, DC

Provider ID: N/A

2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-JUN-24

PATEL, BRIJESH, DC

Provider ID: N/A

2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-JUL-24

TRAINER, JASON, DC[†]

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

TRAINER, JASON, DC

Provider ID: N/A

1595 GRAND AVE STE 100
SAN MARCOS, CA 92078
Effective as of 01-MAR-24

DERMATOLOGY

GILBOA, RUTH, MD[†]

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069
Effective as of 01-AUG-21

SIRICHOTIRATANA, MELISSA,

MD[†]

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069
Effective as of 01-JAN-23

VENKAT, ARUN, MD[†]

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069
Effective as of 01-AUG-20

VENKAT, ARUN, MD[†]

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

VENKAT, ARUN, MD[†]

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069
Effective as of 01-MAR-17

FAMILY PRACTICE

MATIAS, JULIE, DO

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-AUG-24

MCHENRY, KATHRYN, DO

Provider ID: N/A

2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-MAY-24

NATH, DEVARSHI, MD

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069*
Effective as of 01-JUN-24

NATH, DEVARSHI, MD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Effective as of 01-FEB-23

HEMATOLOGY / ONCOLOGY

BESSUDO, ALBERTO, MD[†]

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-NOV-21

BESSUDO, ALBERTO, MD[†]

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-JAN-21

KOSMO, MICHAEL, MD[†]

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-JAN-21

MARJON, PHILIP, MD

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-APR-24

SULLIVAN, JESSICA, DO[†]

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Effective as of 01-OCT-22

INFECTIOUS DISEASE

PONIACHIK, SAMUEL, MD[†]

Provider ID: N/A

150 VALPREDA RD
SAN MARCOS, CA 92069
Effective as of 01-JUN-24

INTERNAL MEDICINE

NARAYANAN, MEENA, MD[†]

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078*
Effective as of 01-JAN-21

PONIACHIK, SAMUEL, MD

Provider ID: N/A

1595 GRAND AVE STE 100
SAN MARCOS, CA 92078
Effective as of 01-JUN-23

INTERVENTIONAL CARDIOLOGY

DO, HULBERT, MD[†]

Provider ID: N/A

150 VALPREDA RD
SAN MARCOS, CA 92069
Effective as of 01-AUG-22

JOHN, ALAN, MD

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-MAY-23

MOHAMEDALI, BURHAN, MD[†]

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Teleservice
Effective as of 01-JAN-21

PARIKH, MILIND, DO[†]

Provider ID: N/A

150 VALPREDA RD
SAN MARCOS, CA 92069
Effective as of 01-SEP-22

RUBIO GARCIA, MANOLO, MD[†]

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-DEC-22

RUBIO GARCIA, MANOLO, MD[†]

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-MAY-23

SHAH, KULIN, MD[†]

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-APR-23

SUDHAKAR, DEEPTHI, MD[†]

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-APR-23

SUDHAKAR, DEEPTHI, MD[†]

Provider ID: N/A

150 VALPREDA RD
SAN MARCOS, CA 92069
Effective as of 01-SEP-22

LICENSED CLINICAL SOCIAL WORKER

MARTINEZ, NORAYMA, LCSW[†]

Provider ID: N/A

1510 E MISSION RD STE
RV035
SAN MARCOS, CA 92069
Effective as of 01-NOV-22

MEDICAL ONCOLOGY

C1. Lista de proveedores de la red Médico de atención especializada

FRAKES, LAURIE, MD†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-JAN-21

FRAKES, LAURIE, MD†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-OCT-22

MCCLAY, EDWARD, MD†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Effective as of 01-FEB-21

NEPHROLOGY

AFSHAR, MASOUD, MD†

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-MAY-22

AFSHAR, MASOUD, MD†

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-OCT-23

KAYAL, ANAS, MD†

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078

Effective as of 01-AUG-24

KAYAL, ANAS, MD†

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078

Effective as of 01-MAY-22

KAYAL, ANAS, MD†

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078

Effective as of 01-OCT-23

KAYAL, ANAS, MD†

Provider ID: N/A

334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-AUG-24

NEUROLOGY

ANDER, AZIZ, MD†

Provider ID: N/A

838 NORDAHL RD STE 310
SAN MARCOS, CA 92069

Effective as of 01-NOV-21

ANDER, AZIZ, MD†

Provider ID: N/A

838 NORDAHL RD STE 310
SAN MARCOS, CA 92069

Effective as of 01-JUL-22

FARHIDVASH, FARIBA, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JUL-24

FARHIDVASH, FARIBA, MD†

Provider ID: N/A

838 NORDAHL RD STE 200

SAN MARCOS, CA 92069

Effective as of 01-DEC-22

GRATIANNE, ROBERTO, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JUN-22

GUPTA, MONIKA, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JUN-22

GUPTA, MONIKA, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JUL-24

HOSSEINZADEHMALEKI, ANA, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

HOSSEINZADEHMALEKI, ANA, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

HUISA-GARATE, BRANKO, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-MAR-24

HUISA-GARATE, BRANKO, MD†

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Effective as of 01-JUN-22

KAYAL, ANAS, MD†

Provider ID: N/A

334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-SEP-22

MAREK, MAKSYM, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

MAREK, MAKSYM, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAY-24

MAREK, MAKSYM, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-OCT-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-AUG-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

OLENSKI, KLARI, DO†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-MAY-24

OLENSKI, KLARI, DO†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JUN-22

PHAM, ALISE, DO

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

PHAM, ALISE, DO

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-AUG-23

PHAM, ALISE, DO

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAY-24

SILVER, BRENT, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-DEC-22

SORIA LOPEZ, JOSE, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Effective as of 01-JUN-22

WU, MELANIE, DO†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JAN-23

***OBSTETRICS /
GYNECOLOGY***

POUNTNEY, MARLENE, MD†

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069

Effective as of 01-APR-14

POUNTNEY, MARLENE, MD†

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069

Effective as of 01-JUL-22

OPHTHALMOLOGY

GUAN, HOWARD, MD

Provider ID: N/A

100 N RANCHO SANTA FE
RD STE 126

SAN MARCOS, CA 92069

Effective as of 01-FEB-24

PRESTERA, TORY, MD†

Provider ID: N/A

100 N RANCHO SANTA FE
RD STE 126

SAN MARCOS, CA 92069

Effective as of 01-JAN-21

PRESTERA, TORY, MD†

Provider ID: N/A

100 N RANCHO SANTA FE

C1. Lista de proveedores de la red Médico de atención especializada

RD STE 126
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

PEDIATRICS

LUMHO, RACHEL, MD

Provider ID: N/A
150 VALPREDA RD
SAN MARCOS, CA 92069
Effective as of 01-NOV-23

QUINTERO, CAROLYN, MD

Provider ID: N/A
150 VALPREDA RD
SAN MARCOS, CA 92069
Effective as of 01-NOV-23

PHYSICIANS ASSISTANT

BASIN, NATALIE, PA

Provider ID: N/A
838 NORDAHL RD STE 250
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-AUG-23

BECKER, JANTIMA, PA

Provider ID: N/A
838 NORDAHL RD STE 250
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-APR-24

BERNARDO, RACHELLE, PA

Provider ID: N/A
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Effective as of 01-FEB-23

ESCALANTE, JUVY, PA

Provider ID: N/A
2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-FEB-23

MONTES, VIVIAN, PA

Provider ID: N/A
150 VALPREDA RD
SAN MARCOS, CA 92069
Effective as of 01-JUN-24

POLLEY, SHANNON, PA

Provider ID: N/A
150 VALPREDA RD
SAN MARCOS, CA 92069
Effective as of 01-MAR-23

PODIATRIST

FARMER, STEVEN, DPM

Provider ID: N/A
2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069*
Effective as of 01-JAN-24

PSYCHIATRY

CABREJOS, CLAUDIO, MD

Provider ID: N/A
150 VALPREDA RD
SAN MARCOS, CA 92069
Effective as of 01-JUN-24

CABREJOS, CLAUDIO, MD

Provider ID: N/A
150 VALPREDA RD
SAN MARCOS, CA 92069
Effective as of 01-JUN-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-AUG-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A
838 NORDAHL RD STE 200

SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-AUG-23

PHAM, ALISE, DO

Provider ID: N/A
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-AUG-23

PHAM, ALISE, DO

Provider ID: N/A
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAR-24

PHAM, ALISE, DO

Provider ID: N/A
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAR-24

PHAM, ALISE, DO

Provider ID: N/A
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-AUG-23

PSYCHOLOGIST

**CARLTON-PENN, CORNELIA,
PhD**

Provider ID: N/A

📍 1510 E MISSION RD SPC
RV035
SAN MARCOS, CA 92069
Effective as of 01-NOV-22

**CARLTON-PENN, CORNELIA,
PhD**

Provider ID: N/A

📍 1510 E MISSION RD SPC
RV035
SAN MARCOS, CA 92069
Effective as of 01-NOV-22

LOVE, YVONNE, PSYD

Provider ID: N/A

📍 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-JUL-23

LOVE, YVONNE, PSYD

Provider ID: N/A

📍 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-JUL-23

***REGISTERED PHYSICAL
THERAPIST***

BOUTELLE, BARBARA, PT

Provider ID: N/A

📍 935 W SAN MARCOS BLVD
STE 102
SAN MARCOS, CA 92078
Effective as of 01-JAN-24

BOUTELLE, DAVID, PT

Provider ID: N/A

📍 935 W SAN MARCOS BLVD
STE 102
SAN MARCOS, CA 92078

Effective as of 01-JAN-24

SPURRELL, KATHRYN, PT

Provider ID: N/A

📍 2115 MONTIEL RD STE 103
SAN MARCOS, CA 92069
Effective as of 01-JAN-24

RHEUMATOLOGY

AL NAHLAWI, BASMA, MD†

Provider ID: N/A

📍 960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078
Effective as of 01-MAY-22

AL NAHLAWI, BASMA, MD†

Provider ID: N/A

📍 334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078
Teleservice
Effective as of 01-JUL-22

AL NAHLAWI, BASMA, MD†

Provider ID: N/A

📍 334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078
Teleservice
Effective as of 01-SEP-22

AL NAHLAWI, BASMA, MD†

Provider ID: N/A

📍 334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078
Teleservice
Effective as of 01-OCT-21

AL NAHLAWI, BASMA, MD†

Provider ID: N/A

📍 960 W SAN MARCOS BLVD
STE 210

SAN MARCOS, CA 92078
Effective as of 01-OCT-23

DIKRANIAN, ARA, MD

Provider ID: N/A

📍 960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078
Effective as of 01-MAY-24

DIKRANIAN, ARA, MD

Provider ID: N/A

📍 960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078
Effective as of 01-MAR-24

ANESTHESIOLOGY

FONTANA, LOUIS, MD†

Provider ID: N/A

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

***CARDIOVASCULAR
DISEASE***

AIZIN, VITALI, MD†

Provider ID: N/A

📍 4630 BORDER VILLAGE RD
STE H
SAN YSIDRO, CA 92173
Effective as of 01-FEB-21

AIZIN, VITALI, MD†

Provider ID: N/A

📍 4630 BORDER VILLAGE RD
STE H
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

CERTIFIED NURSE

PRACTITIONER

C1. Lista de proveedores de la red Médico de atención especializada

CELIZ, ADRIANA, NP[†]

Provider ID: N/A

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

DRISCOLL, SUSAN, NP[†]

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

HACINAS, REYNALDO, NP[†]

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

KANTAS, PARIS, NP[†]

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-MAY-22

ROSCOE, SYDNEY, NP

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-24

SANCHEZ, MYRNA, NP

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUN-24

VAZQUEZ-ERLBECK, MARTHA, NP

Provider ID: N/A

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-MAY-24

VAZQUEZ-ERLBECK, MARTHA, NP

Provider ID: N/A

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-DEC-21

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL, MD[†]

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-DEC-22

ARRIETA, NOEMI, DO

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-APR-23

CORONADO, MYRNA, MD

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173*
Teleservice
Effective as of 01-APR-23

CORONADO, MYRNA, MD[†]

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173*
Teleservice
Effective as of 01-APR-23

DALUGDUGAN, ESTHER, MD

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-NOV-23

ESTRADA, JOHANNA, MD[†]

Provider ID: N/A

4004 BEYER BLVD

SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-JUL-22

QURESHI, SOFIA, MD

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-24

ROJAS, SARAH, MD

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUN-24

ROJAS, STEVEN, MD

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-MAY-23

SHAHTAJI, ALAN, DO

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-24

STALEY, MICHAELA, MD[†]

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-NOV-23

GENERAL PRACTICE

GARCIA SANDOVAL, DAMARIS, MD

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-NOV-23

INFECTIOUS DISEASE

C1. Lista de proveedores de la red Médico de atención especializada

ALDOUS, JEANNETTE, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-22

PROMER, KATHERINE, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

INTERNAL MEDICINE

HURST, MICHAEL, DO†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-SEP-22

KAUFER, DAVID, MD

Provider ID: N/A

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUN-24

LAMANTIA, MICHELE, MD

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-AUG-23

PATEL, BHAVESH, DO

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-JUN-24

PROMER, KATHERINE, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-SEP-22

LICENSED CLINICAL SOCIAL WORKER

JENNINGS, AMY, LCSW†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-SEP-22

LAD, NIKISHA, LCSW

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-APR-24

LOPEZ, MARIBEL, LCSW

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

MARRIAGE FAMILY THERAPIST

ALVAREZ, IRAIDA, MFT

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-DEC-22

BALTRUS, JUSTINE ANN, MFT

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-NOV-22

ESTAVILLO, SAUL, MFT

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-OCT-22

JIMENEZ, NANCY, MFT

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-FEB-24

NEONATAL / PERINATAL MEDICINE

GOMEZ, DANIELA, MD

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-OCT-22

GOMEZ, DANIELA, MD

Provider ID: N/A

4004 BEYER BLVD STE 400
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-OCT-22

NEPHROLOGY

SOLTERO, RICARDO, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

OBSTETRICS / GYNECOLOGY

BERGGREN, ERICA, MD†

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-SEP-21

CARR, MIANDA, MD†

Provider ID: N/A

4004 BEYER BLVD

C1. Lista de proveedores de la red Médico de atención especializada

SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

CARR, MIANDA, MD

Provider ID: N/A
4050 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-MAY-24

DANESHMAND, SHAHRAM, MD†

Provider ID: N/A
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-SEP-21

DANESHMAND, SHAHRAM, MD†

Provider ID: N/A
4050 BEYER BLVD
SAN YSIDRO, CA 92173*
Teleservice
Effective as of 01-JUL-22

DINH, MY, DO†

Provider ID: N/A
4050 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-JUL-22

GOLDSTEIN, EDWARD, MD†

Provider ID: N/A
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

MENDEZ, DIEGO, MD†

Provider ID: N/A
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-NOV-21

OCCUPATIONAL THERAPIST

BROWN, JOHNNY, OT

Provider ID: N/A
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-22

PEDIATRICS

DILLON, BENEDICT, MD†

Provider ID: N/A
4050 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-JAN-21

TAYLOR, TASHA, MD†

Provider ID: N/A
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-22

PHYSICIANS ASSISTANT

BUCKNER, JOSEPH, PA

Provider ID: N/A
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-FEB-22

HARMIS, NATASHA, PA†

Provider ID: N/A
3364 BEYER BLVD STE 102
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-MAY-21

MARTINEZ-MURGUIA, IRENE, PA

Provider ID: N/A
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-FEB-24

PORTO MADURSKI, KRISTINE, PA†

Provider ID: N/A
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

ROSENBLATT, SHERILYN, PA†

Provider ID: N/A
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

SMITH, DOUGLAS, PA†

Provider ID: N/A
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-MAY-21

SUNA-SITTO, MOHEEN, PA†

Provider ID: N/A
3364 BEYER BLVD STE 102
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-FEB-21

THOMAS, KIMBERLY, PA

Provider ID: N/A
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-24

TRUJILLO, MIGUEL, PA†

Provider ID: N/A
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

PODIATRIST

MANCHEL, BRUCE, DPM†

Provider ID: N/A
4004 BEYER BLVD

C1. Lista de proveedores de la red Médico de atención especializada

SAN YSIDRO, CA 92173
Effective as of 01-JUL-22

MANCHEL, BRUCE, DPM†

Provider ID: N/A
☑ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

PSYCHIATRY

BERGGREN, ERICA, MD†

Provider ID: N/A
☑ 4050 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-JUL-22

BERGGREN, ERICA, MD†

Provider ID: N/A
☑ 4050 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-JUL-22

CRAWFORD-DAY, ANN, MD

Provider ID: N/A
☑ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

CRAWFORD-DAY, ANN, MD

Provider ID: N/A
☑ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

FONTANA, LOUIS, MD†

Provider ID: N/A
☑ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

FONTANA, LOUIS, MD†

Provider ID: N/A
☑ 4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-APR-23

JAMES, CHRISTINE, DO

Provider ID: N/A
☑ 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-FEB-24

JAMES, CHRISTINE, DO

Provider ID: N/A
☑ 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-FEB-24

OJHA, PRITI, MD

Provider ID: N/A
☑ 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-JUN-24

OJHA, PRITI, MD

Provider ID: N/A
☑ 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-JUN-24

REGISTERED PHYSICAL THERAPIST

SALAZAR, SERGIO, PT

Provider ID: N/A
☑ 3364 BEYER BLVD
STE 102
SAN YSIDRO, CA 92173
Effective as of 01-AUG-24

RHEUMATOLOGY

LWIN, THUTHIRI, MD

Provider ID: N/A
☑ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUN-24

SPEECH PATHOLOGIST

HILL, CARLA, SP†

Provider ID: N/A
☑ 3364 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-MAY-22

SURGERY ORTHOPEDIC

ROSENFELD, ALAN, MD†

Provider ID: N/A
☑ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

UROLOGY

SALEM, CAROL, MD†

Provider ID: N/A
☑ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

MARRIAGE FAMILY THERAPIST

HAWTHORNE, KAREN, MFT

Provider ID: N/A
☑ 30240 HWY 78
SANTA YSABEL, CA 92070
Teleservice
Effective as of 01-JUL-24

CERTIFIED NURSE PRACTITIONER

LARSON, LINDSAY, NP

Provider ID: N/A
☑ 9325 MISSION GORGE RD
STE 102
SANTEE, CA 92071
Teleservice
Effective as of 01-JUN-24

C1. Lista de proveedores de la red Médico de atención especializada

CHIROPRACTOR

KELCHNER, MATTHEW, DC†

Provider ID: N/A

120 TOWN CENTER PKWY
SANTEE, CA 92071

Effective as of 01-DEC-22

GASTROENTEROLOGY

REDDY, ANANTHRAM, MD†

Provider ID: N/A

9456 CUYAMACA ST STE
102
SANTEE, CA 92071

Effective as of 01-JAN-21

REDDY, ANANTHRAM, MD†

Provider ID: N/A

9456 CUYAMACA ST STE
102
SANTEE, CA 92071

Effective as of 01-JUL-22

INTERNAL MEDICINE

CORBIN, DAVID, MD†

Provider ID: N/A

120 TOWN CENTER PKWY
SANTEE, CA 92071

Teleservice

Effective as of 01-NOV-23

LICENSED CLINICAL SOCIAL WORKER

MEAGHER, RAISHELLE, LCSW

Provider ID: N/A

120 TOWN CENTER PKWY
SANTEE, CA 92071

Teleservice

Effective as of 01-NOV-23

PEDIATRICS

IKE, ERICA, DO†

Provider ID: N/A

120 TOWN CENTER PKWY
SANTEE, CA 92071

Effective as of 01-JAN-21

PHYSICIANS ASSISTANT

ROSENBLATT, SHERILYN, PA†

Provider ID: N/A

120 TOWN CENTER PKWY
SANTEE, CA 92071

Teleservice

Effective as of 01-OCT-21

PSYCHIATRY

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

8770 CUYAMACA ST STE 4
SANTEE, CA 92071

Effective as of 01-MAY-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

8770 CUYAMACA ST STE 4
SANTEE, CA 92071

Effective as of 01-MAY-22

PSYCHOLOGIST

ALVAREZ, ILIAN, PSYD

Provider ID: N/A

120 TOWN CENTER PKWY
SANTEE, CA 92071

Teleservice

Effective as of 01-AUG-24

ALVAREZ, ILIAN, PSYD

Provider ID: N/A

120 TOWN CENTER PKWY
SANTEE, CA 92071

Teleservice

Effective as of 01-AUG-24

RADIOLOGY DIAGNOSTIC

MOORE, BRIAN, MD†

Provider ID: N/A

9640 MISSION GORGE RD
STE H
SANTEE, CA 92071

Effective as of 01-JAN-21

VENKATESH, VIJAY, MD†

Provider ID: N/A

9640 MISSION GORGE RD
STE H
SANTEE, CA 92071

Effective as of 01-SEP-22

REGISTERED PHYSICAL THERAPIST

BOUTELLE, BARBARA, PT

Provider ID: N/A

9830 PROSPECT AVE STE A
SANTEE, CA 92071

Effective as of 01-JAN-24

CERTIFIED NURSE PRACTITIONER

LINAMEN, NICHOLA, NP

Provider ID: N/A

380 STEVENS AVE STE 310
SOLANA BEACH, CA 92075

Effective as of 01-JUN-24

DERMATOLOGY

AGUIRRE, KRISTEN, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JAN-23

AGUIRRE, KRISTEN, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

☐ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUN-22

GILBOA, RUTH, MD†

Provider ID: N/A

☐ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUN-22

GILBOA, RUTH, MD†

Provider ID: N/A

☐ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUL-22

GILBOA, RUTH, MD†

Provider ID: N/A

☐ 530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-FEB-21

GILBOA, RUTH, MD†

Provider ID: N/A

☐ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-AUG-08

ROSS, ANDREW, MD†

Provider ID: N/A

☐ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-AUG-20

ROSS, ANDREW, MD†

Provider ID: N/A

☐ 530 LOMAS SANTA FE DR
STE D

SOLANA BEACH, CA 92075
Effective as of 01-JUL-22

ROSS, ANDREW, MD†

Provider ID: N/A

☐ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUN-22

SIRICHOTIRATANA, MELISSA, MD†

Provider ID: N/A

☐ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JAN-23

THIELE, JENS, MD†

Provider ID: N/A

☐ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUN-22

THIELE, JENS, MD†

Provider ID: N/A

☐ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-SEP-09

TSE, YARDY, MD†

Provider ID: N/A

☐ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUN-22

VENKAT, ARUN, MD†

Provider ID: N/A

☐ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-MAR-16

VENKAT, ARUN, MD†

Provider ID: N/A

☐ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-MAR-16

VENKAT, ARUN, MD†

Provider ID: N/A

☐ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUL-22

VENKAT, ARUN, MD†

Provider ID: N/A

☐ 530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-FEB-21

ENDOCRINOLOGY

METABOLISM DIABETES

ARGOUD, GEORGES, MD†

Provider ID: N/A

☐ 530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-JUL-22

ARGOUD, GEORGES, MD†

Provider ID: N/A

☐ 530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075*
Effective as of 01-JAN-24

ARGOUD, GEORGES, MD†

Provider ID: N/A

☐ 530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-MAR-15

C1. Lista de proveedores de la red Médico de atención especializada

ARGOUD, GEORGES, MD†

Provider ID: N/A

📍 530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-MAR-15

ARGOUD, GEORGES, MD†

Provider ID: N/A

📍 530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-JAN-21

ARGOUD, GEORGES, MD†

Provider ID: N/A

📍 530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-JAN-21

PHYSICIANS ASSISTANT

BOYDSTON, EMILY, PA

Provider ID: N/A

📍 380 STEVENS AVE STE 310
SOLANA BEACH, CA 92075
Teleservice
Effective as of 01-APR-24

GIBSON, JULIA, PA

Provider ID: N/A

📍 380 STEVENS AVE STE 310
SOLANA BEACH, CA 92075
Effective as of 01-MAY-23

LEE, MYUNGHEE, PA

Provider ID: N/A

📍 530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Teleservice
Effective as of 01-NOV-23

ROBINSON, JENELLE, PA

Provider ID: N/A

📍 530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-NOV-23

CERTIFIED NURSE PRACTITIONER

CISTRONE, MONICA, NPF

Provider ID: N/A

📍 9239 CAMPO RD STE A
SPRING VALLEY, CA 91977
Teleservice
Effective as of 01-JUL-23

GORDON, DANIELLE, NP†

Provider ID: N/A

📍 9239 CAMPO RD STE A
SPRING VALLEY, CA 91977
Teleservice
Effective as of 01-MAR-22

ALLERGY IMMUNOLOGY

BROWN, HOSEA, MD†

Provider ID: N/A

📍 26960 CHERRY HILLS
BLVD STE D
SUN CITY, CA 92586
Effective as of 01-FEB-22

AUDIOLOGIST

ACEVEDO-FREY, SYLVIA, AuD

Provider ID: N/A

📍 28071 BRADLEY RD
SUN CITY, CA 92586
Effective as of 01-JUN-23

CARDIOVASCULAR DISEASE

AGGARWAL, SAURABH, MD†

Provider ID: N/A

📍 26962 CHERRY HILLS
BLVD STE A
SUN CITY, CA 92586
Effective as of 01-DEC-21

SARSAM, SINAN, MD†

Provider ID: N/A

📍 26960 CHERRY HILLS
BLVD STE C
SUN CITY, CA 92586
Effective as of 01-JUN-21

CERTIFIED NURSE PRACTITIONER

SHIH, LU-HSUN, NP

Provider ID: N/A

📍 26960 CHERRY HILLS
BLVD STE A
SUN CITY, CA 92586
Effective as of 01-APR-24

GASTROENTEROLOGY

RAGHUWANSHI, NAISHADH, MD†

Provider ID: N/A

📍 26960 CHERRY HILLS
BLVD
SUN CITY, CA 92586
Effective as of 01-SEP-09

RAGHUWANSHI, NAISHADH, MD†

Provider ID: N/A

📍 26960 CHERRY HILLS
BLVD
SUN CITY, CA 92586
Effective as of 01-FEB-11

MARRIAGE FAMILY THERAPIST

C1. Lista de proveedores de la red Médico de atención especializada

PORTER, TERRY, MFT†

Provider ID: N/A

28125 BRADLEY RD STE 220
SUN CITY, CA 92586
Effective as of 01-JAN-23

PORTER, TERRY, MFT†

Provider ID: N/A

28125 BRADLEY RD STE 220
SUN CITY, CA 92586
Effective as of 01-JAN-23

NEPHROLOGY

ISHAK, SALAM, MD†

Provider ID: N/A

28125 BRADLEY RD STE 270
SUN CITY, CA 92586
Effective as of 01-SEP-12

ISHAK, SALAM, MD†

Provider ID: N/A

28125 BRADLEY RD STE 270
SUN CITY, CA 92586
Effective as of 01-JUN-12

OPHTHALMOLOGY

JACOBSON, ARTHUR, MD†

Provider ID: N/A

29826 HAUN RD STE 100
SUN CITY, CA 92586
Effective as of 01-JUL-23

LEE, JOHN, MD†

Provider ID: N/A

28125 BRADLEY RD STE 189
SUN CITY, CA 92586
Effective as of 01-FEB-11

OPTOMETRIST

LANE, KEVIN, OD†

Provider ID: N/A

29826 HAUN RD STE 100
SUN CITY, CA 92586
Effective as of 01-JUL-23

RADIOLOGY DIAGNOSTIC

BURROUGHS, GLORIA, MD†

Provider ID: N/A

26870 CHERRY HILLS
BLVD
SUN CITY, CA 92586
Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD†

Provider ID: N/A

26870 CHERRY HILLS
BLVD
SUN CITY, CA 92586
Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD†

Provider ID: N/A

26870 CHERRY HILLS
BLVD
SUN CITY, CA 92586
Effective as of 01-OCT-17

ALLERGY IMMUNOLOGY

GUPTA, SAMEER, MD†

Provider ID: N/A

41715 WINCHESTER RD STE
206
TEMECULA, CA 92590
Effective as of 01-JAN-16

GUPTA, SAMEER, MD†

Provider ID: N/A

41715 WINCHESTER RD STE
206
TEMECULA, CA 92590
Effective as of 01-JUL-23

GUPTA, SAMEER, MD†

Provider ID: N/A

41715 WINCHESTER RD STE
206
TEMECULA, CA 92590
Effective as of 01-DEC-21

GUPTA, SAMEER, MD†

Provider ID: N/A

41715 WINCHESTER RD STE
206
TEMECULA, CA 92590
Effective as of 01-FEB-15

ANESTHESIOLOGY

DORAISWAMY, ARUL, MD†

Provider ID: N/A

28975 OLD TOWN FRONT
ST STE 200
TEMECULA, CA 92590
Effective as of 01-JUL-17

DORAISWAMY, ARUL, MD†

Provider ID: N/A

28975 OLD TOWN FRONT
ST STE 200
TEMECULA, CA 92590
Effective as of 01-JUL-17

GUIANG, RAINIER, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-SEP-19

HYUN, SUZANNE, MD

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-MAR-24

JEDAMSKI, WALDTRAUT, MD

Provider ID: N/A

28975 OLD TOWN FRONT
ST STE 200
TEMECULA, CA 92590

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-OCT-19

KANU, ABDUL, MD

Provider ID: N/A

27699 JEFFERSON AVE
TEMECULA, CA 92590

Teleservice

Effective as of 01-AUG-20

PANG, GARY, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591

Effective as of 01-MAR-24

ANESTHESIOLOGY PAIN MANAGEMENT

CHEN, HAMILTON, MD

Provider ID: N/A

27450 YNEZ RD STE 202
TEMECULA, CA 92591

Effective as of 01-SEP-23

CHEN, HAMILTON, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591

Effective as of 01-SEP-19

CHEN, HAMILTON, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591

Effective as of 01-SEP-19

DADACHANJI, CYRUS, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590

Effective as of 01-JUL-23

DORAISWAMY, ARUL, MD†

Provider ID: N/A

28975 OLD TOWN FRONT
ST STE 200
TEMECULA, CA 92590

Effective as of 01-JUL-17

GUIANG, RAINIER, MD

Provider ID: N/A

27450 YNEZ RD STE 202
TEMECULA, CA 92591

Effective as of 01-SEP-23

GUIANG, RAINIER, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591

Effective as of 01-JUL-24

GUIANG, RAINIER, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591

Effective as of 01-MAR-24

HYUN, SUZANNE, MD

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591

Effective as of 01-JUL-24

LEIER, TIM, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590

Effective as of 01-MAY-18

LEIER, TIM, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590

Effective as of 01-SEP-19

MOELLER-BERTRAM, TOBIAS, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
201

TEMECULA, CA 92590

Effective as of 01-JUN-18

PANG, GARY, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591

Effective as of 01-JUL-24

CARDIOVASCULAR DISEASE

ALFAY, WISAM, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
290

TEMECULA, CA 92590

Effective as of 01-JAN-22

ALFAY, WISAM, MD

Provider ID: N/A

27450 YNEZ RD STE 109
TEMECULA, CA 92591

Effective as of 01-MAR-22

AMIN, JATIN, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103

TEMECULA, CA 92592

Effective as of 01-JUN-23

ATTIA, NADER, DO†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103

TEMECULA, CA 92592

Effective as of 01-JUN-23

ATTIA, NADER, DO†

Provider ID: N/A

31515 RANCHO PUEBLO RD

**C1. Lista de proveedores de la red
Médico de atención especializada**

STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

ATTIA, NADER, DO†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUL-22

ATTIA, NADER, DO†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-AUG-24

BISWAS, MIMI, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

COX, JEREMY, DO

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-MAR-24

COX, JEREMY, DO

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-MAR-24

MAPLETON, SHARINA, DO

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590*
Effective as of 01-NOV-24

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-FEB-22

SANGODKAR, SANDEEP, DO

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

SARSAM, SINAN, MD†

Provider ID: N/A

27450 YNEZ RD STE 109
TEMECULA, CA 92591
Effective as of 01-MAR-22

SARSAM, SINAN, MD†

Provider ID: N/A

27450 YNEZ RD STE 109
TEMECULA, CA 92591
Effective as of 01-MAR-22

**CERTIFIED
ACUPUNCTURIST**

LEE, KYUNG HAN, LAC

Provider ID: N/A

27455 TIERRA ALTA WAY
STE A
TEMECULA, CA 92590
Effective as of 01-MAR-21

LEE, KYUNG HAN, LAC

Provider ID: N/A

27455 TIERRA ALTA WAY
STE A
TEMECULA, CA 92590
Effective as of 01-MAR-21

WACHNER, KRISTELYN, LAC†

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-OCT-22

WACHNER, KRISTELYN, LAC†

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-OCT-22

**CERTIFIED NURSE
PRACTITIONER**

AGORRILLA, MARIA, NP

Provider ID: N/A

44274 GEORGE CUSHMAN
CT STE 212
TEMECULA, CA 92592
Effective as of 01-OCT-23

ALVAREZ, ARMANDA, NP

Provider ID: N/A

27555 YNEZ RD STE 102
TEMECULA, CA 92591
Effective as of 01-FEB-24

BEDFORD, RONALD, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

BEDFORD, RONALD, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

BEDFORD, RONALD, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-SEP-22

BEDFORD, RONALD, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Effective as of 01-MAY-22

BEDFORD, RONALD, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Effective as of 01-MAY-22

DONLON, RYAN, NPF

Provider ID: N/A

31150 TEMECULA PKWY
TEMECULA, CA 92592

Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

31150 TEMECULA PKWY
TEMECULA, CA 92592

Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

31150 TEMECULA PKWY
TEMECULA, CA 92592

Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

31150 TEMECULA PKWY
TEMECULA, CA 92592

Effective as of 01-MAR-24

GEISINGER, TERESA, NP

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592

Effective as of 01-APR-23

HARTMAN, JULIE, NPF

Provider ID: N/A

31170 TEMECULA PKWY
STE 100
TEMECULA, CA 92592

Effective as of 01-SEP-23

HASAN, BUSHRA, NP

Provider ID: N/A

31170 TEMECULA PKWY
STE 100
TEMECULA, CA 92592

Effective as of 01-OCT-22

HLAVAC, SANDRA, NP

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592

Effective as of 01-JUN-24

HLAVAC, SANDRA, NP

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592

Effective as of 01-APR-24

HUERTA, CARMEN, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Effective as of 01-DEC-22

HUERTA, CARMEN, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Effective as of 01-OCT-22

LIRA, SHANNON, NPF

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592

Effective as of 01-FEB-24

LIRA, SHANNON, NPF

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592

Effective as of 01-JUL-24

LUCACI, BIANCA, NP

Provider ID: N/A

27555 YNEZ RD STE 400
TEMECULA, CA 92591

Effective as of 01-SEP-22

ONUOHA, NOJA, NP†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591*

Effective as of 01-NOV-22

ONUOHA, NOJA, NP†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591*

Effective as of 01-NOV-22

SMITH, PAIGE, NP

Provider ID: N/A

27555 YNEZ RD STE 400
TEMECULA, CA 92591

Effective as of 01-OCT-23

THOMAS II, STEPHEN, NPF†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Effective as of 01-MAR-21

C1. Lista de proveedores de la red Médico de atención especializada

THOMAS II, STEPHEN, NPF†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-AUG-22

THOMAS II, STEPHEN, NPF†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-OCT-23

VAHDAT, VALERIE, NP

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JUN-24

ZELEDON, JAIME, NP

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAY-18

CHIROPRACTOR

BARTZ, PAUL, DC†

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JUL-22

FARSHLER, ANTHONY, DC†

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-NOV-23

FARSHLER, ANTHONY, DC†

Provider ID: N/A

41840 ENTERPRISE CIR N

TEMECULA, CA 92590

Effective as of 01-JUL-22

MYREN, DONALD, DC

Provider ID: N/A

26790 YNEZ CT STE 2B
TEMECULA, CA 92591
Effective as of 01-JUN-23

MYREN, DONALD, DC

Provider ID: N/A

26790 YNEZ CT STE 2B
TEMECULA, CA 92591
Effective as of 01-JUN-23

DERMATOLOGY

ABAZA, SAM, MD

Provider ID: N/A

30589 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-JUL-24

AWADALLA, FARAH, MD

Provider ID: N/A

30589 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-JUL-24

CABRAL, ERIK, MD

Provider ID: N/A

30589 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-JUL-24

DRAYER, JEFFREY, MD

Provider ID: N/A

30589 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-JUL-24

JACOBS, RANDOLPH, MD

Provider ID: N/A

40971 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-AUG-24

JACOBS, RANDOLPH, MD

Provider ID: N/A

40971 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-DEC-18

JACOBS, RANDOLPH, MD

Provider ID: N/A

40971 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-AUG-24

KHERADMAND, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22

KHERADMAND, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-JAN-22

KHERADMAND, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22

KHERADMAND, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE

C1. Lista de proveedores de la red Médico de atención especializada

MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

Provider ID: N/A

31150 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21

KOUPAIE, JAFAR, MD

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-MAY-24

KOUPAIE, JAFAR, MD

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-JUL-24

MEHDI, RAZA, MD

Provider ID: N/A

30589 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-JUL-24

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-FEB-22

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-JUL-21

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-JUL-21

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-JUL-24

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

ROSS, ANDREW, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD

STE 102
TEMECULA, CA 92592
Effective as of 01-JUL-22

SAIED, NAGI, MD

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Teleservice
Effective as of 01-NOV-23

SHAPIRO, STEVEN, MD

Provider ID: N/A

30589 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-JUL-24

WINKELMANN, RICHARD, DO

Provider ID: N/A

30589 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-JUL-24

EMERGENCY MEDICINE

ELLIS, JOHN, MD†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-SEP-22

WARD, NICHOLAS, MD†

Provider ID: N/A

31700 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-21

WARD, NICHOLAS, MD†

Provider ID: N/A

31700 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-21

WARD, NICHOLAS, MD†

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

31700 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-21

**ENDOCRINOLOGY
METABOLISM DIABETES**

JOO, KATHY, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 134
TEMECULA, CA 92591
Effective as of 01-JUN-16

JOO, KATHY, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 134
TEMECULA, CA 92591
Effective as of 01-JUL-23

JOO, KATHY, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 134
TEMECULA, CA 92591
Effective as of 01-JUN-16

JOO, KATHY, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 134
TEMECULA, CA 92591
Effective as of 01-JUN-16

JOU, BILL, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 205
TEMECULA, CA 92592
Teleservice
Effective as of 01-FEB-17

JOU, BILL, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 205
TEMECULA, CA 92592

Teleservice

Effective as of 01-FEB-17

**FAMILY PRACTICE
SPORTS MEDICINE**

CHEUNG, SUNNY, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

CHEUNG, SUNNY, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

CHEUNG, SUNNY, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

CHEUNG, SUNNY, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

GASTROENTEROLOGY

ARDIGO, GREGORY, MD

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 209
TEMECULA, CA 92591

Effective as of 01-AUG-23

DINH, JACK, MD

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 209
TEMECULA, CA 92591
Effective as of 01-AUG-23

KEMMERLY, THOMAS, MD

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 209
TEMECULA, CA 92591
Effective as of 01-AUG-23

SAUNDERS, ANGELA, DO†

Provider ID: N/A

31625 DE PORTOLA RD
SUITE 101
TEMECULA, CA 92592
Effective as of 01-NOV-23

SAUNDERS, ANGELA, DO†

Provider ID: N/A

31625 DE PORTOLA RD
SUITE 101
TEMECULA, CA 92592
Effective as of 01-DEC-22

SAUNDERS, ANGELA, DO†

Provider ID: N/A

31625 DE PORTOLA RD
SUITE 101
TEMECULA, CA 92592
Effective as of 01-MAR-24

SAUNDERS, ANGELA, DO†

Provider ID: N/A

31625 DE PORTOLA RD
SUITE 101
TEMECULA, CA 92592
Effective as of 01-MAY-23

TEYMOORIAN, ARIAN, MD

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 209 TEMECULA, CA 92591
Effective as of 01-AUG-23

**HEMATOLOGY /
ONCOLOGY**

ANDREY, JEFFREY, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 202 TEMECULA, CA 92592
Effective as of 01-JUL-24

BASERI, BABAK, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 202 TEMECULA, CA 92592
Effective as of 01-JUL-24

BASERI, BABAK, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 202 TEMECULA, CA 92592
Effective as of 01-JUL-21

BASERI, BABAK, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 202 TEMECULA, CA 92592
Effective as of 01-JUL-21

BASERI, BABAK, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 202 TEMECULA, CA 92592
Effective as of 01-APR-24

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 202 TEMECULA, CA 92592
Effective as of 01-DEC-20

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 202 TEMECULA, CA 92592
Effective as of 01-APR-20

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 202 TEMECULA, CA 92592
Effective as of 01-JUL-24

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 202 TEMECULA, CA 92592
Effective as of 01-MAY-22

INTERNAL MEDICINE

AL HARASH, ABDALHAMID, MD†

Provider ID: N/A

31565 RANCHO PUEBLO RD STE 205 TEMECULA, CA 92592
Effective as of 01-OCT-22

AL HARASH, ABDALHAMID, MD†

Provider ID: N/A

31565 RANCHO PUEBLO RD STE 205 TEMECULA, CA 92592
Effective as of 01-OCT-22

AL HARASH, ABDALHAMID, MD†

Provider ID: N/A

31565 RANCHO PUEBLO RD STE 205 TEMECULA, CA 92592
Effective as of 01-OCT-22

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201 TEMECULA, CA 92592
Effective as of 01-OCT-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201 TEMECULA, CA 92592
Effective as of 01-OCT-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201 TEMECULA, CA 92592
Effective as of 01-NOV-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201 TEMECULA, CA 92592
Effective as of 01-NOV-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201 TEMECULA, CA 92592
Effective as of 01-JAN-22

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAR-21

AMIN, SAJNI, MD

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592
Effective as of 01-JUL-24

COX, JEREMY, DO

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

HADDADIN, HASSAN, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590
Effective as of 01-SEP-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590
Effective as of 01-SEP-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590
Effective as of 01-SEP-22

JACOBS, NATALIA, MD

Provider ID: N/A

40971 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-MAY-23

WHITE, XUANHA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 206
TEMECULA, CA 92592
Effective as of 01-FEB-22

YU, JERRY, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

YU, JERRY, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-AUG-18

YU, JERRY, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAR-21

YU, JERRY, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-JUL-18

YU, JERRY, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-JUL-18

INTERNAL MEDICINE CRITICAL CARE MEDICINE

SALEK, MUNIF, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590
Effective as of 01-FEB-22

SALEK, MUNIF, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590
Effective as of 01-FEB-22

SALEK, MUNIF, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590
Effective as of 01-FEB-22

VEGA, RICARDO, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590
Effective as of 01-MAR-22

VEGA, RICARDO, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590
Effective as of 01-JAN-22

INTERVENTIONAL CARDIOLOGY

MESSENGER, BRADLEY, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

**C1. Lista de proveedores de la red
Médico de atención especializada**

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

SEAMAN, CHRISTOPHER, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

**LICENSED CLINICAL
SOCIAL WORKER**

**CARTWRIGHT, SHANIQUA,
LCSW**

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-NOV-23

JONES, VALORIA, LCSW

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-JUL-23

JONES, VALORIA, LCSW

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-JUL-23

JONES, VALORIA, LCSW

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-JUL-23

**LURINKS GARCIA, MARIA,
LCSW**

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JAN-21

ONEILL, ANDREW, LCSW

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 102
TEMECULA, CA 92592
Effective as of 01-JUL-24

ROBLEDO, DAMIAN, LCSW

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-APR-23

THOMAS, PAULA, LCSW

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-APR-23

**VALDEZ-HERNANDEZ, ISRAEL,
LCSW†**

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-JAN-23

**VALDEZ-HERNANDEZ, ISRAEL,
LCSW†**

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-APR-23

**VALDEZ-HERNANDEZ, ISRAEL,
LCSW†**

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-JAN-23

**VALDEZ-HERNANDEZ, ISRAEL,
LCSW†**

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-APR-23

MEDICAL ONCOLOGY

BENDER, RICHARD, MD

Provider ID: N/A

27450 YNEZ RD STE 116
TEMECULA, CA 92591
Effective as of 01-JUL-24

BENDER, RICHARD, MD

Provider ID: N/A

27450 YNEZ RD STE 116
TEMECULA, CA 92591
Effective as of 01-JUL-24

SHAIKH, ANWER, MD

Provider ID: N/A

27450 YNEZ RD
STE 116
TEMECULA, CA 92591
Effective as of 01-JUL-24

NEPHROLOGY

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 205
TEMECULA, CA 92592
Effective as of 01-JAN-20

CHANG, DAVID, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-APR-15

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAY-23

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAY-23

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201

TEMECULA, CA 92592
Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-JUL-23

NANDI, SHANKHA, DO†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAR-21

NANDI, SHANKHA, DO†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-JUN-23

NANDI, SHANKHA, DO†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

NANDI, SHANKHA, DO†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

NANDI, SHANKHA, DO†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

NANDI, SHANKHA, DO†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-AUG-20

NANDI, SHANKHA, DO†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

YAN, ERIC, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Teleservice
Effective as of 01-JUL-23

YAN, ERIC, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Teleservice
Effective as of 01-MAY-20

YAN, ERIC, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Teleservice
Effective as of 01-JUL-18

YAN, ERIC, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Teleservice

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-JUL-23

YAN, ERIC, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Teleservice

Effective as of 01-JUL-18

YAN, ERIC, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Teleservice

Effective as of 01-JUL-18

NEUROLOGY

CHOUDRY, BILAL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 104
TEMECULA, CA 92592

Effective as of 01-JUN-21

CHOUDRY, BILAL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 104
TEMECULA, CA 92592

Effective as of 01-MAY-23

DELANEY, MICHAEL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 104
TEMECULA, CA 92592

Teleservice

Effective as of 01-OCT-21

DELANEY, MICHAEL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD

STE 104

TEMECULA, CA 92592

Teleservice

Effective as of 01-MAR-21

DELANEY, MICHAEL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 104
TEMECULA, CA 92592

Teleservice

Effective as of 01-MAY-23

FARHIDVASH, FARIBA, MD†

Provider ID: N/A

44045 MARGARITA RD STE 106
TEMECULA, CA 92592

Effective as of 01-NOV-22

GRATIANNE, ROBERTO, MD†

Provider ID: N/A

44045 MARGARITA RD STE 106
TEMECULA, CA 92592

Effective as of 01-JUN-22

GUPTA, MONIKA, MD†

Provider ID: N/A

44045 MARGARITA RD STE 106
TEMECULA, CA 92592

Effective as of 01-OCT-19

HALL, JACOB, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 104
TEMECULA, CA 92592

Effective as of 01-OCT-21

HALL, JACOB, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 104

TEMECULA, CA 92592

Effective as of 01-MAY-23

HOSSEINZADEHMALEKI, ANA, MD

Provider ID: N/A

44045 MARGARITA RD STE 106
TEMECULA, CA 92592

Effective as of 01-FEB-24

HUOTT, PATRICK, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 104
TEMECULA, CA 92592

Effective as of 01-FEB-24

HUOTT, PATRICK, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 104
TEMECULA, CA 92592

Effective as of 01-FEB-24

MAREK, MAKSYM, MD

Provider ID: N/A

44045 MARGARITA RD STE 106
TEMECULA, CA 92592

Effective as of 01-DEC-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

44045 MARGARITA RD STE 106
TEMECULA, CA 92592

Effective as of 01-JUL-23

PHAM, ALISE, DO

Provider ID: N/A

44045 MARGARITA RD STE 106
TEMECULA, CA 92592

Effective as of 01-DEC-23

**C1. Lista de proveedores de la red
Médico de atención especializada**

SAHAGIAN, GREGORY, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 104
TEMECULA, CA 92592
Effective as of 01-MAY-23

SILVER, BRENT, MD†

Provider ID: N/A

44045 MARGARITA RD STE
106
TEMECULA, CA 92592
Effective as of 01-NOV-22

SORIA LOPEZ, JOSE, MD†

Provider ID: N/A

44045 MARGARITA RD STE
106
TEMECULA, CA 92592
Effective as of 01-MAR-21

TALANKI, VARUN, MD

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 205
TEMECULA, CA 92592
Effective as of 01-DEC-22

WU, MELANIE, DO†

Provider ID: N/A

44045 MARGARITA RD STE
106
TEMECULA, CA 92592
Effective as of 01-JAN-20

NEUROLOGY CHILD

OLENSKI, KLARI, DO†

Provider ID: N/A

44045 MARGARITA RD STE
106
TEMECULA, CA 92592
Effective as of 01-MAR-22

**OBSTETRICS /
GYNECOLOGY**

ELFELT, TIMOTHY, MD†

Provider ID: N/A

28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590
Effective as of 01-AUG-19

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

27625 JEFFERSON AVE STE
101
TEMECULA, CA 92590
Effective as of 01-JUL-21

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

27625 JEFFERSON AVE STE
101
TEMECULA, CA 92590
Effective as of 01-JUL-21

NEAL, JAMES, MD†

Provider ID: N/A

31170 TEMECULA PKWY
STE 201
TEMECULA, CA 92592
Effective as of 01-JUL-23

RIZVI, SYED, MD†

Provider ID: N/A

31493 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAR-22

OPHTHALMOLOGY

BAKHTIARY, PEJMAN, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590

Effective as of 01-SEP-21

BAKHTIARY, PEJMAN, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-SEP-21

BEKENDAM, PAMELA, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20

BEKENDAM, PETER, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20

BEKENDAM, PAMELA, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

BEKENDAM, PETER, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

BURNS, RICHARD, MD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-JUL-23

BURNS, RICHARD, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-NOV-08

BURNS, RICHARD, MD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-SEP-09

CHING, ANDREA SHERYL, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590

Effective as of 01-AUG-20

CHOW, JASON, MD†

Provider ID: N/A

31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592

Effective as of 01-JUL-23

JACOBSON, ARTHUR, MD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-JUL-23

JACOBSON, ARTHUR, MD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-SEP-09

JOSEPH, JEFFREY, MD†

Provider ID: N/A

31950 TEMECULA PKWY
TEMECULA, CA 92592

Effective as of 01-JUL-23

LAZZARINI, THOMAS, MD

Provider ID: N/A

41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590

Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590

Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590

Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590

Effective as of 01-FEB-24

LEE, JOHN, MD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-JUL-23

LIN, THEODORE, MD†

Provider ID: N/A

41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590

Effective as of 01-APR-24

LIN, THEODORE, MD†

Provider ID: N/A

41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590

Effective as of 01-APR-24

LIN, THEODORE, MD†

Provider ID: N/A

41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590

Effective as of 01-SEP-17

LOBUE, THOMAS, MD

Provider ID: N/A

40945 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-NOV-09

SATTERFIELD, KELLIE, MD

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590

Effective as of 01-DEC-23

SAVAR, AARON, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590

Effective as of 01-AUG-20

SAVAR, LOUIS, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590

Effective as of 01-AUG-20

SAVAR, AARON, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-NOV-20

SAVAR, LOUIS, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590

Effective as of 01-NOV-20

SHEILS, CATHERINE, MD

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590

Effective as of 01-JAN-24

SHELTON, RAYMOND, MD

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-MAY-23

SKINNER, ANTHONY, MD

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-JUN-24

SKINNER, ANTHONY, MD

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-JUN-24

SMITH, WILLIAM, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590

Effective as of 01-NOV-20

SONI, NISHANT, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590

Effective as of 01-NOV-20

SONI, NISHANT, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590

Effective as of 01-AUG-20

SORENSEN, ROBERT, MD†

Provider ID: N/A

31950 US HWY 79 S B7
TEMECULA, CA 92592

Effective as of 01-JUL-23

WARNER, MICHAEL, MD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Teleservice

Effective as of 01-JUL-23

YUNG, EDWARD, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590

Effective as of 01-AUG-20

YUNG, EDWARD, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590

Effective as of 01-NOV-20

ZHOU, SIWEI, MD†

Provider ID: N/A

31950 TEMECULA PKWY
STE B-7

TEMECULA, CA 92592

Effective as of 01-JUL-23

OPTOMETRIST

ABDOU, MARINA, OD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590

Effective as of 01-JUN-23

ABDOU, MARINA, OD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590

Effective as of 01-FEB-22

ABDOU, MARINA, OD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590

Effective as of 01-FEB-22

ARCHIBALD, JOHN, OD†

Provider ID: N/A

31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592

Effective as of 01-DEC-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592

Effective as of 01-JUL-23

BARR, AUSTIN, OD

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-MAR-23

BARR, AUSTIN, OD

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-NOV-22

COLEMAN, BROOKE, OD†

Provider ID: N/A

31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592

Effective as of 01-FEB-22

COOPER, MICHAEL, OD†

Provider ID: N/A

31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592

Effective as of 01-SEP-22

FARAMARZI, FARNAZ, OD

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590

Effective as of 01-JUL-23

FARAMARZI, FARNAZ, OD

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590

Effective as of 01-JUL-23

FARAMARZI, FARNAZ, OD

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590

Effective as of 01-DEC-23

LANE, KEVIN, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-JUL-23

LANE, KEVIN, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-FEB-11

LANE, KEVIN, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-SEP-09

LARSON, BRETT, OD†

Provider ID: N/A

31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592

Effective as of 01-AUG-20

LARSON, BRETT, OD†

Provider ID: N/A

31950 TEMECULA PKWY
STE B-7

TEMECULA, CA 92592

Effective as of 01-FEB-22

MC DIARMID, JOHN, OD†

Provider ID: N/A

31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592

Effective as of 01-FEB-22

MCINTYRE, DEBRA, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-JUL-23

MCINTYRE, DEBRA, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-DEC-17

MCINTYRE, DEBRA, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-DEC-17

MCINTYRE, DEBRA, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-DEC-17

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-JUL-23

CI. Lista de proveedores de la red Médico de atención especializada

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

41637 MARGARITA RD STE 100
TEMECULA, CA 92591
Effective as of 01-JAN-22

OTOLARYNGOLOGY

GIAMMANCO, PIERRE, MD

Provider ID: N/A

27455 TIERRA ALTA WAY STE A
TEMECULA, CA 92590
Effective as of 01-SEP-22

GIAMMANCO, PIERRE, MD

Provider ID: N/A

27455 TIERRA ALTA WAY STE A
TEMECULA, CA 92590
Effective as of 01-SEP-22

KALKANIS, JAMES, MD†

Provider ID: N/A

40285 WINCHESTER RD STE 104
TEMECULA, CA 92591
Effective as of 01-SEP-09

KALKANIS, JAMES, MD†

Provider ID: N/A

40285 WINCHESTER RD STE 104
TEMECULA, CA 92591
Effective as of 01-MAR-21

KALKANIS, JAMES, MD†

Provider ID: N/A

40285 WINCHESTER RD STE 104
TEMECULA, CA 92591
Effective as of 01-AUG-20

KALKANIS, JAMES, MD†

Provider ID: N/A

40285 WINCHESTER RD STE 104
TEMECULA, CA 92591
Effective as of 01-JUL-23

TINT, DERRICK, MD†

Provider ID: N/A

40285 WINCHESTER RD STE 104
TEMECULA, CA 92591
Effective as of 01-AUG-21

PHYS MED/ REHAB PAIN MEDICINE

CHEN, HAMILTON, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-JUL-24

PHYSICAL MEDICINE / REHABILITATION

AILINANI, HARY, MD

Provider ID: N/A

27699 JEFFERSON AVE STE 201
TEMECULA, CA 92590
Effective as of 01-MAY-21

CHEN, HAMILTON, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-MAR-24

PHYSICIANS ASSISTANT

ASHIER, SAURABH, PA†

Provider ID: N/A

31573 RANCHO PUEBLO RD STE 210
TEMECULA, CA 92592
Effective as of 01-JUL-23

TEMECULA, CA 92592
Effective as of 01-JUL-23

ASHIER, SAURABH, PA†

Provider ID: N/A

31573 RANCHO PUEBLO RD STE 210
TEMECULA, CA 92592
Effective as of 01-JUL-23

ASHIER, SAURABH, PA†

Provider ID: N/A

31573 RANCHO PUEBLO RD STE 210
TEMECULA, CA 92592
Effective as of 01-AUG-22

BAKER, ROBERT, PA

Provider ID: N/A

27699 JEFFERSON AVE STE 201
TEMECULA, CA 92590
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

27699 JEFFERSON AVE STE 201
TEMECULA, CA 92590
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

27699 JEFFERSON AVE STE 201
TEMECULA, CA 92590
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

27699 JEFFERSON AVE STE 201
TEMECULA, CA 92590
Effective as of 01-MAR-24

**C1. Lista de proveedores de la red
Médico de atención especializada**

BAKER, ROBERT, PA

Provider ID: N/A

27699 JEFFERSON AVE STE 201
TEMECULA, CA 92590
Effective as of 01-MAR-24

BASIN, NATALIE, PA

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 102
TEMECULA, CA 92592
Teleservice
Effective as of 01-AUG-23

CAGATAY, HARRIER, PA†

Provider ID: N/A

27699 JEFFERSON AVE STE 201
TEMECULA, CA 92590
Effective as of 01-AUG-20

LYNCH, GREGORY, PA†

Provider ID: N/A

31150 TEMECULA PKWY STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

LYNCH, GREGORY, PA†

Provider ID: N/A

31150 TEMECULA PKWY STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

LYNCH, GREGORY, PA†

Provider ID: N/A

31150 TEMECULA PKWY STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

MITCHELL, PAUL, PA

Provider ID: N/A

27699 JEFFERSON AVE STE 201
TEMECULA, CA 92590
Effective as of 01-JUN-18

ROWAN, RYAN, PA†

Provider ID: N/A

44054 MARGARITA RD STE 1
TEMECULA, CA 92592
Effective as of 01-MAR-23

PODIATRIST

NEGRON, RICARDO, DPM

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JUL-21

NEGRON, RICARDO, DPM

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JUL-21

NEGRON, RICARDO, DPM

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JUL-22

PSYCHIATRY

ANDERSEN, CLAIRE, MD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-DEC-20

ANDERSEN, CLAIRE, MD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-DEC-20

JAKKULA, JAGAN, MD†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-AUG-22

JAKKULA, JAGAN, MD†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-NOV-23

JAKKULA, JAGAN, MD†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-NOV-23

JAKKULA, JAGAN, MD†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-AUG-22

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-AUG-22

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-OCT-23

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

29645 RANCHO

C1. Lista de proveedores de la red Médico de atención especializada

CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-OCT-23

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

☑ 29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-AUG-22

MCGEHRIN, KEVIN, MD

Provider ID: N/A

☑ 44045 MARGARITA RD STE
106
TEMECULA, CA 92592
Effective as of 01-JUL-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

☑ 44045 MARGARITA RD STE
106
TEMECULA, CA 92592
Effective as of 01-JUL-23

PERSAUD, PRIA, MD

Provider ID: N/A

☑ 41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-AUG-20

PERSAUD, PRIA, MD

Provider ID: N/A

☑ 41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-AUG-20

PHAM, ALISE, DO

Provider ID: N/A

☑ 44045 MARGARITA RD STE
106
TEMECULA, CA 92592
Effective as of 01-DEC-23

PHAM, ALISE, DO

Provider ID: N/A

☑ 44045 MARGARITA RD STE
106
TEMECULA, CA 92592
Effective as of 01-DEC-23

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

☑ 29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-SEP-23

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

☑ 29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-AUG-22

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

☑ 29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-SEP-23

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

☑ 29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-AUG-22

PSYCHIATRY CHILD

ANDERSEN, CLAIRE, MD

Provider ID: N/A

☑ 41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-DEC-20

ANDERSEN, CLAIRE, MD

Provider ID: N/A

☑ 41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-DEC-20

PSYCHOLOGIST

THODE, LAURA, PSYD

Provider ID: N/A

☑ 41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-MAR-24

THODE, LAURA, PSYD

Provider ID: N/A

☑ 31537 RANCHO PUEBLO
RD STE 102
TEMECULA, CA 92592
Effective as of 01-JUL-24

THODE, LAURA, PSYD

Provider ID: N/A

☑ 41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-MAR-24

THODE, LAURA, PSYD

Provider ID: N/A

☑ 31537 RANCHO PUEBLO
RD STE 102
TEMECULA, CA 92592
Effective as of 01-JUL-24

WERNER, KRISTINE, PhD

Provider ID: N/A

☑ 27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAY-18

WERNER, KRISTINE, PhD

Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

27699 JEFFERSON AVE STE 201
TEMECULA, CA 92590
Effective as of 01-MAY-18

WOODWORTH, JENNIFER, PSYD

Provider ID: N/A

43385 BUSINESS PARK DR STE 110
TEMECULA, CA 92590
Effective as of 01-JAN-21

WOODWORTH, JENNIFER, PSYD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JAN-21

WOODWORTH, JENNIFER, PSYD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JAN-21

WOODWORTH, JENNIFER, PSYD

Provider ID: N/A

43385 BUSINESS PARK DR STE 110
TEMECULA, CA 92590
Effective as of 01-JAN-21

PULMONARY DISEASES

CHUA, WILLY, MD

Provider ID: N/A

44605 AVENIDA DE MISSIONES STE 206
TEMECULA, CA 92592
Effective as of 01-APR-22

HADDADIN, HASSAN, MD†

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-APR-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-APR-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-JUL-22

LEE, DAVID, MD

Provider ID: N/A

31625 DE PORTOLA RD STE 101
TEMECULA, CA 92592
Effective as of 01-APR-24

VEGA, RICARDO, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-AUG-22

VEGA, RICARDO, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-AUG-22

VEGA, RICARDO, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204

TEMECULA, CA 92590
Effective as of 01-AUG-22

RADIATION ONCOLOGY

DAROUI, PARIMA, MD

Provider ID: N/A

44274 GEORGE CUSHMAN CT
TEMECULA, CA 92592
Effective as of 01-JUN-24

DAROUI, PARIMA, MD

Provider ID: N/A

44274 GEORGE CUSHMAN CT STE 100
TEMECULA, CA 92592
Effective as of 01-APR-24

DAROUI, PARIMA, MD

Provider ID: N/A

44274 GEORGE CUSHMAN CT STE 100
TEMECULA, CA 92592
Effective as of 01-APR-24

DAROUI, PARIMA, MD

Provider ID: N/A

44274 GEORGE CUSHMAN CT
TEMECULA, CA 92592
Effective as of 01-JUN-24

DAROUI, PARIMA, MD

Provider ID: N/A

44274 GEORGE CUSHMAN CT
TEMECULA, CA 92592
Effective as of 01-JUN-24

REGISTERED PHYSICAL THERAPIST

AGENA, CYAN, PT†

Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

<p>☒ 27699 JEFFERSON AVE STE 202 TEMECULA, CA 92590 Effective as of 01-NOV-21</p> <p>AGENA, CYAN, PT† Provider ID: N/A</p> <p>☒ 27699 JEFFERSON AVE STE 202 TEMECULA, CA 92590 Effective as of 01-NOV-21</p> <p>ATKINS, WILLIAM, PT Provider ID: N/A</p> <p>☒ 27699 JEFFERSON AVE STE 202 TEMECULA, CA 92590 Effective as of 01-JUN-23</p> <p>ATKINS, WILLIAM, PT Provider ID: N/A</p> <p>☒ 27699 JEFFERSON AVE STE 202 TEMECULA, CA 92590 Effective as of 01-JUN-23</p> <p>ATKINS, WILLIAM, PT Provider ID: N/A</p> <p>☒ 31515 RANCHO PUEBLO RD STE 101 TEMECULA, CA 92592 Effective as of 01-JUN-23</p> <p>ATKINS, WILLIAM, PT Provider ID: N/A</p> <p>☒ 31515 RANCHO PUEBLO RD STE 101 TEMECULA, CA 92592 Effective as of 01-JUN-23</p> <p>BRYANS, BRIANNA, PT† Provider ID: N/A</p> <p>☒ 29645 RANCHO CALIFORNIA RD TEMECULA, CA 92591</p>	<p>Effective as of 01-JAN-22</p> <p>BRYANS, BRIANNA, PT† Provider ID: N/A</p> <p>☒ 29645 RANCHO CALIFORNIA RD TEMECULA, CA 92591</p> <p>BURRUEL, KAYLA, PT Provider ID: N/A</p> <p>☒ 27699 JEFFERSON AVE STE 202 TEMECULA, CA 92590</p> <p>BURRUEL, KAYLA, PT Provider ID: N/A</p> <p>☒ 27699 JEFFERSON AVE STE 202 TEMECULA, CA 92590</p> <p>BURRUEL, KAYLA, PT Provider ID: N/A</p> <p>☒ 27699 JEFFERSON AVE STE 202 TEMECULA, CA 92590</p> <p>BURRUEL, KAYLA, PT Provider ID: N/A</p> <p>☒ 31515 RANCHO PUEBLO RD STE 101 TEMECULA, CA 92592</p> <p>BURRUEL, KAYLA, PT Provider ID: N/A</p> <p>☒ 31515 RANCHO PUEBLO RD STE 101 TEMECULA, CA 92592</p> <p>ESTELLE, KIRA, PT Provider ID: N/A</p> <p>☒ 31515 RANCHO PUEBLO RD STE 101 TEMECULA, CA 92592 Effective as of 01-MAY-23</p> <p>ESTELLE, KIRA, PT</p>	<p>Provider ID: N/A</p> <p>☒ 31515 RANCHO PUEBLO RD STE 101 TEMECULA, CA 92592 Effective as of 01-MAY-23</p> <p>ESTELLE, KIRA, PT Provider ID: N/A</p> <p>☒ 27699 JEFFERSON AVE STE 202 TEMECULA, CA 92590</p> <p>ESTELLE, KIRA, PT Provider ID: N/A</p> <p>☒ 27699 JEFFERSON AVE STE 202 TEMECULA, CA 92590</p> <p>ESTELLE, KIRA, PT Provider ID: N/A</p> <p>☒ 27699 JEFFERSON AVE STE 202 TEMECULA, CA 92590</p> <p>HANSON, ADRIENNE, PT Provider ID: N/A</p> <p>☒ 27699 JEFFERSON AVE STE 202 TEMECULA, CA 92590</p> <p>HANSON, ADRIENNE, PT Provider ID: N/A</p> <p>☒ 32785 TEMECULA PKWY STE 110 TEMECULA, CA 92592</p> <p>HANSON, ADRIENNE, PT Provider ID: N/A</p> <p>☒ 27699 JEFFERSON AVE STE 202 TEMECULA, CA 92590</p> <p>HANSON, ADRIENNE, PT Provider ID: N/A</p> <p>☒ 32785 TEMECULA PKWY STE 110</p>
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**C1. Lista de proveedores de la red
Médico de atención especializada**

TEMECULA, CA 92592
Effective as of 01-JUL-24

HORN, TREVOR, PT†

Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 101

TEMECULA, CA 92592
Effective as of 01-APR-20

HORN, TREVOR, PT†

Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 101

TEMECULA, CA 92592
Effective as of 01-APR-20

HORN, TREVOR, PT†

Provider ID: N/A
27699 JEFFERSON AVE STE
202

TEMECULA, CA 92590
Effective as of 01-APR-20

HORN, TREVOR, PT†

Provider ID: N/A
27699 JEFFERSON AVE STE
202

TEMECULA, CA 92590
Effective as of 01-APR-20

ROLTSCH, IAN, PT

Provider ID: N/A
32785 TEMECULA PKWY
STE 110

TEMECULA, CA 92592
Effective as of 01-JUL-24

ROLTSCH, IAN, PT

Provider ID: N/A
27699 JEFFERSON AVE STE
202

TEMECULA, CA 92590
Effective as of 01-MAY-23

ROLTSCH, IAN, PT

Provider ID: N/A
27699 JEFFERSON AVE STE
202

TEMECULA, CA 92590
Effective as of 01-MAY-23

ROLTSCH, IAN, PT

Provider ID: N/A
32785 TEMECULA PKWY
STE 110

TEMECULA, CA 92592
Effective as of 01-JUL-24

SABIN, SCOTT, PT

Provider ID: N/A
32785 TEMECULA PKWY
STE 110

TEMECULA, CA 92592
Effective as of 01-JUL-24

SABIN, SCOTT, PT

Provider ID: N/A
32785 TEMECULA PKWY
STE 110

TEMECULA, CA 92592
Effective as of 01-JUL-24

SIVA, ANDREW, PT

Provider ID: N/A
32785 TEMECULA PKWY
STE 110

TEMECULA, CA 92592
Effective as of 01-JUL-24

SIVA, ANDREW, PT

Provider ID: N/A
32785 TEMECULA PKWY
STE 110

TEMECULA, CA 92592
Effective as of 01-JUL-24

SIVA, ANDREW, PT†

Provider ID: N/A
27699 JEFFERSON AVE STE

202
TEMECULA, CA 92590
Effective as of 01-NOV-21

SIVA, ANDREW, PT†

Provider ID: N/A
27699 JEFFERSON AVE STE
202

TEMECULA, CA 92590
Effective as of 01-NOV-21

SIVA, ANDREW, PT†

Provider ID: N/A
29645 RANCHO
CALIFORNIA RD STE 4

TEMECULA, CA 92591
Effective as of 01-JUN-21

SIVA, ANDREW, PT†

Provider ID: N/A
29645 RANCHO
CALIFORNIA RD STE 234

TEMECULA, CA 92591
Effective as of 01-NOV-21

SIVA, ANDREW, PT†

Provider ID: N/A
29645 RANCHO
CALIFORNIA RD STE 234

TEMECULA, CA 92591
Effective as of 01-NOV-21

SIVA, ANDREW, PT†

Provider ID: N/A
29645 RANCHO
CALIFORNIA RD STE 4

TEMECULA, CA 92591
Effective as of 01-JUN-21

VIZCARRA, DAVID, PT†

Provider ID: N/A
29645 RANCHO
CALIFORNIA RD STE 234

TEMECULA, CA 92591
Effective as of 01-JUN-20

C1. Lista de proveedores de la red Médico de atención especializada

VIZCARRA, DAVID, PT†

Provider ID: N/A

📍 29645 RANCHO CALIFORNIA RD STE 234 TEMECULA, CA 92591
Effective as of 01-JUN-20

VIZCARRA, DAVID, PT

Provider ID: N/A

📍 32785 TEMECULA PKWY STE 110 TEMECULA, CA 92592
Effective as of 01-JUL-24

VIZCARRA, DAVID, PT

Provider ID: N/A

📍 32785 TEMECULA PKWY STE 110 TEMECULA, CA 92592
Effective as of 01-JUL-24

RHEUMATOLOGY

AL HARASH, ABDALHAMID, MD

Provider ID: N/A

📍 31493 RANCHO PUEBLO RD STE 204 TEMECULA, CA 92592
Effective as of 01-JUL-24

AL HARASH, ABDALHAMID, MD

Provider ID: N/A

📍 31493 RANCHO PUEBLO RD STE 204 TEMECULA, CA 92592
Effective as of 01-JUL-24

AL HARASH, ABDALHAMID, MD

Provider ID: N/A

📍 31493 RANCHO PUEBLO RD STE 204

TEMECULA, CA 92592
Effective as of 01-JUL-24

AL HARASH, ABDALHAMID, MD

Provider ID: N/A

📍 31493 RANCHO PUEBLO RD STE 204 TEMECULA, CA 92592
Effective as of 01-JUL-24

AL HARASH, ABDALHAMID, MD†

Provider ID: N/A

📍 31565 RANCHO PUEBLO RD STE 205 TEMECULA, CA 92592
Effective as of 01-AUG-23

AL HARASH, ABDALHAMID, MD†

Provider ID: N/A

📍 31565 RANCHO PUEBLO RD STE 205 TEMECULA, CA 92592
Effective as of 01-AUG-23

BRAVO, ARLENE, MD†

Provider ID: N/A

📍 31515 RANCHO PUEBLO RD STE 203 TEMECULA, CA 92592
Effective as of 01-APR-21

COLBURN, KEITH, MD†

Provider ID: N/A

📍 31515 RANCHO PUEBLO RD STE 203 TEMECULA, CA 92592
Effective as of 01-MAR-21

MEHTA, AMAL, MD†

Provider ID: N/A

📍 31515 RANCHO PUEBLO RD STE 203

TEMECULA, CA 92592
Effective as of 01-SEP-18

MEHTA, AMAL, MD†

Provider ID: N/A

📍 31515 RANCHO PUEBLO RD STE 203 TEMECULA, CA 92592
Effective as of 01-JUL-23

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

📍 31515 RANCHO PUEBLO RD STE 203 TEMECULA, CA 92592
Effective as of 01-MAR-21

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

📍 31515 RANCHO PUEBLO RD STE 203 TEMECULA, CA 92592
Effective as of 01-SEP-18

RAMASWAMY, DHARMARAJAN, MD†

Provider ID: N/A

📍 31515 RANCHO PUEBLO RD STE 203 TEMECULA, CA 92592
Effective as of 01-SEP-18

TRIVEDI, JANKI, MD†

Provider ID: N/A

📍 31515 RANCHO PUEBLO RD STE 203 TEMECULA, CA 92592
Effective as of 01-SEP-18

SPEECH PATHOLOGIST

O'DORAN, KAYLA, SP

Provider ID: N/A


📍 40764 WINCHESTER RD STE 590

C1. Lista de proveedores de la red Médico de atención especializada

TEMECULA, CA 92591
Teleservice
Effective as of 01-JUN-22


O'DORAN, KAYLA, SP

Provider ID: N/A

 40764 WINCHESTER RD
STE 590
TEMECULA, CA 92591
Teleservice
Effective as of 01-JUN-22


WIRTH, LAURA, SP

Provider ID: N/A

 40764 WINCHESTER RD
STE 590
TEMECULA, CA 92591
Effective as of 01-JUN-22

WIRTH, LAURA, SP


Provider ID: N/A

 40764 WINCHESTER RD
STE 590
TEMECULA, CA 92591
Effective as of 01-JUN-22

SURGERY COLON SURGERY


GORSKI, TITO, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-16


GORSKI, TITO, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

GORSKI, TITO, MD†


Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-15

SURGERY GENERAL


BARRERA, KAYLENE, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22


BARRERA, KAYLENE, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22


BARRERA, KAYLENE, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22


BARRERA, KAYLENE, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

CORDERO, RAYMUND, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21

CORDERO, RAYMUND, MD†


Provider ID: N/A

 31537 RANCHO PUEBLO

RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-15


CORDERO, RAYMUND, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22


CORDERO, RAYMUND, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22


DADA, STEPHEN, MD

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-23


ESSIEN, FRANCIS, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22


ESSIEN, FRANCIS, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

ESSIEN, FRANCIS, MD†


Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-16

C1. Lista de proveedores de la red Médico de atención especializada

ESSIEN, FRANCIS, MD†


Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-SEP-15

ESSIEN, FRANCIS, MD†


Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-APR-15

ESSIEN, FRANCIS, MD†


Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-JUN-24

ESSIEN, FRANCIS, MD†


Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-APR-22

GORSKI, TITO, MD†


Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-AUG-16

GORSKI, TITO, MD†


Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-APR-22

GORSKI, YARA, MD†


Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-SEP-16

GORSKI, TITO, MD†


Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-SEP-22

GORSKI, YARA, MD†


Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-SEP-22

JOHNSEN, HEGE, MD†


Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-SEP-22

JOHNSEN, HEGE, MD†


Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-SEP-16

JOHNSEN, HEGE, MD†


Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-MAY-22

JOHNSEN, HEGE, MD†


Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-APR-22

JOHNSEN, HEGE, MD†


Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-MAY-22

JOHNSEN, HEGE, MD†


Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-AUG-16

JOHNSEN, HEGE, MD†


Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-DEC-17

MAC, OLIVIA, MD†


Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-DEC-22

NAFIU, BOLAJI, MD†


Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-DEC-19

NAFIU, BOLAJI, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-APR-20

NAFIU, BOLAJI, MD†

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-SEP-22

NOURI, SARVENAZ, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-NOV-22

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-MAR-23

SHAPER, EMANUEL, MD

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592

Effective as of 01-FEB-24

SHAPER, EMANUEL, MD

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592

Effective as of 01-MAY-24

TIU, BRIAN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-SEP-22

TIU, BRIAN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-AUG-18

VU, STEVE, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590

Effective as of 01-APR-23

VU, STEVE, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590

Effective as of 01-APR-23

VU, STEVE, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590

Effective as of 01-APR-23

VU, STEVE, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590

Effective as of 01-APR-23

WANG, XIUJIE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-SEP-19

WANG, NAN, MD†

Provider ID: N/A

31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592

Effective as of 01-JUL-22

WANG, XIUJIE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-MAR-20

WANG, NAN, MD†

Provider ID: N/A

31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592

Effective as of 01-AUG-22

WANG, XIUJIE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-DEC-21

***SURGERY GENERAL
VASCULAR***

GORSKI, YARA, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-MAY-22

GORSKI, YARA, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-JUN-15

GORSKI, YARA, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-AUG-16

GREWAL, PRABHJOT, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

☐ 27290 MADISON AVE STE
102

TEMECULA, CA 92590

Effective as of 01-JUN-20

GREWAL, PRABHJOT, MD†

Provider ID: N/A

☐ 27290 MADISON AVE STE
102

TEMECULA, CA 92590

Effective as of 01-NOV-20

KARMUR, AMIT, DO†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202

TEMECULA, CA 92592

Effective as of 01-MAY-22

KARMUR, AMIT, DO†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202

TEMECULA, CA 92592

Effective as of 01-MAY-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202

TEMECULA, CA 92592

Effective as of 01-MAY-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202

TEMECULA, CA 92592

Effective as of 01-DEC-21

TIU, BRIAN, MD†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202

TEMECULA, CA 92592

Effective as of 01-APR-22

TIU, BRIAN, MD†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202

TEMECULA, CA 92592

Effective as of 01-MAY-22

TIU, BRIAN, MD†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202

TEMECULA, CA 92592

Effective as of 01-MAY-22

WANG, XIUJIE, MD†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202

TEMECULA, CA 92592

Effective as of 01-OCT-20

WANG, XIUJIE, MD†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202

TEMECULA, CA 92592

Effective as of 01-OCT-20

WANG, XIUJIE, MD†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202

TEMECULA, CA 92592

Effective as of 01-MAY-22

SURGERY HAND

KIM, KEVIN, DO

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590

Effective as of 01-FEB-23

KIM, KEVIN, DO

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590

Effective as of 01-FEB-23

KIM, KEVIN, DO

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590

Effective as of 01-FEB-23

KIM, KEVIN, DO

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590

Effective as of 01-FEB-23

MONEYHON, MICHAEL, MD

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590

Effective as of 01-FEB-23

MONEYHON, MICHAEL, MD

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590

Effective as of 01-FEB-23

MONEYHON, MICHAEL, MD

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590

Effective as of 01-FEB-23

MONEYHON, MICHAEL, MD

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

TRAN, TUAN, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-APR-23

TRAN, TUAN, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-APR-23

TRAN, TUAN, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-APR-23

TRAN, TUAN, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

SURGERY ORTHOPEDIC

ABITBOL, JEAN-JACQUES, MD†

Provider ID: N/A

28975 OLD TOWN FRONT ST STE 200
TEMECULA, CA 92590
Effective as of 01-JUN-22

AMERI, BIJAN, DO

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

AMERI, BIJAN, DO

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

AMERI, BIJAN, DO

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

BIAMA, RICHARD, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

BIAMA, RICHARD, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

BIAMA, RICHARD, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

BIAMA, RICHARD, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270

TEMECULA, CA 92590
Effective as of 01-FEB-23

ELLIS, JOHN, MD†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUL-23

ELLIS, JOHN, MD†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUN-21

ELLIS, JOHN, MD†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-SEP-22

FOSTER, ANDREW DAVID, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

FOSTER, ANDREW DAVID, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

FOSTER, ANDREW DAVID, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

FOSTER, ANDREW DAVID, MD

Provider ID: N/A

28780 SINGLE OAK DR STE

**C1. Lista de proveedores de la red
Médico de atención especializada**

270
TEMECULA, CA 92590
Effective as of 01-FEB-23

FRENCH, MICHAEL, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUL-21

FRENCH, MICHAEL, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-DEC-22

FRENCH, MICHAEL, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-OCT-22

FRENCH, MICHAEL, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUL-23

KELLEY, STEVEN, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUL-23

KELLEY, STEVEN, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUN-21

KELLEY, STEVEN, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-DEC-22

KELLEY, STEVEN, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-DEC-22

LE, VU, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

LE, VU, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

LE, VU, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

LE, VU, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

LIN, RICHARD, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-DEC-22

LIN, RICHARD, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-DEC-22

LUNA, MARIO, MD†

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590*
Effective as of 01-JUL-20

LUNA, MARIO, MD†

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-JUL-16

RICHTER, ALEXANDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

RICHTER, ALEXANDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

RICHTER, ALEXANDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

RICHTER, ALEXANDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

ROBINSON, MATTHEW, DO†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUL-22

ROBINSON, MATTHEW, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUL-22

ROBINSON, MATTHEW, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591*
Effective as of 01-JUL-23

ROBINSON, MATTHEW, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUN-21

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591*
Effective as of 01-JUN-23

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591*
Effective as of 01-JUN-23

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591*
Effective as of 01-JUN-23

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-MAR-23

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-MAR-23

ROSENBERG, GARY, DO

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

ROSENBERG, GARY, DO

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

ROSENBERG, GARY, DO

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

ROSENBERG, GARY, DO

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

SCHULTZEL, MARK, MD†

Provider ID: N/A

31170 TEMECULA PKWY
STE 100
TEMECULA, CA 92592

Teleservice

Effective as of 01-OCT-22

THOLCKE, LOREN, DO

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-AUG-23

THOLCKE, LOREN, DO

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JAN-24

THOLCKE, LOREN, DO

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JAN-24

THOLCKE, LOREN, DO

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-MAY-24

UPPAL, GURVINDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

UPPAL, GURVINDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

UPPAL, GURVINDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

SURGERY PLASTIC

**C1. Lista de proveedores de la red
Médico de atención especializada**

CHAO, JAMES, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-APR-20

MUDGE, BRADLEY, MD†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Teleservice
Effective as of 01-OCT-19

MUDGE, BRADLEY, MD†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Teleservice
Effective as of 01-NOV-19

URIAS, DANIEL, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590
Effective as of 01-APR-24

VU, STEVE, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590
Effective as of 01-JUN-23

VU, STEVE, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590
Effective as of 01-JUN-23

SURGERY THORACIC

BANSAL, NEERAJ, MD

Provider ID: N/A

31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592
Effective as of 01-MAY-23

BANSAL, NEERAJ, MD

Provider ID: N/A

31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592
Effective as of 01-APR-23

RASI, ALFREDO, MD†

Provider ID: N/A

31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592
Effective as of 01-NOV-20

WANG, NAN, MD†

Provider ID: N/A

31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592
Effective as of 01-JUL-24

SURGICAL ONCOLOGY

SHAPER, EMANUEL, MD

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592
Effective as of 01-JUL-24

SHAPER, EMANUEL, MD

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592
Effective as of 01-JUL-24

UROLOGY

BRODAK, PHILIP, MD

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 102B
TEMECULA, CA 92592
Effective as of 01-AUG-24

CONNER, RICHARD, MD†

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 102B
TEMECULA, CA 92592
Effective as of 01-MAY-20

CRISELL, MONISHA, MD†

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 102B
TEMECULA, CA 92592
Effective as of 01-MAY-20

LUTTGE, SCOTT, MD

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 205
TEMECULA, CA 92592
Effective as of 01-MAY-23

TALANKI, VARUN, MD

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 102B
TEMECULA, CA 92592
Effective as of 01-MAY-22

TALANKI, VARUN, MD

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 102B
TEMECULA, CA 92592
Effective as of 01-MAY-22

**C1. Lista de proveedores de la red
Médico de atención especializada**

FAMILY PRACTICE

RAY, ANNE, MD

Provider ID: N/A

31951 DOVE CANYON DR
TRABUCO CANYON, CA
92679*

Effective as of 01-DEC-23

***CERTIFIED REGISTERED
NURSE MIDWIFE***

ALLEN, ANNE, CRNM†

Provider ID: N/A

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Effective as of 01-JUL-22

ONEILL, THERESE, CRNM

Provider ID: N/A

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Effective as of 01-NOV-23

FAMILY PRACTICE

CASTANER, ZALYA, MD†

Provider ID: N/A

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Teleservice

Effective as of 01-FEB-24

MCHENRY, KATHRYN, DO

Provider ID: N/A

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Effective as of 01-FEB-24

PATEL, JITENBHAI, MD

Provider ID: N/A

28477 LIZARD ROCKS RD
VALLEY CENTER, CA
92082*

Effective as of 01-FEB-24

PATEL, RAKESH, MD

Provider ID: N/A

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Effective as of 01-FEB-24

SCHULTZ, JAMES, MD

Provider ID: N/A

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Effective as of 01-FEB-24

PHYSICIANS ASSISTANT

WICKWARE, TRACY, PA

Provider ID: N/A

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Effective as of 01-MAY-23

ALLERGY IMMUNOLOGY

VOLPP, HEATHER, MD†

Provider ID: N/A

2067 W VISTA WAY
VISTA, CA 92083

Effective as of 01-MAR-14

VOLPP, HEATHER, MD†

Provider ID: N/A

2067 W VISTA WAY
VISTA, CA 92083

Effective as of 01-JAN-24

ZIERING, ROBERT, MD†

Provider ID: N/A

2067 W VISTA WAY STE 140
VISTA, CA 92083

Effective as of 01-JUL-01

ZIERING, ROBERT, MD†

Provider ID: N/A

2067 W VISTA WAY STE 140

VISTA, CA 92083

Effective as of 01-SEP-21

ZIERING, ROBERT, MD†

Provider ID: N/A

2067 W VISTA WAY STE 140
VISTA, CA 92083

Effective as of 01-SEP-22

ZIERING, ROBERT, MD†

Provider ID: N/A

2067 W VISTA WAY STE 140
VISTA, CA 92083

Effective as of 01-AUG-20

CARDIAC

ELECTROPHYSIOLOGY

BUI, HANH, MD

Provider ID: N/A

906 SYCAMORE AVE STE
104

VISTA, CA 92081

Teleservice

Effective as of 01-MAY-23

CARDIOVASCULAR

DISEASE

BUI, HANH, MD

Provider ID: N/A

906 SYCAMORE AVE STE
104

VISTA, CA 92081

Teleservice

Effective as of 01-MAY-23

DO, HULBERT, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

DO, HULBERT, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-OCT-21

PARIKH, MILIND, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

PARKS, MONICA, MD

Provider ID: N/A

906 SYCAMORE AVE STE
104
VISTA, CA 92081
Teleservice
Effective as of 01-JAN-24

CERTIFIED ACUPUNCTURIST

SONG, CAROL, LAC

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

CERTIFIED NURSE PRACTITIONER

AYELE, MAHOGANY, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

BAEK, KILHYO, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-FEB-24

BAEK, KILHYO, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-FEB-24

BAEZ, ELIZABETH, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

BJORNSON, MICHELE, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

BJORNSON, MICHELE, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JUN-24

BRAAMSE, CHLOE, NP

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084
Teleservice
Effective as of 01-JUN-23

CARDINELL, ANNA, NP†

Provider ID: N/A

910 SYCAMORE AVE STE

270

VISTA, CA 92081
Effective as of 01-AUG-22

CHAMBERLIN, KALIANA, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-21

CHATHAM, OLIVIA, NP†

Provider ID: N/A

950 CIVIC CENTER DR STE
A
VISTA, CA 92083
Teleservice
Effective as of 01-NOV-22

CHILAKA, SAMUEL, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

CHILAKA, SAMUEL, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

CHRISTY, TYLER, NPF

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

CHRISTY, TYLER, NPF

Provider ID: N/A

105 DURIAN ST STE A
VISTA, CA 92083
Effective as of 01-JAN-24

CHRISTY, TYLER, NPF

Provider ID: N/A

517 N HORNE ST

C1. Lista de proveedores de la red Médico de atención especializada

VISTA, CA 92083
Effective as of 01-JAN-24

CHRISTY, TYLER, NPF

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

CLARK, CYNTHIA, NP†

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-21

CORY, ALLISON, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-21

CORY, ALLISON, NP

Provider ID: N/A

105 DURIAN ST STE B
VISTA, CA 92083
Effective as of 01-FEB-24

CORY, ALLISON, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

CROTTEAU, ALEX, NP

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084
Effective as of 01-MAY-21

DEKKERS-O'HARE, INGRID, NP†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-21

DO, JACKIE, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-AUG-24

DO, JACKIE, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-AUG-24

DO, JACKIE, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

EKLUND, BONNIE, NP†

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

EKLUND, BONNIE, NP†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

HALGEDAHL, YI TING, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

HALGEDAHL, YI TING, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-21

HOWELL, AMANDA, NP

Provider ID: N/A

105 DURIAN ST STE A
VISTA, CA 92083
Effective as of 01-JAN-24

HOWELL, AMANDA, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

HOWELL, AMANDA, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

HUERTA, STEVEN, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JUL-24

HUERTA, STEVEN, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-24

JONES, STACY, NP

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084
Effective as of 01-MAY-21

KAYE, ALYSON, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-APR-24

KAYE, ALYSON, NP

Provider ID: N/A

105 DURIAN ST
VISTA, CA 92083
Effective as of 01-FEB-24

C1. Lista de proveedores de la red Médico de atención especializada

KAYE, ALYSON, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-OCT-21

KELLEHER, BRIDGET, NP

Provider ID: N/A

105 DURIAN ST STE B
VISTA, CA 92083

Effective as of 01-FEB-24

KELLEHER, BRIDGET, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-APR-24

KELLEHER, BRIDGET, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-APR-24

KESSLER, JENNIFER, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-DEC-23

KORMANIK, PATRICIA, NP†

Provider ID: N/A

910 SYCAMORE AVE STE
102

VISTA, CA 92081

Effective as of 01-JUL-21

MERRITT, MARISA, NP

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084

Teleservice

Effective as of 01-AUG-22

NAVA, PETER, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

NAVA, PETER, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

NAVARRO, STEVEN, NPF

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084

Effective as of 01-JUN-24

NICHOLAS, ESTELA, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-21

PATEMAN, CAROLYN, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-21

PATEMAN, CAROLYN, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

PRITZKER, JOELY, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-21

PRITZKER, JOELY, NP

Provider ID: N/A

134 GRAPEVINE RD

VISTA, CA 92083

Effective as of 01-FEB-24

ROSS, BRIDGET, NPF

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084

Teleservice

Effective as of 01-DEC-21

SCHAEPE, RHODORA, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-MAR-24

SERRATO, ANTHONY, NP

Provider ID: N/A

906 SYCAMORE AVE STE
104

VISTA, CA 92081

Effective as of 01-MAY-23

SHAHBAZ, LINNAE, NPF

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-MAR-24

SHAHBAZ, LINNAE, NPF

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-APR-24

SRILASAK, MICHELE, NP†

Provider ID: N/A

910 SYCAMORE AVE STE
102

VISTA, CA 92081

Effective as of 01-JUL-21

TABARANZA, PHOEBE, NPF

Provider ID: N/A

204 S SANTA FE AVE

C1. Lista de proveedores de la red Médico de atención especializada

VISTA, CA 92084
Teleservice
Effective as of 01-OCT-22

WAGNER, TASIA, NP

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-APR-24

WAGNER, TASIA, NP

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-APR-24

WAGNER, TASIA, NP

Provider ID: N/A
105 DURIAN ST
VISTA, CA 92083
Effective as of 01-FEB-24

WILLIAMS, JINA, NP

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-SEP-22

WINDHAM, SUZONNE, NP

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

WINDHAM, SUZONNE, NP

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

YCASAS, EMILY, NP

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

YCASAS, EMILY, NP

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAY-23

CERTIFIED REGISTERED NURSE MIDWIFE

GUIDI, CASEY, CRNM

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUN-23

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

CHIROPRACTOR

CORTEZ, JAIME, DC†

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

CORTEZ, JAIME, DC†

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

JU, NATHANIEL, DC†

Provider ID: N/A
1000 VALE TERRACE DR

VISTA, CA 92084
Effective as of 01-JUL-22

JU, NATHANIEL, DC†

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

JU, NATHANIEL, DC†

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

JU, NATHANIEL, DC†

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

JU, NATHANIEL, DC†

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JUL-22

LOVERN, JENNIFER, DC

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JUN-24

LOVERN, JENNIFER, DC

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-AUG-24

LOVERN, JENNIFER, DC

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-AUG-24

C1. Lista de proveedores de la red Médico de atención especializada

LOVERN, JENNIFER, DC

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUN-24

OLSON, ROBERT, DC

Provider ID: N/A

906 SYCAMORE AVE STE
210
VISTA, CA 92081

Effective as of 01-SEP-21

DERMATOLOGY

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1934 VIA CTR STE B
VISTA, CA 92081

Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1934 VIA CTR STE B
VISTA, CA 92081

Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1934 VIA CTR STE B
VISTA, CA 92081

Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1934 VIA CTR STE B
VISTA, CA 92081

Effective as of 01-JAN-24

HENDERSON, GREGORY, MD†

Provider ID: N/A

1934 VIA CTR STE B
VISTA, CA 92081

Effective as of 01-SEP-21

HENDERSON, GREGORY, MD†

Provider ID: N/A

2395 S MELROSE DR
VISTA, CA 92081

Effective as of 01-SEP-21

STEIN, ALEXANDER, MD

Provider ID: N/A

2067 W VISTA WAY
VISTA, CA 92083

Effective as of 01-JUL-23

EMERGENCY MEDICINE

ZIMMERMAN, DAVID, MD

Provider ID: N/A

145 THUNDER DR
VISTA, CA 92083

Effective as of 01-MAY-24

FAMILY PRACTICE

MARTINEZ, LESLY, MD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083*

Effective as of 01-JUL-24

MARTINEZ, LESLY, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*

Effective as of 01-JUL-24

PUDOL, CHRISTOPHER, DO

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Teleservice

Effective as of 01-MAR-24

SNYDER, OLE, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*

Effective as of 01-JUN-24

SNYDER, OLE, MD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083*

Effective as of 01-JUN-24

TRAN, DAO, DO

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-MAY-23

TRAN, DAO, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*

Effective as of 01-MAY-23

VIDAL, MONICA, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*

Effective as of 01-JUL-24

VIDAL, MONICA, DO†

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083*

Effective as of 01-JUL-24

GENERAL PRACTICE

TANUS, DEBORAH, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-NOV-23

GYNECOLOGIC

ONCOLOGY

ESKANDER, RAMEZ, MD†

Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

910 SYCAMORE AVE STE 102
VISTA, CA 92081
Effective as of 01-JUL-21

**HEMATOLOGY /
ONCOLOGY**

ANDREY, JEFFREY, MD†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-SEP-22

ANDREY, JEFFREY, MD†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083*
Effective as of 01-APR-23

BASERI, BABAK, MD

Provider ID: N/A

1250 SUNSET DR STE 101
VISTA, CA 92081
Effective as of 01-APR-24

BASERI, BABAK, MD†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083*
Effective as of 01-APR-23

BASERI, BABAK, MD†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-JUL-22

MARJON, PHILIP, MD†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083*
Effective as of 01-APR-23

PARSI, HOOMAN, MD

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-JUL-23

SARWARI, NAWID, MD

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-JUL-23

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-NOV-22

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083*
Effective as of 01-APR-23

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-JUL-23

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-SEP-22

SUBRAMANIAN, RUPA, MD†

Provider ID: N/A

910 SYCAMORE AVE STE 102
VISTA, CA 92081
Effective as of 01-AUG-20

**HOSPICE AND PALLIATIVE
MEDICINE**

RUBENZIK, TAMARA, MD†

Provider ID: N/A

910 SYCAMORE AVE STE 102
VISTA, CA 92081
Effective as of 01-JUL-21

HOSPITALIST MD/DO

LOPEZ, SANDRA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

INTERNAL MEDICINE

BAUTISTA, JENNIFER, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-FEB-23

PARIKH, MILIND, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

SHABANIAN, LEILA, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAY-24

SHABANIAN, LEILA, MD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083*
Effective as of 01-MAY-24

**INTERVENTIONAL
CARDIOLOGY**

BUI, HANH, MD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

906 SYCAMORE AVE STE
104
VISTA, CA 92081

Teleservice

Effective as of 01-JAN-24

DO, HULBERT, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

KABRA, ASHISH, MD

Provider ID: N/A

906 SYCAMORE AVE STE
104
VISTA, CA 92081

Effective as of 01-JAN-24

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

PARKS, MONICA, MD

Provider ID: N/A

906 SYCAMORE AVE STE
104
VISTA, CA 92081

Teleservice

Effective as of 01-OCT-23

LICENSED CLINICAL SOCIAL WORKER

ACOSTA, AZUCENA, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

ACOSTA, AZUCENA, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

CRUZ, VANESSA, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-21

CRUZ, VANESSA, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-21

CRUZ, VANESSA, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUN-23

DOUGHERTY, CHRISTINE, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-FEB-24

DOUGHERTY, CHRISTINE, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

DOUGHERTY, CHRISTINE, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

GODINEZ, BRENDA, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

GODINEZ, BRENDA, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

MEJIA, SHAYNE, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-AUG-24

MENDEZ, ADRIANA, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

MENDEZ, ADRIANA, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Teleservice

Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW

Provider ID: N/A

134 GRAPEVINE RD

C1. Lista de proveedores de la red Médico de atención especializada

VISTA, CA 92083
Teleservice
Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083

Teleservice
Effective as of 01-JUN-23

SANCHEZ, ADRIANA, LCSW

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

SANCHEZ, ADRIANA, LCSW

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

SMITH, SONYA, LCSW

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

SMITH, SONYA, LCSW

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

WILSON, CARLENE, LCSW

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

WILSON, CARLENE, LCSW

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUN-23

ZAPPONE, ALIDA, LCSW

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084

Teleservice
Effective as of 01-JAN-24

ZAPPONE, ALIDA, LCSW

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083

Teleservice
Effective as of 01-JAN-24

MARRIAGE FAMILY THERAPIST

GROVE, VICKI, MFT

Provider ID: N/A
2385 S MELROSE DR
VISTA, CA 92081
Effective as of 01-JAN-24

MEYERHOF, GRETA, MFT†

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

MEYERHOF, GRETA, MFT†

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

SLOAN, CRISTINA, MFT

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAY-24

NEPHROLOGY

KAYAL, ANAS, MD

Provider ID: N/A
2095 W VISTA WAY STE 216
VISTA, CA 92083
Effective as of 01-MAY-24

KAYAL, ANAS, MD

Provider ID: N/A
2095 W VISTA WAY STE 216
VISTA, CA 92083
Effective as of 01-JUN-24

OBSTETRICS / GYNECOLOGY

ARRIETA, IRIS, MD†

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

ARRIETA, IRIS, MD†

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

ARRIETA, IRIS, MD†

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

BINDER, PRATIBHA, MD†

Provider ID: N/A
910 SYCAMORE AVE STE
102
VISTA, CA 92081
Effective as of 01-JUL-21

DIETERICH, FREDERICK, MD

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JAN-24

FRANCIS, LARRY, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

FRANCIS, LARRY, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-DEC-22

FRANCIS, LARRY, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-DEC-22

FRANCIS, LARRY, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

HAWKINS, MELISSA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-SEP-14

HAWKINS, MELISSA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

HAWKINS, MELISSA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

KARANIKKIS, CHRISTOS, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

KARANIKKIS, CHRISTOS, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-OCT-21

KARANIKKIS, CHRISTOS, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

KARANIKKIS, CHRISTOS, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-MAR-18

LEON, JOSUE, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUN-21

LEON, JOSUE, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

LEONARD, LISA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

LEONARD, LISA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

LEONARD, LISA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-OCT-21

LOPEZ, SANDRA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*

Effective as of 01-APR-12

MAZAREI, RAHELE, DO

Provider ID: N/A

2067 W VISTA WAY STE 200
VISTA, CA 92083

Effective as of 01-JUN-23

QUAN, MARIA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

QUAN, MARIA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

QUAN, MARIA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-MAR-23

SUNTAY, BERK, MD

Provider ID: N/A

2067 W VISTA WAY STE 200
VISTA, CA 92083

Effective as of 01-JUN-23

OCCUPATIONAL

**CI. Lista de proveedores de la red
Médico de atención especializada**

THERAPIST

**CHAVEZ-SERRANO, VIOLETA,
OT**

Provider ID: N/A
1840 WEST DR
VISTA, CA 92083
Effective as of 01-FEB-24

OPHTHALMOLOGY

AMINLARI, ARDALAN, MD

Provider ID: N/A
1930 VIA CENTRE DR
VISTA, CA 92081
Effective as of 01-SEP-21

CHEN, HEATHER, MD†

Provider ID: N/A
2067 W VISTA WAY STE 120
VISTA, CA 92083
Effective as of 01-SEP-21

CHEN, HEATHER, MD†

Provider ID: N/A
2067 W VISTA WAY STE 120
VISTA, CA 92083
Effective as of 01-NOV-21

JOHNSTON, ERIC, MD

Provider ID: N/A
1930 VIA CTR
VISTA, CA 92081
Effective as of 01-SEP-21

STEPHENS, BENJAMIN, MD

Provider ID: N/A
2067 W VISTA WAY STE 120
VISTA, CA 92083
Effective as of 01-JUN-23

STEPHENS, BENJAMIN, MD

Provider ID: N/A
2067 W VISTA WAY STE 120
VISTA, CA 92083

Effective as of 01-JUL-23

ZAVERI, MAULIK, MD†

Provider ID: N/A
2067 W VISTA WAY STE 120
VISTA, CA 92083
Effective as of 01-MAR-14

ZAVERI, MAULIK, MD†

Provider ID: N/A
2067 W VISTA WAY STE 120
VISTA, CA 92083
Effective as of 01-SEP-21

OPTOMETRIST

GEE, JENNIFER, OD

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JUL-22

GEE, JENNIFER, OD

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-SEP-22

GEE, JENNIFER, OD

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-SEP-22

GEE, JENNIFER, OD

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

GEE, JENNIFER, OD

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

KIM, MICHAEL, OD

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

KIM, MICHAEL, OD

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

KIM, MICHAEL, OD

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Teleservice
Effective as of 01-JAN-21

KIM, MICHAEL, OD

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Teleservice
Effective as of 01-JUL-22

KOUCHAK, YASMIN, OD†

Provider ID: N/A
2067 W VISTA WAY STE 120
VISTA, CA 92083
Teleservice
Effective as of 01-JUL-23

MORA, WENDY, OD

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JUL-22

MORA, WENDY, OD

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

C1. Lista de proveedores de la red Médico de atención especializada

MORA, WENDY, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Teleservice

Effective as of 01-JAN-21

MORA, WENDY, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Teleservice

Effective as of 01-JUL-22

RICH, RYAN, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

RICH, RYAN, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-21

RICH, RYAN, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

RICH, RYAN, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JUL-22

TAM, EMILY, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JUL-22

TAM, EMILY, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

TAM, EMILY, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-SEP-22

TAM, EMILY, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-MAY-24

TAM, EMILY, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

TANG, ASHLEY, OD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Teleservice

Effective as of 01-NOV-21

TRAN, JESSICA, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-DEC-23

OTOLARYNGOLOGY

BERRY, JULIE, MD†

Provider ID: N/A

2023 W VISTA WAY STE J
VISTA, CA 92083

Effective as of 01-AUG-06

KUSHNARYOV, ANTON, MD†

Provider ID: N/A

2023 W VISTA WAY STE J
VISTA, CA 92083

Effective as of 01-OCT-17

PEDIATRICS

RONAN, KEVIN, MD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083*

Effective as of 01-JUL-24

RONAN, KEVIN, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-24

PHYSICIANS ASSISTANT

GLASSER, DANIEL, PA

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

GLASSER, DANIEL, PA

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

GONZALEZ, NICOLETTE, PA

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084

Teleservice

Effective as of 01-JUN-24

LEPARD, KRISTINA, PA

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084

C1. Lista de proveedores de la red Médico de atención especializada

Teleservice

Effective as of 01-MAR-23

WALLACE, STEPHANIE, PA

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-21

PODIATRIST

MILLER, JULIE, DPM

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

MILLER, JULIE, DPM

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

MILLER, JULIE, DPM

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-FEB-24

MILLER, JULIE, DPM

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-APR-24

PREVENTATIVE MEDICINE GENERAL

DEPORTO, TANYA, MD

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084

Teleservice

Effective as of 01-MAY-21

PSYCHIATRY

BELL, JENNIFER, DO

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-FEB-24

BELL, JENNIFER, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-FEB-24

BELL, JENNIFER, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-FEB-24

BELL, JENNIFER, DO

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-FEB-24

CHRISTIANSON, WARREN, DO

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-AUG-24

CHRISTIANSON, WARREN, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-AUG-24

CHRISTIANSON, WARREN, DO

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-AUG-21

PATEL, MITESH, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Teleservice

Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Teleservice

Effective as of 01-JAN-24

PSYCHOLOGIST

C1. Lista de proveedores de la red Médico de atención especializada

RUBIO, GLORIA, RD

Provider ID: N/A

910 SYCAMORE AVE
STE 270
VISTA, CA 92081
Effective as of 01-AUG-24

RUBIO, GLORIA, RD

Provider ID: N/A

910 SYCAMORE AVE
STE 270
VISTA, CA 92081
Effective as of 01-AUG-24

PUBLIC HEALTH

PREVENTATIVE MEDICINE

WALKER, BRADLEY, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAY-23

PULMONARY DISEASES

BAUTISTA, JENNIFER, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-MAY-24

EISMAN, SCOTT, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-MAY-24

FUSSELL, KEVIN, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-MAY-24

GADRE, ABHISHEK, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-MAY-24

HOOPER, WILLIAM, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-MAY-24

HSING, ANDREW, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-MAY-24

HSING, ANDREW, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-JAN-24

HSING, ANDREW, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-FEB-23

KABADI, ALISHA, MD

Provider ID: N/A

2023 W VISTA WAY
VISTA, CA 92083
Effective as of 01-MAY-24

LIANG, NI-CHENG, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-MAY-24

MAGANA, MARISA, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-FEB-24

PINO, ALEJANDRO, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-FEB-23

PINO, ALEJANDRO, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-MAY-24

SARNOFF, ROBERT, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-MAY-24

TRAN, SHERI, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-MAY-24

ZHANG, MICHELLE, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-MAY-24

ZHANG, MICHELLE, MD

Provider ID: N/A

2067 W VISTA WAY STE D
VISTA, CA 92083
Effective as of 01-SEP-23

RADIOLOGY DIAGNOSTIC

PATEL, NIKHIL, MD

Provider ID: N/A

906 SYCAMORE AVE STE
100
VISTA, CA 92081
Effective as of 01-JUN-24

C1. Lista de proveedores de la red Médico de atención especializada

PATEL, NIKHIL, MD

Provider ID: N/A

906 SYCAMORE AVE STE
100
VISTA, CA 92081

Effective as of 01-DEC-23

STEINBERGER, AMANDA, DO

Provider ID: N/A

906 SYCAMORE AVE STE
100
VISTA, CA 92081

Effective as of 01-JUL-24

REGISTERED DIETITIAN / NUTRITIONIST

CARLSON, STACY, RD

Provider ID: N/A

910 SYCAMORE AVE
STE 270
VISTA, CA 92081

Effective as of 01-AUG-24

REGISTERED PHYSICAL THERAPIST

AMBROSE, CHRISTOPHER, PT

Provider ID: N/A

2067 W VISTA WAY STE 185
VISTA, CA 92083

Effective as of 01-JAN-21

BOUCHARD, REID, PT

Provider ID: N/A

1958 VIA CENTRE DR
VISTA, CA 92081

Effective as of 01-OCT-21

BOUTELLE, DAVID, PT

Provider ID: N/A

2067 W VISTA WAY STE 185
VISTA, CA 92083

Effective as of 01-FEB-24

DOULL, MATTHEW, PT

Provider ID: N/A

1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-JUN-23

ESSER, STEPHANIE, PT

Provider ID: N/A

1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-JUN-24

GARBER, MARC, PT

Provider ID: N/A

1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-OCT-21

PENNINGTON, JENNIFER, PT

Provider ID: N/A

1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-OCT-21

TAMAYO, SYDNIE, PT

Provider ID: N/A

1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-OCT-23

WILSON, JENNIFER, PT

Provider ID: N/A

1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-OCT-21

RHEUMATOLOGY

AL NAHLAWI, BASMA, MD

Provider ID: N/A

2095 W VISTA WAY STE 216
VISTA, CA 92083

Effective as of 01-JUN-24

ANSARI, RASHAD, MD†

Provider ID: N/A

2023 W VISTA WAY STE J
VISTA, CA 92083

Effective as of 01-JUL-22

ANSARI, RASHAD, MD†

Provider ID: N/A

2023 W VISTA WAY STE J
VISTA, CA 92083

Effective as of 01-SEP-21

BEJKO, ETELEVA, MD†

Provider ID: N/A

2023 W VISTA WAY STE H
VISTA, CA 92083

Teleservice

Effective as of 01-JUL-21

BEJKO, ETELEVA, MD†

Provider ID: N/A

2023 W VISTA WAY STE H
VISTA, CA 92083

Teleservice

Effective as of 01-DEC-21

BRION, PAUL, MD†

Provider ID: N/A

2023 W VISTA WAY STE H
VISTA, CA 92083

Effective as of 01-JUL-21

BRION, PAUL, MD†

Provider ID: N/A

2023 W VISTA WAY STE H
VISTA, CA 92083

Effective as of 01-SEP-21

**C1. Lista de proveedores de la red
Médico de atención especializada**

SURGERY GENERAL

ARMANI, AVA, MD†

Provider ID: N/A

910 SYCAMORE AVE STE
102
VISTA, CA 92081
Effective as of 01-JUL-21

GROVE, JAY, MD†

Provider ID: N/A

2385 S MELROSE DR
VISTA, CA 92081
Effective as of 01-SEP-21

GROVE, JAY, MD†

Provider ID: N/A

2385 S MELROSE DR
VISTA, CA 92081
Effective as of 01-JAN-21

GROVE, JAY, MD†

Provider ID: N/A

2385 S MELROSE DR
VISTA, CA 92081
Effective as of 01-DEC-14

HANNA, KAREN, MD†

Provider ID: N/A

2385 S MELROSE DR
VISTA, CA 92081
Teleservice
Effective as of 01-DEC-14

HANNA, KAREN, MD†

Provider ID: N/A

2385 S MELROSE DR
VISTA, CA 92081
Teleservice
Effective as of 01-JAN-21

***SURGERY GENERAL
VASCULAR***

BUNKE, NISHA, MD

Provider ID: N/A

906 SYCAMORE AVE STE
100
VISTA, CA 92081
Teleservice
Effective as of 01-JUN-23

***SURGERY
NEUROLOGICAL***

STERN, MARK, MD

Provider ID: N/A

326 S MELROSE DR STE
200
VISTA, CA 92081
Effective as of 01-SEP-23

SURGERY THORACIC

GREWAL, NAVROSE, MD†

Provider ID: N/A

161 THUNDER DR
VISTA, CA 92083
Effective as of 01-DEC-21

ANESTHESIOLOGY

KRAUSE, MARTIN, MD†

Provider ID: N/A

36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-FEB-22

***ANESTHESIOLOGY
CRITICAL CARE MEDICINE***

**RODRIGUEZ-MINETTE,
JESSICA, MD†**

Provider ID: N/A

36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-JAN-21

***CERTIFIED NURSE
PRACTITIONER***

IHEMEDU, AMARACHI, NPF

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-JAN-23

IHEMEDU, AMARACHI, NPF

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-JAN-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-APR-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-APR-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-APR-23

ONUOHA, NOJA, NP†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595*
Effective as of 01-NOV-22

C1. Lista de proveedores de la red Médico de atención especializada

ONUOHA, NOJA, NP[†]

Provider ID: N/A

📄 36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595*
Effective as of 01-NOV-22

THOMAS II, STEPHEN, NPF[†]

Provider ID: N/A

📄 36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAR-21

CHIROPRACTOR

ADAMS, CONRAD, LAC

Provider ID: N/A

📄 32475 CLINTON KEITH RD
STE 108
WILDOMAR, CA 92595
Effective as of 01-MAR-23

GASTROENTEROLOGY

CHANGCHIEN, ERIC, MD[†]

Provider ID: N/A

📄 36243 INLAND VALLEY DR
STE 280
WILDOMAR, CA 92595
Effective as of 01-MAR-19

INTERNAL MEDICINE

CHANG, DAVID, MD[†]

Provider ID: N/A

📄 36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAY-15

CHANG, DAVID, MD[†]

Provider ID: N/A

📄 36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595
Effective as of 01-MAR-19

NANDI, SHANKHA, DO[†]

Provider ID: N/A

📄 36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-JUN-15

NANDI, SHANKHA, DO[†]

Provider ID: N/A

📄 36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-JUN-15

WANG, WENG-LIH, MD[†]

Provider ID: N/A

📄 36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-OCT-19

YU, JERRY, MD[†]

Provider ID: N/A

📄 36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAR-21

YU, JERRY, MD[†]

Provider ID: N/A

📄 36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAR-19

YU, JERRY, MD

Provider ID: N/A

📄 36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

YU, JERRY, MD

Provider ID: N/A

📄 36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

YU, JERRY, MD

Provider ID: N/A

📄 36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

YU, JERRY, MD

Provider ID: N/A

📄 36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

INTERNAL MEDICINE CRITICAL CARE MEDICINE

JAFFE, GILAD, MD

Provider ID: N/A

📄 36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-SEP-23

PATEL, SAGAR, MD[†]

Provider ID: N/A

📄 36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-AUG-21

LICENSED CLINICAL SOCIAL WORKER

JONES, VALORIA, LCSW[†]

Provider ID: N/A

📄 36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-JUL-23

JONES, VALORIA, LCSW†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595

Effective as of 01-JUL-23

JONES, VALORIA, LCSW†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595

Effective as of 01-JUL-23

JONES, VALORIA, LCSW†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595

Effective as of 01-JAN-23

NEPHROLOGY

CHANG, DAVID, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595

Effective as of 01-DEC-23

CHANG, DAVID, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595

Effective as of 01-DEC-23

CHANG, DAVID, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595

Effective as of 01-DEC-23

CHANG, DAVID, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595

Effective as of 01-DEC-23

CHANG, DAVID, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595

Effective as of 01-DEC-23

CHANG, DAVID, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595

Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595

Effective as of 01-MAY-09

CHANG, DAVID, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595

Effective as of 01-MAY-15

CHANG, DAVID, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595

Effective as of 01-MAY-23

LAC, PETER, MD†

Provider ID: N/A

36320 INLAND VALLEY DR

STE 308

WILDOMAR, CA 92595

Effective as of 01-NOV-16

LAC, PETER, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595

Effective as of 01-NOV-19

LAC, PETER, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595

Effective as of 01-DEC-23

LAC, PETER, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595

Effective as of 01-MAR-21

LAC, PETER, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595

Effective as of 01-JUL-23

LAC, PETER, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595

Effective as of 01-DEC-23















LAC, PETER, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595

Effective as of 01-DEC-23

**C1. Lista de proveedores de la red
Médico de atención especializada**

LAC, PETER, MD Provider ID: N/A	 36320 INLAND VALLEY DR STE 307 WILDOMAR, CA 92595 Effective as of 01-DEC-23	Effective as of 01-JUN-15	NANDI, SHANKHA, DO† Provider ID: N/A
LAC, PETER, MD Provider ID: N/A	 36320 INLAND VALLEY DR STE 307 WILDOMAR, CA 92595 Effective as of 01-DEC-23	Effective as of 01-DEC-23	 36320 INLAND VALLEY DR STE 308 WILDOMAR, CA 92595 Effective as of 01-AUG-20
LAC, PETER, MD Provider ID: N/A	 36320 INLAND VALLEY DR STE 307 WILDOMAR, CA 92595 Effective as of 01-DEC-23	Effective as of 01-DEC-23	NANDI, SHANKHA, DO† Provider ID: N/A
LAC, PETER, MD Provider ID: N/A	 36320 INLAND VALLEY DR STE 307 WILDOMAR, CA 92595 Effective as of 01-DEC-23	Effective as of 01-DEC-23	 36320 INLAND VALLEY DR STE 308 WILDOMAR, CA 92595 Effective as of 01-MAR-19
NANDI, SHANKHA, DO Provider ID: N/A	 36320 INLAND VALLEY DR STE 308 WILDOMAR, CA 92595 Effective as of 01-JUN-23	Effective as of 01-JUN-23	NANDI, SHANKHA, DO† Provider ID: N/A
NANDI, SHANKHA, DO Provider ID: N/A	 36320 INLAND VALLEY DR STE 307 WILDOMAR, CA 92595 Effective as of 01-DEC-23	Effective as of 01-DEC-23	WANG, WENG-LIH, MD† Provider ID: N/A
NANDI, SHANKHA, DO Provider ID: N/A	 36320 INLAND VALLEY DR STE 307 WILDOMAR, CA 92595 Effective as of 01-DEC-23	Effective as of 01-DEC-23	 36320 INLAND VALLEY DR STE 308 WILDOMAR, CA 92595 Effective as of 01-MAR-21
NANDI, SHANKHA, DO Provider ID: N/A	 36320 INLAND VALLEY DR STE 307 WILDOMAR, CA 92595 Effective as of 01-DEC-23	Effective as of 01-DEC-23	WANG, WENG-LIH, MD† Provider ID: N/A
NANDI, SHANKHA, DO Provider ID: N/A	 36320 INLAND VALLEY DR STE 308 WILDOMAR, CA 92595	Effective as of 01-JUN-15	 36320 INLAND VALLEY DR STE 308 WILDOMAR, CA 92595 Effective as of 01-MAY-15
NANDI, SHANKHA, DO Provider ID: N/A	 36320 INLAND VALLEY DR STE 308 WILDOMAR, CA 92595	Effective as of 01-MAY-09	WANG, WENG-LIH, MD†

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595

Effective as of 01-MAY-15

WANG, WENG-LIH, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595

Effective as of 01-JAN-20

WANG, WENG-LIH, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595

Effective as of 01-JUL-24

WANG, WENG-LIH, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595

Effective as of 01-DEC-23

WANG, WENG-LIH, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595

Effective as of 01-DEC-23

WANG, WENG-LIH, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595

Effective as of 01-DEC-23

YU, JERRY, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595

Effective as of 01-DEC-23

YU, JERRY, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595

Effective as of 01-DEC-23

PSYCHIATRY

JAKKULA, JAGAN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595

Effective as of 01-JUL-22

JAKKULA, JAGAN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595

Effective as of 01-NOV-23

JAKKULA, JAGAN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595

Effective as of 01-JUL-22

JAKKULA, JAGAN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595

Effective as of 01-NOV-23

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595

Effective as of 01-JUL-22

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595

Effective as of 01-OCT-23

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595

Effective as of 01-OCT-23

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595

Effective as of 01-JUL-22

KUNAM, SYAM, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595

Effective as of 01-JUN-23

KUNAM, SYAM, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595

Effective as of 01-NOV-23

KUNAM, SYAM, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595

Effective as of 01-NOV-23

KUNAM, SYAM, MD

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595

Effective as of 01-JUN-23

**PUCHAKAYALA, NANDITA,
MD†**

Provider ID: N/A

36320 INLAND VALLEY DR
STE 300
WILDOMAR, CA 92595

Effective as of 01-AUG-22

**PUCHAKAYALA, NANDITA,
MD†**

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595

Effective as of 01-AUG-22

**PUCHAKAYALA, NANDITA,
MD†**

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595

Effective as of 01-SEP-23

**PUCHAKAYALA, NANDITA,
MD†**

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595

Effective as of 01-SEP-23

**PUCHAKAYALA, NANDITA,
MD†**

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595

Effective as of 01-AUG-22

**PUCHAKAYALA, NANDITA,
MD†**

Provider ID: N/A

36320 INLAND VALLEY DR
STE 300
WILDOMAR, CA 92595

Effective as of 01-AUG-22

PULMONARY DISEASES

KUMAR, AVNEE, MD

Provider ID: N/A

36485 INLAND VALLEY DR
WILDOMAR, CA 92595

Effective as of 01-JUL-23

SURI, RAJAT, MD†

Provider ID: N/A

36485 INLAND VALLEY DR
WILDOMAR, CA 92595

Effective as of 01-AUG-21

RADIATION ONCOLOGY

CHUNG, ARTHUR, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595

Effective as of 01-JUN-23

CHUNG, ARTHUR, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595

Effective as of 01-JUN-23

CHUNG, ARTHUR, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595

Effective as of 01-SEP-23

DAROU, PARIMA, MD

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-APR-24

DAROU, PARIMA, MD

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-APR-24

DAROU, PARIMA, MD

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-JUN-24

DAROU, PARIMA, MD

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-JUN-24

DAROU, PARIMA, MD

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-JUN-24

KANG, JOSEPH, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595

Effective as of 01-JUL-23

KANG, JOSEPH, MD

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-JUN-23

KANG, JOSEPH, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-JUN-23

KANG, JOSEPH, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-DEC-23

LAWRENSON, LESLEY, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-NOV-23

MASON, JAMES, MD†

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAR-10

MASON, JAMES, MD†

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-14

MASON, JAMES, MD†

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595

Effective as of 01-SEP-14

MASON, JAMES, MD†

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-14

MERLO, CLIFFORD, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-JUN-23

MERLO, CLIFFORD, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-JUN-23

RHA, JANICE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 105
WILDOMAR, CA 92595
Effective as of 01-MAR-19

SUN, JASON, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-JUL-23

SUN, JASON, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-JUN-23

SUN, JASON, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-NOV-23

**REGISTERED DIETITIAN /
NUTRITIONIST**

ATTOBRA, TATIANA, RD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 301
WILDOMAR, CA 92595
Effective as of 01-DEC-22

**REGISTERED PHYSICAL
THERAPIST**

ALY, DILYANA, PT†

Provider ID: N/A

36243 INLAND VALLEY DR
STE 110
WILDOMAR, CA 92595
Effective as of 01-JUL-19

ALY, DILYANA, PT†

Provider ID: N/A

36243 INLAND VALLEY DR
STE 110
WILDOMAR, CA 92595
Effective as of 01-JUL-19

CASTELLON, SHAWN, PT

Provider ID: N/A

32246 CLINTON KEITH RD
STE 103
WILDOMAR, CA 92595
Effective as of 01-JUL-23

CASTELLON, SHAWN, PT

Provider ID: N/A

32246 CLINTON KEITH RD

C1. Lista de proveedores de la red Médico de atención especializada

STE 103
WILDOMAR, CA 92595
Effective as of 01-JUL-23

TSAI, CHIAHONG, PT

Provider ID: N/A

32246 CLINTON KEITH RD
STE 103
WILDOMAR, CA 92595
Effective as of 01-NOV-23

TSAI, CHIAHONG, PT

Provider ID: N/A

32246 CLINTON KEITH RD
STE 103
WILDOMAR, CA 92595
Effective as of 01-NOV-23

VARGHESE, ROSHAN, PT

Provider ID: N/A

32246 CLINTON KEITH RD
STE 103
WILDOMAR, CA 92595
Effective as of 01-MAY-24

VARGHESE, ROSHAN, PT

Provider ID: N/A

32246 CLINTON KEITH RD
STE 103
WILDOMAR, CA 92595
Effective as of 01-MAY-24

SPEECH PATHOLOGIST

WIRTH, LAURA, SP

Provider ID: N/A

36330 HIDDEN SPRINGS
RD STE E
WILDOMAR, CA 92595
Effective as of 01-JUN-22

WIRTH, LAURA, SP

Provider ID: N/A

36330 HIDDEN SPRINGS
RD STE E

WILDOMAR, CA 92595
Effective as of 01-JUN-22

SURGERY COLON SURGERY

GORSKI, TITO, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

GORSKI, TITO, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

GORSKI, TITO, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAY-22

GORSKI, TITO, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAR-19

SURGERY GENERAL

AHMED, MOHAMED, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-23

AHMED, MOHAMED, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-OCT-22

AHMED, MOHAMED, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-23

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-JUL-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-JUL-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-JUL-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-MAR-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAR-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-APR-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-DEC-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-DEC-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-DEC-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-DEC-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-MAR-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-APR-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-JUL-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-MAY-22

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-SEP-22

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-SEP-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-APR-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAY-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAY-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22

CORDERO, RAYMUND, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22

CORDERO, RAYMUND, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

**C1. Lista de proveedores de la red
Médico de atención especializada**

CORDERO, RAYMUND, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAR-19

CORDERO, RAYMUND, MD†

Provider ID: N/A

36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-FEB-21

DADA, STEPHEN, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-DEC-23

DADA, STEPHEN, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-DEC-23

DADA, STEPHEN, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAR-24

DADA, STEPHEN, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-NOV-23

DEARING, DAVID, MD†

Provider ID: N/A

36243 INLAND VALLEY DR
STE 280

WILDOMAR, CA 92595
Effective as of 01-DEC-12

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-APR-22

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

ESSIEN, FRANCIS, MD

Provider ID: N/A

36320 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-JUN-24

GORSKI, YARA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

GORSKI, TITO, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22

GORSKI, YARA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22

GORSKI, TITO, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101

**C1. Lista de proveedores de la red
Médico de atención especializada**

WILDOMAR, CA 92595
Effective as of 01-DEC-23

GORSKI, TITO, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-DEC-23

HUSTED, JOHN, MD†

Provider ID: N/A
36243 INLAND VALLEY DR
STE 280

WILDOMAR, CA 92595
Effective as of 01-MAR-13

JOHNSEN, HEGE, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-MAR-19

JOHNSEN, HEGE, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-SEP-22

JOHNSEN, HEGE, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-SEP-16

JOHNSEN, HEGE, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-MAY-22

JOHNSEN, HEGE, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-MAY-22

JOHNSEN, HEGE, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-SEP-16

JOHNSEN, HEGE, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-APR-22

JOHNSEN, HEGE, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-DEC-17

KARMUR, AMIT, DO†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-DEC-23

KARMUR, AMIT, DO†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-JAN-22

KARMUR, AMIT, DO†

Provider ID: N/A
36320 INLAND VALLEY DR

STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22

LEE, JENNY, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-MAR-19

MAC, OLIVIA, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-MAR-23

MAC, OLIVIA, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-MAR-23

MAC, OLIVIA, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-DEC-22

MAC, OLIVIA, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-APR-23

NAFIU, BOLAJI, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-DEC-19

**C1. Lista de proveedores de la red
Médico de atención especializada**

NAFIU, BOLAJI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-JAN-20

NAFIU, BOLAJI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-APR-20

NAFIU, BOLAJI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22

NOURI, SARVENAZ, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-NOV-22

NOURI, SARVENAZ, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-NOV-22

NOURI, SARVENAZ, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-JAN-23

NOURI, SARVENAZ, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-SEP-19

NOURI, SARVENAZ, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-FEB-23

TIU, BRIAN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-AUG-18

TIU, BRIAN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-SEP-22

WANG, XIUJIE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-MAR-20

WANG, XIUJIE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-DEC-21

WANG, XIUJIE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

**SURGERY GENERAL
VASCULAR**

GORSKI, YARA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

GORSKI, YARA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

GORSKI, YARA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

GORSKI, YARA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

GORSKI, YARA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAR-19

KARMUR, AMIT, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-JAN-22

KARMUR, AMIT, DO[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-JUL-22

KARMUR, AMIT, DO[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-MAY-22

KARMUR, AMIT, DO[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-MAY-22

KARMUR, AMIT, DO[†]

Provider ID: N/A

31537 INLAND VALLEY DR,
STE 202
WILDOMAR, CA 92595

Effective as of 01-JAN-22

NAFIU, BOLAJI, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-MAY-22

NAFIU, BOLAJI, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-DEC-21

TIU, BRIAN, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-APR-22

TIU, BRIAN, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-APR-22

TIU, BRIAN, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-MAR-19

TIU, BRIAN, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-MAY-22

TIU, BRIAN, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-MAY-22

TIU, BRIAN, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-MAY-19

WANG, XIUJIE, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595

Effective as of 01-OCT-20

WANG, XIUJIE, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-MAY-22

WANG, XIUJIE, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-OCT-20

Médicos de atención especializada: ACUPUNTURA

Hills, Mary LAc, DOM

Provider ID: N/A
2271 Alpine Blvd Ste E
Alpine, CA 91901

Laffen, Julie LAc

Provider ID: N/A
4392 Bonita Rd
Bonita, CA 91902

Piao, Zhouyong LAc

Provider ID: N/A
5030 Bonita Rd Ste B
Bonita, CA 91902

Zhao, Chutima LAc

Provider ID: N/A
4514 Bonita Rd
Bonita, CA 91902

Brizzie, Melissa LAc

Provider ID: N/A
3144 El Camino Real Ste 204
Carlsbad, CA 92008

Cobb, Ayanna LAc, DOM

Provider ID: N/A
2890 Pio Pico Dr Ste 104
Carlsbad, CA 92008

Han, Sang-Kyou LAc

Provider ID: N/A
756 Grand Ave Ste B
Carlsbad, CA 92008

Peterson, Ricardo LAc

Provider ID: N/A
6986 El Camino Real Ste F
Carlsbad, CA 92009

Scarlett, Yvonne LAc

Provider ID: N/A
2890 Pio Pico Dr Ste 104
Carlsbad, CA 92008

Gabriel, Joel LAc

Provider ID: N/A
4392 Bonita Rd
Bonita, CA 91902

Moon, Michelle LAc

Provider ID: N/A
5030 Bonita Rd Ste B
Bonita, CA 91902

Vallarta, Barbara LAc

Provider ID: N/A
4514 Bonita Rd
Bonita, CA 91902

Vighne, Sarita LAc

Provider ID: N/A
2045 San Elijo Ave
Cardiff, CA 92007

Chung, Hyunsoo LAc

Provider ID: N/A
5751 Palmer Way Ste H 2-3
Carlsbad, CA 92010

Han, Claire LAc

Provider ID: N/A
1902 Wright Pl Ste 200
Carlsbad, CA 92008

Lyons, Jennifer LAc

Provider ID: N/A
1207 Carlsbad Village Dr Ste T
Carlsbad, CA 92008

Santiago, Pier LAc

Provider ID: N/A
3081 Madison St Ste B
Carlsbad, CA 92008

Tom, Jennifer LAc

Provider ID: N/A
1207 Carlsbad Village Dr Ste T
Carlsbad, CA 92008

Yu, Lu LAc

Provider ID: N/A
2890 Pio Pico Dr Ste 104
Carlsbad, CA 92008

Dinsmore, Richard LAc

Provider ID: N/A
1214 3rd Ave
Chula Vista, CA 91911

Good, Georgia LAc

Provider ID: N/A
955 Lane Ave Ste 201
Chula Vista, CA 91914

Kanomata, Atsushi LAc

Provider ID: N/A
821 Kuhn Dr Ste 101
Chula Vista, CA 91914

Mendez, Michael LAc

Provider ID: N/A
265 E St Ste A
Chula Vista, CA 91910

Tran, Carol LAc

Provider ID: N/A
1229 3rd Ave Ste C
Chula Vista, CA 91911

Beck, Andrea LAc

Provider ID: N/A
1011 Camino del Mar Ste 212
Del Mar, CA 92014

Lee, Dwayne LAc

Provider ID: N/A
1219 Camino del Mar
Del Mar, CA 92014

Anton, Cecilia LAc

Provider ID: N/A
1149 N 2nd St
El Cajon, CA 92021

Anton, Cecilia LAc

Provider ID: N/A
821 Kuhn Dr Ste 101
Chula Vista, CA 91914

Good, Georgia LAc

Provider ID: N/A
885 Canarios Ct Ste 110
Chula Vista, CA 91910

Hwang, Soo Chun LAc

Provider ID: N/A
910 Hale Pl Ste 214
Chula Vista, CA 91914

Lee, Il Ju LAc

Provider ID: N/A
296 H St Ste 203
Chula Vista, CA 91910

Son, Jae Jin LAc

Provider ID: N/A
296 H St Ste 203
Chula Vista, CA 91910

Wells, Emily LAc

Provider ID: N/A
955 Lane Ave Ste 101
Chula Vista, CA 91914

Beckwith, Valerie LAc

Provider ID: N/A
12865 Pointe del Mar Way Ste 120
Del Mar, CA 92014

Yerkes, Carmela LAc

Provider ID: N/A
1011 Camino del Mar Ste 240
Del Mar, CA 92014

Bonito, Amber LAc

Provider ID: N/A
564 Broadway
El Cajon, CA 92021

Candelaria, Ida LAc

Provider ID: N/A
983 E Washington Ave
El Cajon, CA 92020

Culp, Casey LAc

Provider ID: N/A
1149 N 2nd St
El Cajon, CA 92021

Fernandez, Rayne LAc

Provider ID: N/A
983 E Washington Ave
El Cajon, CA 92020

Ford, Shannon LAc

Provider ID: N/A
564 Broadway
El Cajon, CA 92021

Good, Georgia LAc

Provider ID: N/A
1571 N Magnolia Ave Ste 212
El Cajon, CA 92020

Kim, Min Joo LAc

Provider ID: N/A
855 E Madison Ave
El Cajon, CA 92020

Lopez, Maria LAc

Provider ID: N/A
470 N Mollison Ave
El Cajon, CA 92021

Onan, Teresa LAc

Provider ID: N/A
1149 N 2nd St
El Cajon, CA 92021

Poty, Lisa Jeanne LAc

Provider ID: N/A
251 E Main St
El Cajon, CA 92020

Craft, Kevin LAc

Provider ID: N/A
855 E Madison Ave
El Cajon, CA 92020

Custodio, Lesley LAc

Provider ID: N/A
314 S Magnolia Ave
El Cajon, CA 92020

Flores, Yesenia LAc

Provider ID: N/A
1149 N 2nd St
El Cajon, CA 92021

Goldman, Roni LAc

Provider ID: N/A
1149 N 2nd St
El Cajon, CA 92021

Kim, Min Joo LAc

Provider ID: N/A
470 N Mollison Ave
El Cajon, CA 92021

Larowe, Alexiss LAc

Provider ID: N/A
2295 Fletcher Pkwy Ste 101
El Cajon, CA 92020

Lopez, Maria LAc

Provider ID: N/A
855 E Madison Ave
El Cajon, CA 92020

Phillips, Christina LAc

Provider ID: N/A
564 Broadway
El Cajon, CA 92021

Alavi, Matt LAc

Provider ID: N/A
317 N El Camino Real Ste 306
Encinitas, CA 92024

Arellano, Jacqueline LAc

Provider ID: N/A
1200 Garden View Rd Ste 200
Encinitas, CA 92024

Burr, Douglas LAc

Provider ID: N/A
1200 Garden View Rd Ste 200
Encinitas, CA 92024

Goforth, Greta LAc

Provider ID: N/A
187 Calle Magdalena Ste 214
Encinitas, CA 92024

Han, Stacie LAc

Provider ID: N/A
142 Encinitas Blvd
Encinitas, CA 92024

Julian, Fides LAc

Provider ID: N/A
1200 Garden View Rd Ste 200
Encinitas, CA 92024

McCaughan, Lauren LAc

Provider ID: N/A
317 N El Camino Real Ste 306
Encinitas, CA 92024

Rabin, Brett LAc

Provider ID: N/A
317 N El Camino Real Ste 306
Encinitas, CA 92024

Robles, Ma Regina Blanca LAc

Provider ID: N/A
317 N El Camino Real Ste 306
Encinitas, CA 92024

Tsoucalas, Katerina LAc

Provider ID: N/A
191 Calle Magdalena Ste 295
Encinitas, CA 92024

Blair, Sherine LAc

Provider ID: N/A
543 Encinitas Blvd Ste 107
Encinitas, CA 92024

Deems, Leslie LAc

Provider ID: N/A
960 2nd St Ste 103
Encinitas, CA 92024

Gonzalez, Andres LAc

Provider ID: N/A
1130 2nd St
Encinitas, CA 92024

Hemingway, Dodie LAc

Provider ID: N/A
2210 Encinitas Blvd Ste E
Encinitas, CA 92024

Kim, Min Kyun LAc

Provider ID: N/A
535 Encinitas Blvd Ste 112
Encinitas, CA 92024

Orsini, Patricia LAc

Provider ID: N/A
1011 Devonshire Dr Ste B
Encinitas, CA 92024

Reid-Bretell, Alison LAc

Provider ID: N/A
171 Saxony Rd Ste 107
Encinitas, CA 92024

Tang-Ritchie, Leng LAc

Provider ID: N/A
1200 Garden View Rd Ste 200
Encinitas, CA 92024

Yu, Lu LAc

Provider ID: N/A
191 Calle Magdalena Ste 295
Encinitas, CA 92024

Akhavan, Farahnaz LAc

Provider ID: N/A
1733 S Escondido Blvd
Escondido, CA 92025

Kim, Min Joo LAc

Provider ID: N/A
425 N Date St
Escondido, CA 92025

Kwak, Hyoshin LAc

Provider ID: N/A
106 S Grape St Ste 10
Escondido, CA 92025

McIntyre, Michele LAc

Provider ID: N/A
8975 Lawrence Welk Dr Spc 323
Escondido, CA 92026

Pole, Carolyn LAc

Provider ID: N/A
337 S Kalmia St
Escondido, CA 92025

Harper, Korrie LAc

Provider ID: N/A
407 Potter St Ste D
Fallbrook, CA 92028

Lopez, Maria LAc

Provider ID: N/A
1309 S Mission Rd
Fallbrook, CA 92028

Arellano, Jacqueline LAc

Provider ID: N/A
8910 Villa La Jolla Dr Ste 200
La Jolla, CA 92037

Arellano, Jacqueline LAc

Provider ID: N/A
9300 Campus Point Dr
La Jolla, CA 92037

Chapman, Joni LAc

Provider ID: N/A
160 N Date St
Escondido, CA 92025

Kim, Min Joo LAc

Provider ID: N/A
460 N Elm St
Escondido, CA 92025

McAdams, Donna LAc

Provider ID: N/A
325 W 3rd Ave Ste 102
Escondido, CA 92025

McKillip, Joleen LAc

Provider ID: N/A
325 W 3rd Ave Ste 102
Escondido, CA 92025

Craft, Kevin LAc

Provider ID: N/A
1309 S Mission Rd
Fallbrook, CA 92028

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Sujata P. Prabhu, MD

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Anh T. Tonnu, OD

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Thy T. Nguyen, OD

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Sarjan H. Patel, MD

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Joshua Morrison Reyes, MD

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Marineh Baghoumian, OD

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Jeffrey I. Scott, OD

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Phuc Quach, OD

Provider ID: N/A
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Kim N. Aoto, OD

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Gitane Patel, MD

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Christopher Hsu, MD

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Andreea Nastasoiu, OD

Provider ID: N/A
8321 La Mesa Blvd
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Tina Khieu, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
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Gregory E. Giles, OD

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7863 La Mesa Blvd Ste 202
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Chantelle Davis, OD

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Rachel J. Lee, OD

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Ryan Marr, OD

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Jamie S. Peters, OD

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Sulki Han, OD

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Stephanie Asis, OD

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Vady Khalil, OD

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Mary Vivirito, OD

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Noorina Zaidi, OD

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Beverly Tu, OD

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Joseph Mcgraw, MD

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La Mesa, CA 91942

Ryan Marr, OD

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My Linh Ton-nu, OD

Provider ID: N/A

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Moena Dean, OD

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John C. Fleming, OD

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Lakeside, CA 92040

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Lemon Grove, CA 91945

Michael Fimreite, OD

Provider ID: N/A

8351 Broadway
Lemon Grove, CA 91945

Claudia Montana Collins, OD

Provider ID: N/A

8351 Broadway
Lemon Grove, CA 91945

Phuc Quach, OD

Provider ID: N/A

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La Mesa, CA 91942

Jeffrey I. Scott, OD

Provider ID: N/A

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La Mesa, CA 91942

Nancy Tsui, OD

Provider ID: N/A

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La Mesa, CA 91942

Beverly Tu, OD

Provider ID: N/A

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La Mesa, CA 91942

Sharon M. Dyer, OD

Provider ID: N/A

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Kenny Hoang, OD

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Lemon Grove, CA 91945

Christina M. Turner, OD

Provider ID: N/A

8351 Broadway
Lemon Grove, CA 91945

Jeffrey S. Fimreite, OD

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8351 Broadway
Lemon Grove, CA 91945

Daniel D. Cha, OD

Provider ID: N/A
8351 Broadway
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Christina M. Turner, OD

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Patricia A. Atie, OD

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Joan Keddington, OD

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Tina Khieu, OD

Provider ID: N/A
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Joshua Morrison Reyes, MD

Provider ID: N/A
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National City, CA 91950

Patricia A. Atie, OD

Provider ID: N/A
8351 Broadway
Lemon Grove, CA 91945

Michael Fimreite, OD

Provider ID: N/A
7922 Palm St
Lemon Grove, CA 91945

Jeffrey S. Fimreite, OD

Provider ID: N/A
7922 Palm St
Lemon Grove, CA 91945

Claudia Montana Collins, OD

Provider ID: N/A
7922 Palm St
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Greg L. Marlay, OD

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Austin T. Lee, OD

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Phuc Quach, OD

Provider ID: N/A
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John B. Vinh, OD

Provider ID: N/A

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Henry V. Tran, OD

Provider ID: N/A

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Sulki Han, OD

Provider ID: N/A

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National City, CA 91950

Nancy Tsui, OD

Provider ID: N/A

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National City, CA 91950

Thy T. Nguyen, OD

Provider ID: N/A

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Christopher Hsu, MD

Provider ID: N/A

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Ryan Marr, OD

Provider ID: N/A

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Nataly Kalbakji, OD

Provider ID: N/A

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2345 E 8th St Ste 111
National City, CA 91950

Sharon A. Wong, OD

Provider ID: N/A

655 Euclid Ave Ste 302
National City, CA 91950

Wesley S. Chew, OD

Provider ID: N/A

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Kim N. Aoto, OD

Provider ID: N/A

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Anh T. Tonnu, OD

Provider ID: N/A

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Joseph McGraw, MD

Provider ID: N/A

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Bruce T. Haight, MD

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Vady Khalil, OD

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Nataly Kalbakji, OD

Provider ID: N/A
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Judy Hamouie, OD

Provider ID: N/A
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Henry L. Hudson, MD

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Sylvia Tillman, OD

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Provider ID: N/A
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Stephanie Asis, OD

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Moena Dean, OD

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Jeffrey I. Scott, OD

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Janice Hung, OD

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Mary Vivirito, OD

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Noorina Zaidi, OD

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Beverly Tu, OD

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Sujata P. Prabhu, MD

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Oceanside, CA 92056

Adam Rosa, OD

Provider ID: N/A
3915 Mission Ave Ste 2
Oceanside, CA 92058

Sarah C. Kasai, OD

Provider ID: N/A
3915 Mission Ave Ste 2
Oceanside, CA 92058

Michael C. Morgan, OD

Provider ID: N/A
2110 S Coast Hwy Ste D
Oceanside, CA 92054

Kevin Guck, OD

Provider ID: N/A
3621 Vista Way
Oceanside, CA 92056

Ramin Tayani, MD

Provider ID: N/A
3621 Vista Way
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Peter J. Josen, MD

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3621 Vista Way
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3621 Vista Way
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Ioana M. Swikard, OD

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15706 Pomerado Rd Ste 103
Poway, CA 92064

Rachel Niskanen, OD

Provider ID: N/A
3915 Mission Ave Ste 2
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Walmart Optical 2245, NA

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705 College Blvd
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Patty L. Cheng, OD

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3405 Marron Rd
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Walmart Walmart Optical 2494, NA

Provider ID: N/A
2100 Vista Way
Oceanside, CA 92054

Farzaneh Moin, OD

Provider ID: N/A
3621 Vista Way
Oceanside, CA 92056

Robert A. Ring, OD

Provider ID: N/A
3621 Vista Way
Oceanside, CA 92056

Caroline Tran, OD

Provider ID: N/A
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Ashley K. Butler, OD

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3637 Vista Way
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Sharon F. Leong, OD

Provider ID: N/A
1755 Hacienda Dr
Vista, CA 92081

Connie Tan, OD

Provider ID: N/A
1930 Via Ctr
Vista, CA 92081

Thao P. Tran, OD

Provider ID: N/A
110 Civic Center Dr Ste 204
Vista, CA 92084

Heather Chen, MD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Ashley Tang, OD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Maulik S. Zaveri, MD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Yasmin A. Kouchak, OD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

David I. Bloomberg, OD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Jeffrey B. Morris, MD

Provider ID: N/A
1930 Via Ctr
Vista, CA 92081

Steven Giang, OD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Krista Gardner, OD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Randy L. Stone, OD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Bradley W. Greider, MD



Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Sherri S. Azimi, OD



Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

C3. Centros de enfermería especializada (SNF)



CAPISTRANO BEACH CARE CENTER

 35410 DEL REY
CAPISTRANO BEACH, CA
92624
 (949) 496-5786
Effective as of 01-AUG-14



CAPISTRANO BEACH EXTENDED CARE AND LIVING CTR

 35410 DEL REY
CAPISTRANO BEACH, CA
92624
 (949) 496-5786
Effective as of 01-JAN-12



BAYSHIRE CARLSBAD

 3140 EL CAMINO REAL
CARLSBAD, CA 92008
 (760) 720-9898
Effective as of 01-JUL-22



LAS VILLAS DE CARLSBAD OPERATIONS LLC

 1088 LAGUNA DR
CARLSBAD, CA 92008
 (760) 434-7116
Effective as of 01-FEB-13



SOUTH BAY POST ACUTE CARE

 553 F ST
CHULA VISTA, CA 91910
 (619) 426-8611
Effective as of 01-NOV-19



AVOCADO POST ACUTE

 510 E WASHINGTON AVE
EL CAJON, CA 92020
 (619) 440-1211
Effective as of 01-JAN-20



BRADLEY COURT SPECIAL CARE CENTER

 675 E BRADLEY AVE
EL CAJON, CA 92021
 (619) 448-6633
Effective as of 01-DEC-21



COTTONWOOD CANYON HEALTHCARE CENTER

 1391 E MADISON AVE
EL CAJON, CA 92021
 (619) 444-1107
Effective as of 01-OCT-11



COUNTRY HILLS POST ACUTE

 1580 BROADWAY
EL CAJON, CA 92021
 (619) 441-8745
Effective as of 15-NOV-20



MAGNOLIA POST ACUTE CARE

 635 S MAGNOLIA AVE
EL CAJON, CA 92020
 (616) 442-8826
Effective as of 01-NOV-19



MAGNOLIA SPECIAL CARE CENTER

 635 S MAGNOLIA AVE
EL CAJON, CA 92020
 (619) 442-8826
Effective as of 01-JAN-12

MAGNOLIA SPECIAL CARE CTR



 635 S MAGNOLIA AVE
EL CAJON, CA 92020
 (619) 442-8826
Effective as of 01-JAN-12

PARKSIDE HEALTH AND WELLNESS CENTER



 444 W LEXINGTON AVE
EL CAJON, CA 92020
 (619) 442-7744
Effective as of 01-NOV-19

PARKSIDE SPECIAL CARE



CENTER

 444 W LEXINGTON AVE
EL CAJON, CA 92020
 (619) 442-7744
Effective as of 01-JAN-12



SAN DIEGO POST ACUTE CENTER

 1201 S ORANGE AVE
EL CAJON, CA 92020
 (619) 441-1988
Effective as of 01-SEP-14



SOMERSET SUBACUTE AND CARE

 151 CLAYDELLE AVE
EL CAJON, CA 92020
 (619) 442-0245
Effective as of 01-NOV-19



VICTORIA POST ACUTE CARE

 654 S ANZA ST
EL CAJON, CA 92020
 (619) 440-5005
Effective as of 01-NOV-19



VICTORIA SPECIAL CARE CTR

 654 S ANZA ST
EL CAJON, CA 92020
 (619) 440-5005
Effective as of 01-JAN-12

VILLA LAS PALMAS HEALTHCARE CTR

 622 S ANZA ST
EL CAJON, CA 92020
 (619) 442-0544
Effective as of 01-OCT-11

AVIARA HEALTHCARE CENTER

 944 REGAL RD
ENCINITAS, CA 92024
 (760) 944-0331
Effective as of 01-OCT-11

ENCINITAS NURSING AND

C3. Centros de enfermería especializada (SNF)

REHAB CTR

900 SANTA FE DR
ENCINITAS, CA 92024
(760) 753-6423
Effective as of 01-DEC-12

ESCONDIDO CARE CENTER

421 E MISSION AVE
ESCONDIDO, CA 92025
(760) 747-0430
Effective as of 01-MAY-13

LIFE CARE CENTER OF ESCONDIDO

1980 FELICITA RD
ESCONDIDO, CA 92025
(760) 741-6109
Effective as of 01-JAN-12

OCEAN VIEW POST ACUTE

1980 FELICITA RD
ESCONDIDO, CA 92025
(760) 741-6109
Effective as of 01-SEP-24

PALOMAR HEIGHTS CARE CTR

1260 E OHIO AVE
ESCONDIDO, CA 92027
(760) 746-1100
Effective as of 01-JAN-12

PALOMAR VISTA HEALTHCARE CTR

201 N FIG ST
ESCONDIDO, CA 92025
(760) 746-0303
Effective as of 01-NOV-11

REDWOOD TERRACE

710 W 13TH AVE
ESCONDIDO, CA 92025
(760) 291-2736
Effective as of 01-NOV-17

VALLE VISTA POST ACUTE

1025 W 2ND AVE

ESCONDIDO, CA 92025
(760) 745-1842
Effective as of 01-DEC-12

FALLBROOK SKILLED NURSING

325 POTTER ST
FALLBROOK, CA 92028
(760) 728-2330
Effective as of 01-FEB-20

DEVONSHIRE CARE CENTER

1350 E DEVONSHIRE AVE
HEMET, CA 92544
(951) 925-2571
Effective as of 01-JAN-12

HEMET GLOBAL MEDICAL CENTER

1117 E DEVONSHIRE AVE
HEMET, CA 92543
(951) 652-2811
Effective as of 01-JAN-20

MANORCARE HEALTH SERVICES HEMET

1717 W STETSON AVE
HEMET, CA 92545
(951) 925-9171
Effective as of 01-JAN-12

RAMONA REHAB AND POST ACUTE CTR

485 W JOHNSTON AVE
HEMET, CA 92543
(951) 652-0011
Effective as of 15-APR-19

SAN JACINTO HEALTHCARE

275 N SAN JACINTO ST
HEMET, CA 92543
(951) 658-9441
Effective as of 01-MAR-13

THE VILLAGE HEALTHCARE

CENTER

2400 W ACACIA AVE
HEMET, CA 92545
(951) 766-5116
Effective as of 01-JAN-12

LA JOLLA NURSING AND REHAB CTR

2552 TORREY PINES RD
LA JOLLA, CA 92037
(858) 453-5810
Effective as of 01-DEC-12

THE COVE AT LA JOLLA

7160 FAY AVE
LA JOLLA, CA 92037
(858) 459-4361
Effective as of 01-NOV-19

ARBOR HILLS NURSING CENTER

7800 PARKWAY DR
LA MESA, CA 91942
(619) 460-2330
Effective as of 01-DEC-20

COMMUNITY CARE CENTER

8665 LA MESA BLVD
LA MESA, CA 91942
(619) 465-0702
Effective as of 01-APR-16

COUNTRY MANOR LA MESA HEALTHCARE CENTER

5696 LAKE MURRAY BLVD
LA MESA, CA 91942
(619) 460-7871
Effective as of 01-AUG-14

GROSSMONT POST ACUTE CARE

8787 CENTER DR
LA MESA, CA 91942
(619) 460-4444
Effective as of 01-NOV-19

C3. Centros de enfermería especializada (SNF)

LA MESA HEALTHCARE CTR

3780 MASSACHUSETTS AVE

LA MESA, CA 91941

(619) 465-1313

Effective as of 01-OCT-11

PARKWAY HILLS NURSING & REHAB

7760 PARKWAY DR
LA MESA, CA 91942

(619) 469-0124

Effective as of 01-APR-20

LAGUNA HILLS HEALTH AND REHAB CTR

24452 HEALTH CENTER DR
LAGUNA HILLS, CA 92653

(949) 837-8000

Effective as of 01-APR-18

PALM TERRACE HLTHCARE AND REHAB CTR

24962 CALLE ARAGON
LAGUNA WOODS, CA
92637

(949) 587-9000

Effective as of 01-NOV-11

FREEDOM VILLAGE HEALTHCARE CTR

23442 EL TORO RD
LAKE FOREST, CA 92630

(949) 472-8353

Effective as of 01-JAN-12

LAKE FOREST NURSING CENTER

25652 OLD TRABUCO RD
LAKE FOREST, CA 92630

(949) 380-9380

Effective as of 01-JAN-12

TRABUCO HILLS POST ACUTE

25652 OLD TRABUCO RD

LAKE FOREST, CA 92630

(949) 380-9380

Effective as of 01-SEP-24

BELLA VISTA HEALTH CENTER

7922 PALM ST
LEMON GROVE, CA 91945

(619) 644-1000

Effective as of 01-SEP-13

LEMON GROVE CARE AND REHAB CTR

8351 BROADWAY
LEMON GROVE, CA 91945

(619) 463-0294

Effective as of 01-NOV-11

MURRIETA HEALTH AND REHABILITATION CENTER

24100 MONROE AVE
MURRIETA, CA 92562

(951) 600-4640

Effective as of 01-JAN-12

CASTLE MANOR NURSING AND REHABILITATION CTR

541 S V AVE
NATIONAL CITY, CA 91950

(619) 791-7900

Effective as of 01-DEC-20

FRIENDSHIP MANOR NURSING AND REHABILITATION CTR

902 EUCLID AVE
NATIONAL CITY, CA 91950

(619) 791-7700

Effective as of 01-DEC-20

PARADISE VALLEY HEALTH CARE CENTER

2575 E 8TH ST
NATIONAL CITY, CA 91950

(619) 470-6700

Effective as of 01-OCT-20

WINDSOR GARDENS CONV CTR OF SAN DIEGO

220 E 24TH ST
NATIONAL CITY, CA 91950

(619) 474-6741

Effective as of 01-JAN-12

LA PALOMA HEALTHCARE CTR

3232 THUNDER DR
OCEANSIDE, CA 92056

(760) 724-2193

Effective as of 01-OCT-11

BOULDER CREEK POST ACUTE

12696 MONTE VISTA RD
POWAY, CA 92064

(858) 487-6242

Effective as of 01-APR-20

POWAY HEALTHCARE CENTER

15632 POMERADO RD
POWAY, CA 92064

(858) 485-5153

Effective as of 01-OCT-11

THE VILLAS AT POWAY

15615 POMERADO RD
POWAY, CA 92064

(858) 613-4545

Effective as of 01-JAN-12

VILLA MONTE VISTA

12696 MONTE VISTA RD
POWAY, CA 92064

(858) 487-6242

Effective as of 01-JAN-12

ARROYO VISTA NURSING CTR



3022 45TH ST
SAN DIEGO, CA 92105

(619) 283-5855



Effective as of 01-NOV-11

BRIGHTON PLACE SAN DIEGO



C3. Centros de enfermería especializada (SNF)

 1350 EUCLID AVE
SAN DIEGO, CA 92105
 (619) 263-2166
Effective as of 01-JAN-12



CARMEL MOUNTAIN REHAB AND HEALTHCARE CTR

 11895 AVENUE OF
INDUSTRY
SAN DIEGO, CA 92128
 (858) 673-0101
Effective as of 01-NOV-11



CLAIREMONT HEALTHCARE AND WELLNESS CENTER LLC

 8060 FROST ST
SAN DIEGO, CA 92123
 (858) 278-4750
Effective as of 01-NOV-17



GOLDEN HILL POST ACUTE

 1201 34TH ST
SAN DIEGO, CA 92102
 (619) 232-2946
Effective as of 01-MAY-23

HILLCREST HEIGHTS HEALTHCARE CENTER


 4033 6TH AVE
SAN DIEGO, CA 92103
 (619) 297-4086
Effective as of 01-MAY-24

JACOB HEALTH CARE CENTER LLC



 4075 54TH ST
SAN DIEGO, CA 92105
 (619) 582-5168
Effective as of 01-APR-16

KEARNY MESA CONVALESCENT AND NURSING HOME



 7675 FAMILY CIR
SAN DIEGO, CA 92111

 (858) 278-8121
Effective as of 01-DEC-20



MISSION HILLS POST ACUTE CARE

 3680 REYNARD WAY
SAN DIEGO, CA 92103
 (619) 297-4484
Effective as of 01-NOV-19



POINT LOMA CONVALESCENT HSP

 3232 DUKE ST
SAN DIEGO, CA 92110
 (619) 224-4141
Effective as of 01-JAN-12



REO VISTA HEALTHCARE CTR

 6061 BANBURY ST
SAN DIEGO, CA 92139
 (619) 475-2211
Effective as of 01-OCT-11



ST PAULS HEALTH CARE CENTER

 235 NUTMEG ST
SAN DIEGO, CA 92103
 (619) 677-3895
Effective as of 01-JAN-18

THE SHORES POST ACUTE


 2828 MEADOW LARK DR
SAN DIEGO, CA 92123
 (858) 277-6460
Effective as of 01-OCT-13

THE SPRINGS AT PACIFIC REGENT



 3884 NOBEL DR
SAN DIEGO, CA 92122
 (858) 625-8700
Effective as of 01-NOV-11

TORREY PINES SENIOR LIVING



 13101 HARTFIELD AVE

SAN DIEGO, CA 92130
 (858) 259-2222
Effective as of 01-JUN-16



UNIVERSITY CARE CENTER

 5602 UNIVERSITY AVE
SAN DIEGO, CA 92105
 (619) 583-1993
Effective as of 01-OCT-11



VILLA RANCHO BERNARDO CARE CENTER

 15720 BERNARDO CENTER
DR
SAN DIEGO, CA 92127
 (858) 672-3900
Effective as of 01-JAN-12



WINDSOR GARDENS CONV AND REHAB OF GOLDEN HILL

 1201 34TH ST
SAN DIEGO, CA 92102
 (619) 232-2946
Effective as of 01-JAN-12



BROOKDALE SAN JUAN CAPISTRANO

 31741 RANCHO VIEJO RD
SAN JUAN CAPISTRANO,
CA 92675
 (949) 248-8855
Effective as of 01-JUN-16

STANFORD COURT SKILLED NURSING AND REHAB CENTER

 8778 CUYAMACA ST
SANTEE, CA 92071
 (619) 449-5555
Effective as of 01-DEC-20

BRIGHTON PLACE EAST

 8625 LAMAR ST
SPRING VALLEY, CA 91977
 (619) 461-3222

C3. Centros de enfermería especializada (SNF)



Effective as of 01-JAN-12

BRIGHTON PLACE SPRING VALLEY

 9009 CAMPO RD
SPRING VALLEY, CA 91977
 (619) 460-2711

Effective as of 01-JAN-12

SUN CITY CONVALESCENT CENTER

 27600 ENCANTO DR
SUN CITY, CA 92586
 (951) 679-6858



Effective as of 01-JAN-12

TEMECULA HEALTHCARE CENTER

 44280 CAMPANULA WAY
TEMECULA, CA 92592
 (951) 466-0200

Effective as of 02-MAR-22

LA FUENTE POST ACUTE

 247 E BOBIER DR
VISTA, CA 92084
 (760) 945-3033



Effective as of 01-DEC-21

LIFE CARE CENTER OF VISTA

 304 N MELROSE DR
VISTA, CA 92083
 (760) 724-8222



Effective as of 01-JAN-12

RANCHO VISTA

 760 E BOBIER DR
VISTA, CA 92084
 (760) 941-1480



Effective as of 01-FEB-13

VISTA HEALTHCARE CENTER

 247 E BOBIER DR
VISTA, CA 92084
 (760) 945-3033

Effective as of 01-OCT-13

VISTA KNOLL SPECIALIZED CARE FACILITY

 2000 WESTWOOD RD
VISTA, CA 92083
 (760) 630-2273

Effective as of 01-NOV-11

VISTA VIEW POST ACUTE

 304 N MELROSE DR
VISTA, CA 92083
 (760) 724-8222

Effective as of 01-SEP-24

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

ALPINE

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

License Number: A97270

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH ALPINE
FAMILY MEDICINE

Website: www.mtnhealth.or
g

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

License Number: NP95006360

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH ALPINE
FAMILY MEDICINE

Website: www.mtnhealth.or
g

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

License Number: NP95005999

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH ALPINE
FAMILY MEDICINE

Website: www.mtnhealth.or
g

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

License Number: C172036

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH ALPINE
FAMILY MEDICINE

Website: www.mtnhealth.or
g

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

License Number: PA52347

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH ALPINE
FAMILY MEDICINE

Website: www.mtnhealth.or
g

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

License Number: PA20490

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619) 662-4100

License Number: DC28335

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE


 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE


 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103

 Phone: 619-445-6200

 After Hours Phone: 619-445-6200

License Number: 20A17296

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

License Number: 90000681

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE


 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

License Number: A158569

NPI: 1598122871


Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


YSIDRO HEALTH ALPINE
FAMILY MEDICINE


 Website: www.mtnhealth.org

**SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE**

Provider ID: 517802

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH ALPINE
FAMILY MEDICINE


 Website: www.mtnhealth.org

**SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE**

Provider ID: 517802

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

 Phone: (619) 445-6200

 After Hours Phone: (619)
445-6200

License Number: 20A17296

NPI: 1598122871


Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH ALPINE
FAMILY MEDICINE


 Website: www.mtnhealth.org

**SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE**

Provider ID: 517802

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: A97270

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH ALPINE
FAMILY MEDICINE


 Website: www.mtnhealth.org

**SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE**

Provider ID: 517802

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103


 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NP95005999

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 Website: www.mtnhealth.org

**SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE**

Provider ID: 517802

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: PA52347

NPI: 1598122871


Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 Website: www.mtnhealth.org

**SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE**

Provider ID: 517802



 1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

 Phone: 619-662-4100






 After Hours Phone:

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

619-662-4100
License Number: PA20490
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE
 Website: www.mtnhealth.org






SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802
 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: NP95006360
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE
 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE






Provider ID: 517802
 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: A158569
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE
 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE




Provider ID: 517802
 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: 90000681
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE
 Website: www.mtnhealth.org

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SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE


Provider ID: 517802
 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103
 Phone: 619-662-4100
Fax: 619-205-6305
 After Hours Phone: 619-662-4100
License Number: C172036
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE
 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE




Provider ID: 517802
 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103
 Phone: 619-662-4100
Fax: 619-205-6305
 After Hours Phone: 619-662-4100
License Number: DC28335
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE
 *Website: www.mtnhealth.org*

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE



Provider ID: 517802
 1620 ALPINE BLVD STE 110 ALPINE, CA 91901
 *Phone: (619) 662-4100*
Fax: (619) 320-3347
 *After Hours Phone: (619) 662-4100*
License Number: 090000681
NPI: 1770124315
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
 Site Languages(s) Spoken: Arabic, Norwegian, Spanish, Swedish



Cultural Competency: N
 *Hours: M-F 8:00AM-5:00PM*
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: IHP of Southern Cal-PHP
 *Website: www.mtnhealth.org*

CARLSBAD

TRUECARE

Provider ID: 480120
 1295 CARLSBAD VILLAGE


DR, STE 100
CARLSBAD, CA 92008-1950
 *Phone: (760) 736-6767*
 *After Hours Phone: (760) 736-6767*
License Number: A131678
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: TRUECARE
 *Website: N/A*

TRUECARE

Provider ID: 480120
 1295 CARLSBAD VILLAGE DR, STE 100
CARLSBAD, CA 92008-1950
 *Phone: (760) 736-6767*
 *After Hours Phone: (760) 736-6767*
License Number: A49273
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: TRUECARE
 *Website: N/A*

TRUECARE




Provider ID: 480120
 1295 CARLSBAD VILLAGE DR, STE 100
CARLSBAD, CA 92008-1950

 *Phone: (760) 736-6767*
 *After Hours Phone: (760) 736-6767*
License Number: A93248
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: TRUECARE
 *Website: N/A*

TRUECARE

Provider ID: 480120
 1295 CARLSBAD VILLAGE DR, STE 100
CARLSBAD, CA 92008-1950
 *Phone: (760) 736-6767*
 *After Hours Phone: (760) 736-6767*
License Number: G74757
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: TRUECARE
 *Website: N/A*

TRUECARE

Provider ID: 480120
 1295 CARLSBAD VILLAGE DR, STE 100
CARLSBAD, CA 92008-1950
 *Phone: (760) 736-6767*
 *After Hours Phone: (760)*

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

736-6767
License Number: PA53036
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE Website: N/A

TRUECARE

Provider ID: 480120
 1295 CARLSBAD VILLAGE DR, STE 100
CARLSBAD, CA 92008-1950
 Phone: (760) 736-6767
Fax: (760) 720-7204
 After Hours Phone: (760) 736-6767
License Number: 80000630
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE

Provider ID: 480120
 1295 CARLSBAD VILLAGE DR, STE 100
CARLSBAD, CA 92008-1950
 Phone: (760) 736-6767
Fax: (760) 720-7204
 After Hours Phone: (760)

736-6767
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE

Provider ID: 480120
 1295 CARLSBAD VILLAGE DR, STE 100
CARLSBAD, CA 92008-1950
 Phone: 760-736-6767
 After Hours Phone: 760-736-6767
License Number: A93248
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE

Provider ID: 480120
 1295 CARLSBAD VILLAGE DR, STE 100
CARLSBAD, CA 92008-1950
 Phone: 760-736-6767
 After Hours Phone: 760-736-6767
License Number: A49273
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE

Provider ID: 480120
 1295 CARLSBAD VILLAGE DR, STE 100
CARLSBAD, CA 92008-1950
 Phone: (760) 736-6767
Fax: (760) 720-7204
 After Hours Phone: (760) 736-6767
License Number: PA22667
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE

Provider ID: 480120
 1295 CARLSBAD VILLAGE DR, STE 100
CARLSBAD, CA 92008-1950
 Phone: 760-736-6767
 After Hours Phone: 760-736-6767
License Number: A131678
NPI: 1598122871
Accepting New Patients: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE <input type="checkbox"/> Website: N/A	American Sign Language (ASL): N N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE <input type="checkbox"/> Website: N/A	<input type="checkbox"/> Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE <input type="checkbox"/> Website: N/A
TRUECARE Provider ID: 480120 <input type="checkbox"/> 1295 CARLSBAD VILLAGE DR, STE 100 CARLSBAD, CA 92008-1950 <input type="checkbox"/> Phone: 760-736-6767 <input type="checkbox"/> After Hours Phone: 760-736-6767 License Number: PA53036 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE <input type="checkbox"/> Website: N/A	TRUECARE Provider ID: 480120 <input type="checkbox"/> 1295 CARLSBAD VILLAGE DR, STE 100 CARLSBAD, CA 92008-1950 <input type="checkbox"/> Phone: 760-736-6767 Fax: 760-720-7204 <input type="checkbox"/> After Hours Phone: 760-736-6767 License Number: 80000630 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE <input type="checkbox"/> Website: N/A	TRUECARE Provider ID: 480120 <input type="checkbox"/> 1295 CARLSBAD VILLAGE DR, STE 100 CARLSBAD, CA 92008-1950 <input type="checkbox"/> Phone: 760-736-6767 Fax: 760-720-7204 <input type="checkbox"/> After Hours Phone: 760-736-6767 License Number: PA22667 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE <input type="checkbox"/> Website: N/A
TRUECARE Provider ID: 480120 <input type="checkbox"/> 1295 CARLSBAD VILLAGE DR, STE 100 CARLSBAD, CA 92008-1950 <input type="checkbox"/> Phone: 760-736-6767 <input type="checkbox"/> After Hours Phone: 760-736-6767 License Number: G74757 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No	TRUECARE Provider ID: 480120 <input type="checkbox"/> 1295 CARLSBAD VILLAGE DR, STE 100 CARLSBAD, CA 92008-1950 <input type="checkbox"/> Phone: 760-736-6767 Fax: 760-720-7204 <input type="checkbox"/> After Hours Phone: 760-736-6767 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):	TRUECARE Provider ID: 480120 <input type="checkbox"/> 1295 CARLSBAD VILLAGE DR STE 100 CARLSBAD, CA 92008 <input type="checkbox"/> Phone: (760) 736-6767 Fax: (760) 736-8740 <input type="checkbox"/> After Hours Phone: (760) 736-6767 License Number: 080000630 NPI: 1245246917 Accepting New Patients: Yes Min/Max Age: 0\None <input type="checkbox"/> Site English Spoken: Y Cultural Competency: N








D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: N/A






CHULA VISTA

CHULA VISTA FAMILY HLTH CTR







Provider ID: 206355
 252 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: A116680
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA







91910-5736
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: 20A11087
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA








Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: 20A12555
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: 20A13225
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: NP95001964
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: NP95001492

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: NP95001705

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: NP23687

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: DPM4819

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org



CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal



D1. Clínicas de salud con calificación federal

91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: NM792
NPI: 1134155377


Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org


CHULA VISTA FAMILY HLTH CTR



Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: NP10943
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR


Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628



 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: NP95013978
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR



Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: PA21591
NPI: 1134155377



Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org



CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500

License Number: PT292823
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500

License Number: PT291706
NPI: 1134155377

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 252 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR


Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA

91910-2628

 Phone: 619-515-2500

Fax: 619-397-1161

 After Hours Phone:
619-515-2500

NPI: 1134155377

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500
 After Hours Phone:
619-515-2500

License Number: PT37189

NPI: 1134155377

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500
 After Hours Phone:
619-515-2500

License Number: PT294245

NPI: 1134155377


Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500
 After Hours Phone:
619-515-2500

License Number: PT295173

NPI: 1134155377

Accepting New Patients: Yes














































- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR</p> <p> <i>Website: www.fhcsd.org</i></p>	<p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p>	<p>91910-2628</p> <p> <i>Phone: (619) 515-2500</i></p> <p> <i>After Hours Phone: (619) 515-2500</i></p> <p><i>License Number: NP95001705</i></p> <p><i>NPI: 1134155377</i></p>
<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA 91910-2628</p> <p> <i>Phone: 619-515-2500</i></p> <p> <i>After Hours Phone: 619-515-2500</i></p> <p><i>License Number: PT293536</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p>	<p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR</p> <p> <i>Website: www.fhcsd.org</i></p>	<p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p>
<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA 91910-2628</p> <p> <i>Phone: (619) 515-2500</i></p> <p> <i>After Hours Phone: (619) 515-2500</i></p> <p><i>License Number: NP23687</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p>	<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA 91910-2628</p> <p> <i>Phone: (619) 515-2500</i></p> <p> <i>After Hours Phone: (619) 515-2500</i></p> <p><i>License Number: NP23687</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p>	<p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR</p> <p> <i>Website: www.fhcsd.org</i></p>
<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA 91910-2628</p> <p> <i>Phone: (619) 515-2500</i></p> <p> <i>After Hours Phone: (619) 515-2500</i></p> <p><i>License Number: NP95001964</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p>	<p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR</p> <p> <i>Website: www.fhcsd.org</i></p>	<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA 91910-2628</p> <p> <i>Phone: (619) 515-2500</i></p> <p> <i>After Hours Phone: (619) 515-2500</i></p> <p><i>License Number: NP95001964</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p>
<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA 91910-2628</p> <p> <i>Phone: (619) 515-2500</i></p> <p> <i>After Hours Phone: (619) 515-2500</i></p> <p><i>License Number: NP95001492</i></p> <p><i>NPI: 1134155377</i></p>	<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA</p>	<p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR</p> <p> <i>Website: www.fhcsd.org</i></p>


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

License Number: PT291706

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

License Number: PA21591

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

License Number: NP10943

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org



CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

91910-2628
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
License Number: NM792
NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500

License Number: DC26269

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500

License Number: DPM4819

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500

License Number: A177698

NPI: 1134155377

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes


- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR



 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA

91910-2628

 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500

License Number: A153344

NPI: 1134155377

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes












































- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR</p> <p> <i>Website: www.fhcsd.org</i></p>	<p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p>	<p>91910-2628</p> <p> <i>Phone: (619) 515-2500</i></p> <p> <i>After Hours Phone: (619) 515-2500</i></p> <p><i>License Number: A178499</i></p> <p><i>NPI: 1134155377</i></p>
<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA 91910-2628</p> <p> <i>Phone: (619) 515-2500</i></p> <p> <i>After Hours Phone: (619) 515-2500</i></p> <p><i>License Number: A73172</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p>	<p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR</p> <p> <i>Website: www.fhcsd.org</i></p>	<p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p>
<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA 91910-2628</p> <p> <i>Phone: (619) 515-2500</i></p> <p> <i>After Hours Phone: (619) 515-2500</i></p> <p><i>License Number: A68463</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p>	<p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR</p> <p> <i>Website: www.fhcsd.org</i></p>	<p> <i>Phone: (619) 515-2500</i></p> <p> <i>After Hours Phone: (619) 515-2500</i></p> <p><i>License Number: A68463</i></p> <p><i>NPI: 1134155377</i></p>
<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA 91910-2628</p> <p> <i>Phone: (619) 515-2500</i></p> <p><i>Fax: (619) 397-1161</i></p> <p> <i>After Hours Phone: (619) 515-2500</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p>	<p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR</p> <p> <i>Website: www.fhcsd.org</i></p>	<p> <i>Phone: (619) 515-2500</i></p> <p><i>After Hours Phone: (619) 515-2500</i></p> <p><i>NPI: 1134155377</i></p>
<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA 91910-2628</p> <p> <i>Phone: (619) 515-2500</i></p> <p> <i>After Hours Phone: (619) 515-2500</i></p> <p><i>License Number: A78355</i></p> <p><i>NPI: 1134155377</i></p>	<p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR</p> <p> <i>Website: www.fhcsd.org</i></p>	<p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p>
<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA</p>	<p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR</p> <p> <i>Website: www.fhcsd.org</i></p>	<p> <i>Phone: (619) 515-2500</i></p> <p><i>After Hours Phone: (619) 515-2500</i></p> <p><i>NPI: 1134155377</i></p>


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

License Number: PT37189

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):


N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

License Number: PT295173

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

License Number: PT294245

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

License Number: PT293536

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org







CHULA VISTA FAMILY HLTH CTR








Provider ID: 206355








 251 LANDIS AVE
CHULA VISTA, CA






D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

91910-2628
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
License Number: PT292823
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org



CHULA VISTA FAMILY HLTH CTR
Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone: 619-515-2500
License Number: A118095
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org



CHULA VISTA FAMILY HLTH CTR
Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone: 619-515-2500
License Number: A148014
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR
Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone: 619-515-2500
License Number: A119689
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR
Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone: 619-515-2500
License Number: 20A14919
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR
Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone: 619-515-2500
License Number: A108228
NPI: 1134155377

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org


CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA

91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes














































- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR</p> <p> <i>Website: www.fhcsd.org</i></p>	<p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p>	<p>91910-2628</p> <p> <i>Phone: 619-515-2500</i></p> <p> <i>After Hours Phone: 619-515-2500</i></p> <p><i>License Number: C174771</i></p> <p><i>NPI: 1134155377</i></p>
<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA 91910-2628</p> <p> <i>Phone: 619-515-2500</i></p> <p> <i>After Hours Phone: 619-515-2500</i></p> <p><i>License Number: A73172</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p>	<p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR</p> <p> <i>Website: www.fhcsd.org</i></p>	<p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p>
<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA 91910-2628</p> <p> <i>Phone: 619-515-2500</i></p> <p> <i>After Hours Phone: 619-515-2500</i></p> <p><i>License Number: A78355</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p>	<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA 91910-2628</p> <p> <i>Phone: 619-515-2500</i></p> <p> <i>After Hours Phone: 619-515-2500</i></p> <p><i>License Number: A78355</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p>	<p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR</p> <p> <i>Website: www.fhcsd.org</i></p>
<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA 91910-2628</p> <p> <i>Phone: 619-515-2500</i></p> <p> <i>After Hours Phone: 619-515-2500</i></p> <p><i>License Number: A177698</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p>	<p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR</p> <p> <i>Website: www.fhcsd.org</i></p>	<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA 91910-2628</p> <p> <i>Phone: 619-515-2500</i></p> <p> <i>After Hours Phone: 619-515-2500</i></p> <p><i>License Number: A177698</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p>
<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA 91910-2628</p> <p> <i>Phone: 619-515-2500</i></p> <p> <i>After Hours Phone: 619-515-2500</i></p> <p><i>License Number: DC26269</i></p> <p><i>NPI: 1134155377</i></p>	<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA</p>	<p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR</p> <p> <i>Website: www.fhcsd.org</i></p>


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: A153344

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org



CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

91910-2628
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
License Number: 20A14919
NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500

License Number: A119689

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500

License Number: A114181

NPI: 1134155377

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org


FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641

 352 L ST
CHULA VISTA, CA
91911-1208

 Phone: (619) 515-2325

Fax: (619) 420-0660

 After Hours Phone: (619)
515-2325

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-RICE
FAM HC


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641

 352 L ST
CHULA VISTA, CA
91911-1208

 Phone: 619-515-2325

 After Hours Phone:
619-515-2325

License Number: PA19306

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-RICE
FAM HC


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641

 352 L ST
CHULA VISTA, CA
91911-1208

 Phone: 619-515-2325

 After Hours Phone:
619-515-2325

License Number: A144995

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-RICE
FAM HC

 Website: www.fhcsd.org


FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641

 352 L ST
CHULA VISTA, CA
91911-1208

 Phone: (619) 515-2325

Fax: (619) 420-0660

 After Hours Phone: (619)
515-2325

License Number: 550002305

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-RICE
FAM HC


 Website: www.fhcsd.org

OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

 1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A123170

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: OTAY
FAMILY HEALTH CLINIC

 Website: www.ihpsocal.org

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823

Phone: (619) 205-1376

After Hours Phone: (619)
205-1376

License Number: A179598

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: OTAY
FAMILY HEALTH CLINIC

Website: www.ihpsocal.org

OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823

Phone: (619) 205-1360

After Hours Phone: (619)
205-1360

License Number: A95959

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: OTAY
FAMILY HEALTH CLINIC

Website: www.ihpsocal.org

OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823

Phone: (619) 662-4100

Fax: (619) 336-2323

After Hours Phone: (619)
662-4100

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: OTAY
FAMILY HEALTH CLINIC

Website: www.ihpsocal.org

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641

352 L ST
CHULA VISTA, CA
91911-1208

Phone: 619-515-2325

Fax: 619-420-0660

After Hours Phone:
619-515-2325

License Number: 550002305

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-RICE
FAM HC

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641

352 L ST
CHULA VISTA, CA
91911-1208

Phone: 619-515-2325

Fax: 619-420-0660

After Hours Phone:
619-515-2325

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-RICE
FAM HC

Website: www.fhcsd.org

CHULA VISTA PEDIATRICS

Provider ID: 482034

855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353

Phone: 619-662-4100

Fax: 619-662-4196

After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: CHULA VISTA PEDIATRICS


 *Website: www.ihpsocal.org*

CHULA VISTA PEDIATRICS

Provider ID: 482034

 *855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353*

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: C51110

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: CHULA VISTA PEDIATRICS

 *Website: www.ihpsocal.org*

CHULA VISTA PEDIATRICS

Provider ID: 482034

 *855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353*

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: A82912

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: CHULA VISTA PEDIATRICS


 *Website: www.ihpsocal.org*

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641

 *352 L ST
CHULA VISTA, CA
91911-1208*

 *Phone: (619) 515-2325*

 *After Hours Phone: (619)
515-2325*

License Number: A144995

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-RICE FAM HC


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641

 *352 L ST
CHULA VISTA, CA
91911-1208*

 *Phone: (619) 515-2325*

 *After Hours Phone: (619)
515-2325*

License Number: PA19306

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

*Cultural Competency: No
American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

 *Website: www.fhcsd.org*

CHULA VISTA PEDIATRICS

Provider ID: 482034

 *855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353*

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: A49591

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: CHULA VISTA PEDIATRICS


 *Website: www.ihpsocal.org*

CHULA VISTA PEDIATRICS

Provider ID: 482034

 *855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

License Number: C51110

NPI: 1598122871

Accepting New Patients: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: CHULA VISTA PEDIATRICS

 *Website: www.ihpsocal.org*

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: OTAY FAMILY HEALTH CLINIC


 *Website: www.ihpsocal.org*

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: OTAY FAMILY HEALTH CLINIC

 *Website: www.ihpsocal.org*

CHULA VISTA PEDIATRICS

Provider ID: 482034

 855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353

 *Phone: (619) 662-4100*

Fax: (619) 662-4196

 *After Hours Phone: (619) 662-4100*

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):
N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: CHULA VISTA PEDIATRICS

 *Website: www.ihpsocal.org*


OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

 1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823

 *Phone: 619-662-4100*

Fax: 619-336-2323

 *After Hours Phone: 619-662-4100*

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):
N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: OTAY FAMILY HEALTH CLINIC


 *Website: www.ihpsocal.org*

OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

 1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823

 *Phone: 619-205-1360*

 *After Hours Phone:*

619-205-1360

License Number: A95959

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):
N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: OTAY FAMILY HEALTH CLINIC

 *Website: www.ihpsocal.org*

OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

 1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823

 *Phone: 619-662-4100*

 *After Hours Phone: 619-662-4100*


License Number: A123170


NPI: 1598122871


Accepting New Patients: Yes

OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

 1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823

 *Phone: 619-205-1376*

 *After Hours Phone: 619-205-1376*


License Number: A179598


NPI: 1598122871


Accepting New Patients: Yes

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

License Number: DPM2930

NPI: 1598122871

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: G57243


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: G59670

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: DC33295

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: DDS102880


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A93785


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322




 678 3RD AVE
CHULA VISTA, CA

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal







91910-5736
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: A87650
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA







Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA 91910-5736
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: A80185
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322







 678 3RD AVE
CHULA VISTA, CA 91910-5736
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: A77936
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA



Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA 91910-5736
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: DC20760
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA

VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA 91910-5736
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: C55563
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA


Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA 91910-5736
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: DC31963
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A50477

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A69264

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A56153

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A66903

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT


PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: G80234

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: NP12112

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</p> <p> Website: www.ihpsocal.org</p> <p>SAN YSIDRO HEALTH CHULA VISTA</p> <p>Provider ID: 427322</p> <p> 678 3RD AVE CHULA VISTA, CA 91910-5736</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p>License Number: G72486</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</p> <p> Website: www.ihpsocal.org</p> <p>SAN YSIDRO HEALTH CHULA VISTA</p> <p>Provider ID: 427322</p> <p> 678 3RD AVE CHULA VISTA, CA 91910-5736</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p>License Number: G74728</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p>	<p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</p> <p> Website: www.ihpsocal.org</p> <p>SAN YSIDRO HEALTH CHULA VISTA</p> <p>Provider ID: 427322</p> <p> 678 3RD AVE CHULA VISTA, CA 91910-5736</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p>License Number: NP95015413</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</p> <p> Website: www.ihpsocal.org</p> <p>SAN YSIDRO HEALTH CHULA VISTA</p> <p>Provider ID: 427322</p> <p> 678 3RD AVE CHULA VISTA, CA 91910-5736</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p>License Number: PA54404</p> <p>NPI: 1598122871</p>	<p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</p> <p> Website: www.ihpsocal.org</p> <p>SAN YSIDRO HEALTH CHULA VISTA</p> <p>Provider ID: 427322</p> <p> 678 3RD AVE CHULA VISTA, CA 91910-5736</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p>License Number: SP18192</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</p> <p> Website: www.ihpsocal.org</p> <p>SAN YSIDRO HEALTH CHULA VISTA</p> <p>Provider ID: 427322</p> <p> 678 3RD AVE CHULA VISTA, CA 91910-5736</p> <p> Phone: (619) 662-4100</p> <p>Fax: (619) 425-1184</p> <p> After Hours Phone: (619)</p>
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D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

662-4100
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: 20A14025
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100

After Hours Phone:
619-662-4100
License Number: 20A13225
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: 20A12555
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA

91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: 20A19485
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA







Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: 20A11087
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA







Provider ID: 427322

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal







 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: 20A14025
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA






Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: 20A19485
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA







VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: A106103
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org





SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: 20A9060
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: A114893
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: A114600
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A120672

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A121861

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A123263

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A120584

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A115699

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A115598



NPI: 1598122871

Accepting New Patients: Yes





Site English Spoken: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA







Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
License Number: A47906
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
License Number: A41486
NPI: 1598122871

Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA






Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
License Number: A40473
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA



Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*

License Number: A40061
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
License Number: A177922
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 *Phone: (619) 662-4100*

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 After Hours Phone: (619)
662-4100

License Number: A164392

NPI: 1598122871


Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A163183

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org


SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA

91910-5736

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A162816

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A123492

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A123604

NPI: 1598122871


Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A138474

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH CHULA



D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

License Number: A127706

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER



Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

License Number: A134303

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER



Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

License Number: A138534

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER



Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

License Number: A159831

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN



YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: A40061

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER



Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: A164392

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N



 Accessibility: CONTACT

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal



PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA


Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A177922
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA




Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A163183
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):



N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA






Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A162816
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA


Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A56153
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes

Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A50477
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A47906
NPI: 1598122871

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A40473


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A41486

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A127706

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A123604

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A134303

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org






SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal







91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A159831
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA







Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A138534
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322







 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A138474
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA







Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A123492
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA

VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A123263
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA


Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A121861
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A120672

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A115699

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A115598

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A120584

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT


PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A114893

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 20A9060

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</p> <p> Website: www.ihpsocal.org</p> <p>SAN YSIDRO HEALTH CHULA VISTA</p> <p>Provider ID: 427322</p> <p> 678 3RD AVE CHULA VISTA, CA 91910-5736</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p> <p>License Number: A114600</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</p> <p> Website: www.ihpsocal.org</p> <p>SAN YSIDRO HEALTH CHULA VISTA</p> <p>Provider ID: 427322</p> <p> 678 3RD AVE CHULA VISTA, CA 91910-5736</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p> <p>License Number: A106103</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p>	<p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</p> <p> Website: www.ihpsocal.org</p> <p>SAN YSIDRO HEALTH CHULA VISTA</p> <p>Provider ID: 427322</p> <p> 678 3RD AVE CHULA VISTA, CA 91910-5736</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p> <p>License Number: A93785</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</p> <p> Website: www.ihpsocal.org</p> <p>SAN YSIDRO HEALTH CHULA VISTA</p> <p>Provider ID: 427322</p> <p> 678 3RD AVE CHULA VISTA, CA 91910-5736</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p> <p>License Number: A87650</p> <p>NPI: 1598122871</p>	<p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</p> <p> Website: www.ihpsocal.org</p> <p>SAN YSIDRO HEALTH CHULA VISTA</p> <p>Provider ID: 427322</p> <p> 678 3RD AVE CHULA VISTA, CA 91910-5736</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p> <p>License Number: DC20760</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</p> <p> Website: www.ihpsocal.org</p> <p>SAN YSIDRO HEALTH CHULA VISTA</p> <p>Provider ID: 427322</p> <p> 678 3RD AVE CHULA VISTA, CA 91910-5736</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p>
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D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

License Number: C55563
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A69264
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100

After Hours Phone:
619-662-4100
License Number: A66903
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A80185
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA

91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A77936
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA







Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: DC31963
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA






Provider ID: 427322

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal



 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: DPM2930
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA







Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: DC33295
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA


VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: DDS102880
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org






SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: G57243
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: G59670
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: G80234
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: G74728

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: G72486

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: PA54404

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NP12112

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NP95015413

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

CHULA VISTA PEDIATRICS

Provider ID: 482034

 855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A49591

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

American Sign Language (ASL): Cultural Competency: No

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA PEDIATRICS


 Website: www.ihpsocal.org

CHULA VISTA PEDIATRICS

Provider ID: 482034

 855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A82912

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA PEDIATRICS

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

Fax: 619-425-1184

 After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: SP18192

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 425-6941

 After Hours Phone: (619)
662-4100

NPI: 1326486861


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: N


 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641

 352 L ST
CHULA VISTA, CA 91911

 Phone: (619) 515-2325

Fax: (619) 420-0660

 After Hours Phone: (619)
515-2325


License Number: 550002305

NPI: 1083959464

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N


 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family
Health Centers of San Diego

 Website: www.fhcsd.org

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Email: chantalt@fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

Fax: (619) 397-1161

After Hours Phone: (619)
515-2500

NPI: 1346480837

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Cultural Competency: N

Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Family
Health Centers of San Diego

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS

Provider ID: 664445

280 E ST
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 426-2170

After Hours Phone: (619)
662-4100

License Number: 550002394

NPI: 1184135873

Accepting New Patients: Yes

Min/Max Age: 0\21

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: N

Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: www.syhealth.org

EL CAJON

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

165 S 1ST ST
EL CAJON, CA 92019-4795

Phone: 619-312-0348

After Hours Phone:
619-312-0348

License Number: G45632

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC

Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

165 S 1ST ST
EL CAJON, CA 92019-4795

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

License Number: 20A6433

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC INC

Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

165 S 1ST ST
EL CAJON, CA 92019-4795

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

License Number: A123929

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC

Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

INC

Provider ID: 185267

 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: (619) 312-0347
 After Hours Phone: (619)
312-0347

License Number: A68184

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: 619-269-1262
 After Hours Phone:
619-269-1262

License Number: C55979

NPI: 1609849074


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: 619-312-0347
 After Hours Phone:
619-312-0347

License Number: 20A6433

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: 619-312-0347
 After Hours Phone:
619-312-0347

License Number: 20A14222

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: (619) 312-0348
 After Hours Phone: (619)
312-0348

License Number: G45632

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: (619) 312-0347
 After Hours Phone: (619)
312-0347

License Number: PA58466

NPI: 1609849074


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: 619-312-0347
 After Hours Phone:
619-312-0347

License Number: PA58466
NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: 619-312-0347
 After Hours Phone:
619-312-0347

License Number: A123929
NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: 619-312-0347
 After Hours Phone:
619-312-0347

License Number: A68184
NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: (619) 312-0347
 After Hours Phone: (619)
312-0347

License Number: 20A14222
NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: (619) 269-1262
 After Hours Phone: (619)
269-1262

License Number: C55979
NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE
EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 After Hours Phone: (619)
515-2499


License Number: 20A13700
NPI: 1134155377

Accepting New Patients: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

 Site English Spoken: Yes


 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHASE AVENUE FAMILY HEALTH CTRS INC


 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE
EL CAJON, CA 92020-5710

 Phone: (619) 515-2499


 After Hours Phone: (619) 515-2499

License Number: A110192

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHASE AVENUE FAMILY HEALTH CTRS INC


 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE
EL CAJON, CA 92020-5710

 Phone: (619) 515-2499


 After Hours Phone: (619) 515-2499

License Number: A138887

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHASE AVENUE FAMILY HEALTH CTRS INC


 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE
EL CAJON, CA 92020-5710

 Phone: (619) 515-2499


 After Hours Phone: (619) 515-2499

License Number: A170055

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes


 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHASE AVENUE FAMILY HEALTH CTRS INC


 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE
EL CAJON, CA 92020-5710


 Phone: (619) 515-2499


 After Hours Phone: (619) 515-2499

License Number: NP95007253

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHASE AVENUE FAMILY HEALTH CTRS INC

 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE
EL CAJON, CA 92020-5710

 Phone: (619) 515-2499


Fax: (619) 593-7164

 After Hours Phone: (619) 515-2499

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: CHASE AVENUE FAMILY HEALTH CTRS INC
 *Website: www.fhcsd.org*

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE
EL CAJON, CA 92020-5710

 *Phone: (619) 515-2499*


 *After Hours Phone: (619) 515-2499*

License Number: DC33150

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

 *Site Languages(s) Spoken: Spanish*

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: CHASE AVENUE FAMILY HEALTH CTRS INC


 *Website: www.fhcsd.org*

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE
EL CAJON, CA 92020-5710

 *Phone: 619-515-2499*


 *After Hours Phone: 619-515-2499*

License Number: A110192

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

 *Site Languages(s) Spoken: Spanish*


Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: CHASE AVENUE FAMILY HEALTH CTRS INC


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: (619) 515-2498*

 *After Hours Phone: (619) 515-2498*

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: (619) 515-2498*

 *After Hours Phone: (619)*

515-2498

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: (619) 515-2498*

 *After Hours Phone: (619) 515-2498*

License Number: A175325

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *Website: www.fhcsd.org*



FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
License Number: A152462
NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498

License Number: A148014
NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498

License Number: A146838

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498

License Number: A147976

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498

License Number: DC33150

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498


License Number: DC33869

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

License Number: A83390

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

License Number: NP15444

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
License Number: NP95000205
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
License Number: NM1721
NPI: 1134155377
Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
License Number: G78814
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
License Number: DPM5661

NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
License Number: NP95009292
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: (619) 515-2498

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 After Hours Phone: (619) 515-2498

License Number: NP95013978

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-EL


CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2498

 After Hours Phone: (619) 515-2498

License Number: NP95007000

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-EL


CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2498

 After Hours Phone: (619) 515-2498

License Number: NP95009180

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-EL


CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2498

 After Hours Phone: (619) 515-2498

License Number: A127798

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-EL

CAJON


 Website: www.fhcsd.org


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2498

 After Hours Phone: (619) 515-2498

License Number: A118095

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-EL


CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2498

 After Hours Phone: (619) 515-2498

License Number: A116680

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-EL

CAJON

 Website: www.fhcsd.org


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

License Number: A144974

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

License Number: A134303

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL


CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

License Number: A138815

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes








Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>FAMILY HLTH CTR SAN DIEGO-EL CAJON</p> <p><i>Provider ID: 418340</i></p> <p> 525 E MAIN ST EL CAJON, CA 92020-4007</p> <p> <i>Phone: (619) 515-2498</i></p> <p> <i>After Hours Phone: (619) 515-2498</i></p> <p><i>License Number: A107093</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>FAMILY HLTH CTR SAN DIEGO-EL CAJON</p> <p><i>Provider ID: 418340</i></p> <p> 525 E MAIN ST EL CAJON, CA 92020-4007</p> <p> <i>Phone: (619) 515-2498</i></p> <p> <i>After Hours Phone: (619) 515-2498</i></p> <p><i>License Number: 20A7241</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p>	<p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>CHASE AVENUE FAMILY HEALTH CTRS INC</p> <p><i>Provider ID: 206354</i></p> <p> 1111 W CHASE AVE EL CAJON, CA 92020-5710</p> <p> <i>Phone: 619-515-2499</i></p> <p> <i>After Hours Phone: 619-515-2499</i></p> <p><i>License Number: NP95007253</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><input type="checkbox"/> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: CHASE AVENUE FAMILY HEALTH CTRS INC</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>CHASE AVENUE FAMILY HEALTH CTRS INC</p> <p><i>Provider ID: 206354</i></p> <p> 1111 W CHASE AVE EL CAJON, CA 92020-5710</p> <p> <i>Phone: 619-515-2499</i></p> <p><i>Fax: 619-593-7164</i></p> <p> <i>After Hours Phone:</i></p>	<p><i>619-515-2499</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><input type="checkbox"/> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: CHASE AVENUE FAMILY HEALTH CTRS INC</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>CHASE AVENUE FAMILY HEALTH CTRS INC</p> <p><i>Provider ID: 206354</i></p> <p> 1111 W CHASE AVE EL CAJON, CA 92020-5710</p> <p> <i>Phone: 619-515-2499</i></p> <p> <i>After Hours Phone: 619-515-2499</i></p> <p><i>License Number: A170055</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><input type="checkbox"/> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: CHASE AVENUE FAMILY HEALTH CTRS INC</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>CHASE AVENUE FAMILY HEALTH CTRS INC</p>
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D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Provider ID: 206354

 1111 W CHASE AVE
EL CAJON, CA 92020-5710

 Phone: 619-515-2499

 After Hours Phone:
619-515-2499

License Number: DC33150

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHASE
AVENUE FAMILY HEALTH
CTRS INC

 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE
EL CAJON, CA 92020-5710

 Phone: 619-515-2499

 After Hours Phone:
619-515-2499

License Number: 20A13700

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHASE


AVENUE FAMILY HEALTH
CTRS INC


 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE
EL CAJON, CA 92020-5710

 Phone: 619-515-2499

 After Hours Phone:
619-515-2499

License Number: A138887

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHASE
AVENUE FAMILY HEALTH
CTRS INC


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: PT293536

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes







Site English Spoken: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal




D1. Clínicas de salud con calificación federal

Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON







Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 *Phone: (619) 515-2498*
 *After Hours Phone: (619) 515-2498*
License Number: 20A13060
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON



Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 *Phone: (619) 515-2498*
 *After Hours Phone: (619) 515-2498*
License Number: 20A13745
NPI: 1134155377

Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501
 1032 BROADWAY
EL CAJON, CA 92021-7416
 *Phone: 619-795-5991*
 *After Hours Phone: 619-795-5991*
License Number: PA58466
NPI: 1609849074
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LA MAESTRA CHC EL CAJON BROADWAY
 *Website: www.lamaestra.org*

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501
 1032 BROADWAY
EL CAJON, CA 92021-7416
 *Phone: 619-795-5991*
Fax: 619-795-5992

 *After Hours Phone: 619-795-5991*
License Number: 550003567
NPI: 1609849074
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LA MAESTRA CHC EL CAJON BROADWAY
 *Website: www.lamaestra.org*

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501
 1032 BROADWAY
EL CAJON, CA 92021-7416
 *Phone: 619-795-5991*
Fax: 619-795-5992
 *After Hours Phone: 619-795-5991*
NPI: 1609849074
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LA MAESTRA CHC EL CAJON BROADWAY
 *Website: www.lamaestra.org*


FAMILY HLTH CTR SAN DIEGO-EL CAJON


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Provider ID: 418340

 526 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 526 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021-7416

 Phone: 619-795-5991

 After Hours Phone:
619-795-5991

License Number: PA21625

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LA
MAESTRA CHC EL CAJON
BROADWAY

 Website: www.lamaestra.org

CENTRO MEDICO EL CAJON

Provider ID: 478971

 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325

 Phone: 619-873-8940

 After Hours Phone:
619-873-8940

License Number: A113241

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CENTRO
MEDICO EL CAJON

 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325

 Phone: 619-873-8940

 After Hours Phone:
619-873-8940

License Number: A114674

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CENTRO
MEDICO EL CAJON

 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325

 Phone: 619-873-8940

 After Hours Phone:
619-873-8940

License Number: PA16673

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CENTRO
MEDICO EL CAJON

 Website: N/A


CENTRO MEDICO EL CAJON

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Provider ID: 478971

 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325

 Phone: 619-873-8940

 After Hours Phone:
619-873-8940


License Number: DPM1536

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CENTRO
MEDICO EL CAJON


 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325

 Phone: 619-873-8940

 After Hours Phone:
619-873-8940


License Number: 20A11733

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CENTRO
MEDICO EL CAJON


 Website: N/A


CENTRO MEDICO EL CAJON

Provider ID: 478971

 133 W MAIN ST STE 100

EL CAJON, CA 92020-3325

 Phone: 619-401-0404

 After Hours Phone:
619-401-0404

License Number: NP95001710

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CENTRO
MEDICO EL CAJON


 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325

 Phone: 619-401-0404

 After Hours Phone:
619-401-0404

License Number: G52812

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CENTRO
MEDICO EL CAJON

 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325

 Phone: (619) 873-8940

Fax: (619) 401-0522

 After Hours Phone: (619)
873-8940

License Number: 550000430

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: Yes

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CENTRO
MEDICO EL CAJON

 Website: N/A


CENTRO MEDICO EL CAJON

Provider ID: 478971

 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325

 Phone: (619) 873-8940

Fax: (619) 401-0522

 After Hours Phone: (619)
873-8940

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CENTRO
MEDICO EL CAJON

 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971



 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325

 Phone: (619) 873-8940






 After Hours Phone: (619)

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal




D1. Clínicas de salud con calificación federal



873-8940
License Number: PA16673
NPI: 1134144165
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CENTRO MEDICO EL CAJON
 Website: N/A

CENTRO MEDICO EL CAJON






Provider ID: 478971
 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
 Phone: 619-401-0404
 After Hours Phone:
619-401-0404
License Number: A98486
NPI: 1134144165
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CENTRO MEDICO EL CAJON
 Website: N/A

CENTRO MEDICO EL CAJON




Provider ID: 478971
 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
 Phone: 619-401-0404
 After Hours Phone:
619-401-0404
License Number: A151547



NPI: 1134144165
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CENTRO MEDICO EL CAJON
 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971
 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
 Phone: 619-401-0404
 After Hours Phone:
619-401-0404
License Number: A158569
NPI: 1134144165
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CENTRO MEDICO EL CAJON
 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971
 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
 Phone: 619-873-8940
Fax: 619-401-0522
 After Hours Phone:
619-873-8940
NPI: 1134144165
Accepting New Patients: Yes




Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CENTRO MEDICO EL CAJON
 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971
 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
 Phone: 619-873-8940
Fax: 619-401-0522
 After Hours Phone:
619-873-8940
License Number: 550000430
NPI: 1134144165
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: Yes
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CENTRO MEDICO EL CAJON
 Website: N/A

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: PT293536
NPI: 1134155377
Accepting New Patients: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes
N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: (619) 515-2498*

Fax: (619) 269-0191


 *After Hours Phone: (619) 515-2498*

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: (619) 515-2498*

Fax: (619) 269-0191

 *After Hours Phone: (619) 515-2498*

License Number: 20A19473

NPI: 1134155377

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: (619) 515-2498*

Fax: (619) 269-0191

 *After Hours Phone: (619) 515-2498*


License Number: 550003553

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON


 *Website: www.fhcsd.org*


FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST

EL CAJON, CA 92020-4007

 *Phone: (619) 515-2498*

 *After Hours Phone: (619) 515-2498*

License Number: NP95021154

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: (619) 515-2498*

 *After Hours Phone: (619) 515-2498*

License Number: PA20396

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *Website: www.fhcsd.org*


FAMILY HLTH CTR SAN DIEGO-EL CAJON


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

License Number: PA23258


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

License Number: PT292482

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

License Number: RN810863

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

License Number: PT295173

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: 20A13060


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


HLTH CTR SAN DIEGO-EL CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: (619) 515-2499

 After Hours Phone: (619)
515-2499

License Number: RN428876

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-EL


CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: 20A13745

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-EL


CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-EL


CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: 20A7241

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-EL


CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A107093

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-EL


CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498


License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007


 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007


 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A116680


NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498


License Number: A83390

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007


 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498

License Number: A175325

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498

License Number: A178499

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A147976

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A146838

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-EL CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A152462

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A127798

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: 619-515-2498*

 *After Hours Phone: 619-515-2498*

License Number: A134303


NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: 619-515-2498*

 *After Hours Phone: 619-515-2498*

License Number: A138815

NPI: 1134155377

Accepting New Patients: Yes


 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: 619-515-2498*

 *After Hours Phone: 619-515-2498*

License Number: A144974

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: 619-515-2499*

 *After Hours Phone: 619-515-2499*

License Number: RN428876

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON


 *Website: www.fhcsd.org*

CENTRO MEDICO EL CAJON

Provider ID: 478971

 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325

 *Phone: (619) 401-0404*

 *After Hours Phone: (619) 401-0404*

License Number: A151547

NPI: 1134144165

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: CENTRO MEDICO EL CAJON

 *Website: N/A*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: 619-515-2498*

Fax: 619-269-0191

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 After Hours Phone:
619-515-2498

License Number: 550003553

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-EL


CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

Fax: 619-269-0191

 After Hours Phone:
619-515-2498

License Number: 20A19473

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-EL


CAJON

 Website: www.fhcsd.org


FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

Fax: 619-269-0191

 After Hours Phone:
619-515-2498

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-EL


CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:

619-515-2498

License Number: RN810863

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-EL


CAJON


 Website: www.fhcsd.org

CENTRO MEDICO EL CAJON

Provider ID: 478971

 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325

 Phone: (619) 873-8940

 After Hours Phone: (619)
873-8940

License Number: 20A11733

NPI: 1134144165


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CENTRO


MEDICO EL CAJON


 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325

 Phone: (619) 873-8940

 After Hours Phone: (619)
873-8940

License Number: A113241

NPI: 1134144165


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CENTRO

MEDICO EL CAJON




 Website: N/A


CENTRO MEDICO EL CAJON



Provider ID: 478971

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
 Phone: (619) 873-8940
 After Hours Phone: (619)
873-8940


License Number: DPM1536
NPI: 1134144165
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CENTRO
MEDICO EL CAJON
 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971


 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
 Phone: (619) 873-8940
 After Hours Phone: (619)
873-8940



License Number: A114674
NPI: 1134144165
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CENTRO
MEDICO EL CAJON
 Website: N/A



CENTRO MEDICO EL CAJON

Provider ID: 478971

 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325

 Phone: (619) 401-0404
 After Hours Phone: (619)
401-0404
License Number: NP95001710
NPI: 1134144165


Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CENTRO
MEDICO EL CAJON
 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971




 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
 Phone: (619) 401-0404
 After Hours Phone: (619)
401-0404




License Number: G52812
NPI: 1134144165
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CENTRO
MEDICO EL CAJON
 Website: N/A

CENTRO MEDICO EL CAJON




Provider ID: 478971


 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
 Phone: (619) 401-0404
 After Hours Phone: (619)



401-0404
License Number: A158569
NPI: 1134144165
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CENTRO
MEDICO EL CAJON
 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
 Phone: (619) 401-0404
 After Hours Phone: (619)
401-0404

License Number: A98486
NPI: 1134144165
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CENTRO
MEDICO EL CAJON
 Website: N/A

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

License Number: NP95021154
NPI: 1134155377


Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498


 After Hours Phone:
619-515-2498

License Number: NP95009292
NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498


 After Hours Phone:
619-515-2498

License Number: NP95009180
NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: PA23258
NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498


 After Hours Phone:
619-515-2498

License Number: NP95013978
NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: PA20396
NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: PT292482

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498


License Number: PT295173

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: NP15444

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: NM1721

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498


License Number: NP95007000

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: NP95000205

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: 619-515-2498*

 *After Hours Phone: 619-515-2498*

License Number: DC33150

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: 619-515-2498*

 *After Hours Phone: 619-515-2498*

License Number: DC33869

NPI: 1134155377


Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: 619-515-2498*

 *After Hours Phone: 619-515-2498*

License Number: DPM5661

NPI: 1134155377


Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: 619-515-2498*

 *After Hours Phone: 619-515-2498*

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON


 *Website: www.fhcsd.org*

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021-7416

 *Phone: (619) 795-5991*

 *After Hours Phone: (619) 795-5991*

License Number: 20A14222

NPI: 1609849074

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LA MAESTRA CHC EL CAJON BROADWAY


 *Website: www.lamaestra.org*

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021-7416

 *Phone: (619) 795-5991*

 *After Hours Phone: (619) 795-5991*

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

License Number: 20A6433

NPI: 1609849074


Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA CHC EL CAJON

BROADWAY


 Website: www.lamaestra.org


LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY

EL CAJON, CA 92021-7416

 Phone: (619) 795-5991

 After Hours Phone: (619) 795-5991

License Number: A123929

NPI: 1609849074

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA CHC EL CAJON

BROADWAY

 Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501



1032 BROADWAY

EL CAJON, CA 92021-7416



Phone: (619) 795-5991



After Hours Phone: (619) 795-5991

License Number: A160760

NPI: 1609849074

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA CHC EL CAJON

BROADWAY

 Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY

EL CAJON, CA 92021-7416



Phone: (619) 795-5991



After Hours Phone: (619) 795-5991

License Number: G50634

NPI: 1609849074

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA CHC EL CAJON

BROADWAY

 Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY

EL CAJON, CA 92021-7416



Phone: (619) 795-5991



After Hours Phone: (619) 795-5991

License Number: PA21625

NPI: 1609849074

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA CHC EL CAJON

BROADWAY

 Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY

EL CAJON, CA 92021-7416



Phone: (619) 795-5991



After Hours Phone: (619) 795-5991

License Number: PA58466

NPI: 1609849074

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


MAESTRA CHC EL CAJON
BROADWAY

 Website: www.lamaestra.org


**LA MAESTRA CHC EL CAJON
BROADWAY**

Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021-7416

 Phone: (619) 795-5991

Fax: (619) 795-5992

 After Hours Phone: (619)
795-5991

NPI: 1609849074

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA


MAESTRA CHC EL CAJON
BROADWAY

 Website: www.lamaestra.org

**LA MAESTRA CHC EL CAJON
BROADWAY**

Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021-7416

 Phone: (619) 795-5991

Fax: (619) 795-5992

 After Hours Phone: (619)
795-5991

License Number: 550003567

NPI: 1609849074

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): NPI: 1609849074

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA


MAESTRA CHC EL CAJON
BROADWAY

 Website: www.lamaestra.org

**LA MAESTRA CHC EL CAJON
BROADWAY**

Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021-7416

 Phone: 619-795-5991

 After Hours Phone:
619-795-5991

License Number: 20A14222

NPI: 1609849074

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA


MAESTRA CHC EL CAJON
BROADWAY


 Website: www.lamaestra.org

**LA MAESTRA CHC EL CAJON
BROADWAY**

Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021-7416

 Phone: 619-795-5991


 After Hours Phone:
619-795-5991

License Number: 20A6433

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA


MAESTRA CHC EL CAJON
BROADWAY

 Website: www.lamaestra.org

**LA MAESTRA CHC EL CAJON
BROADWAY**

Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021-7416

 Phone: 619-795-5991

 After Hours Phone:
619-795-5991


License Number: A123929

NPI: 1609849074

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA CHC EL CAJON
BROADWAY

 Website: www.lamaestra.org






**LA MAESTRA CHC EL CAJON
BROADWAY**

Provider ID: 418501


 1032 BROADWAY

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal








D1. Clínicas de salud con calificación federal

EL CAJON, CA 92021-7416
 Phone: 619-795-5991
 After Hours Phone:
619-795-5991
License Number: A160760
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA
MAESTRA CHC EL CAJON
BROADWAY
 Website: www.lamaestra.org







LA MAESTRA CHC EL CAJON BROADWAY


Provider ID: 418501
 1032 BROADWAY
EL CAJON, CA 92021-7416
 Phone: 619-795-5991
 After Hours Phone:
619-795-5991
License Number: G50634
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA
MAESTRA CHC EL CAJON
BROADWAY
 Website: www.lamaestra.org

SAN YSIDRO HEALTH EL CAJON








Provider ID: 569910
 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON
 Website: N/A

SAN YSIDRO HEALTH EL CAJON


Provider ID: 569910
 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: 20A10964
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN

YSIDRO HEALTH EL CAJON
 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910
 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: 550002514
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON
 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910
 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: A101773
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):



D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON</p> <p> Website: N/A</p>	<p> Site Languages(s) Spoken: Spanish, Tagalog</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON</p> <p> Website: N/A</p>	<p>License Number: A131365</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p> <p> Site Languages(s) Spoken: Spanish, Tagalog</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON</p> <p> Website: N/A</p>
<p>SAN YSIDRO HEALTH EL CAJON</p> <p>Provider ID: 569910</p> <p> 875 EL CAJON BLVD EL CAJON, CA 92020-5714</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p>License Number: A101888</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p> <p> Site Languages(s) Spoken: Spanish, Tagalog</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON</p> <p> Website: N/A</p>	<p>SAN YSIDRO HEALTH EL CAJON</p> <p>Provider ID: 569910</p> <p> 875 EL CAJON BLVD EL CAJON, CA 92020-5714</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p>License Number: A127706</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p> <p> Site Languages(s) Spoken: Spanish, Tagalog</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON</p> <p> Website: N/A</p>	<p>SAN YSIDRO HEALTH EL CAJON</p> <p>Provider ID: 569910</p> <p> 875 EL CAJON BLVD EL CAJON, CA 92020-5714</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p>License Number: A134995</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p> <p> Site Languages(s) Spoken: Spanish, Tagalog</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON</p> <p> Website: N/A</p>
<p>SAN YSIDRO HEALTH EL CAJON</p> <p>Provider ID: 569910</p> <p> 875 EL CAJON BLVD EL CAJON, CA 92020-5714</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p>License Number: A120584</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p>	<p>SAN YSIDRO HEALTH EL CAJON</p> <p>Provider ID: 569910</p> <p> 875 EL CAJON BLVD EL CAJON, CA 92020-5714</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p>	<p>SAN YSIDRO HEALTH EL CAJON</p> <p>Provider ID: 569910</p> <p> 875 EL CAJON BLVD</p>

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

EL CAJON, CA 92020-5714
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

License Number: A40473

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

License Number: A47906

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N



 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

License Number: A79338

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

License Number: A87650

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No




American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON
 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

License Number: A96002

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

License Number: C144411

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON


 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

License Number: G43179

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON


 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

License Number: NP95009329

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON


 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

License Number: NP95012943

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

662-4100

License Number: PT40025

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON


 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

License Number: PT42665

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: 20A10964

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: 550002514

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: A101773

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: A101888

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: A120584

NPI: 1598122871

Accepting New Patients: Yes



Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON
 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: A127706

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: A131365

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: A134995

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:

619-662-4100
License Number: A40473
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: A47906


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: A79338

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: A87650

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: A96002

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: C144411

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: G43179

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: NP95009329

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


Site Languages(s) Spoken:
Spanish, Tagalog

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON


 *Website: N/A*

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 *Phone: 619-662-4100*

 *After Hours Phone:*
619-662-4100

License Number: NP95012943

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON


 *Website: N/A*

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 *Phone: 619-662-4100*

 *After Hours Phone:*
619-662-4100

License Number: PT40025

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON


 *Website: N/A*

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 *Phone: 619-662-4100*

 *After Hours Phone:*
619-662-4100

License Number: PT42665

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 *Website: N/A*

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020

 *Phone: (619) 662-4100*

Fax: (619) 785-3356

 *After Hours Phone: (619)*
662-4100

License Number: 550002514


NPI: 1568845741

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Arabic, Farsi,
Russian, Latin

Cultural Competency: N

 *Hours: M-F*
8:00AM-5:00PM

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP of Southern Cal-PHP

 *Website: www.syhealth.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020

 *Phone: (619) 515-2498*

Fax: (619) 269-0191

 *After Hours Phone: (619)*
515-2498


License Number: 550003553

NPI: 1932561198

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Y



Cultural Competency: N

 *Hours: M-F*
8:30AM-5:30PM
SA 8:30AM-5:30PM




American Sign Language (ASL): N

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal



D1. Clínicas de salud con calificación federal

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: Family Health Centers of San Diego
 *Website: www.fhcsd.org*
Email: janellek@fhcsd.org


CENTRO MEDICO EL CAJON

Provider ID: 478971
 133 W MAIN ST STE 100
EL CAJON, CA 92020
 *Phone: (619) 873-8940*
Fax: (619) 401-0522
 *After Hours Phone: (619) 873-8940*
License Number: 550000430
NPI: 1154480069


Accepting New Patients: Yes
Min/Max Age: 0\None

 *Site English Spoken: Y*
Cultural Competency: N
 *Hours: SU 8:00AM-8:00PM*
M-F 8:00AM-8:00PM

American Sign Language (ASL): N




 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION

 *Website: N/A*
Email:

iselaocha@borregohealth.org


LA MAESTRA CHC-REA AVE

Provider ID: 664824
 181 REA AVE
EL CAJON, CA 92020
 *Phone: (619) 312-0347*
Fax: (619) 510-4649
 *After Hours Phone: (619) 312-0347*

License Number: 090000378
NPI: 1609849074

Accepting New Patients: Yes
Min/Max Age: 0\None

 *Site English Spoken: Y*
Cultural Competency: N

 *Hours: M-F*
8:30AM-5:30PM



American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: La Maestra Family Clinic

 *Website: www.lamaestra.org*

LA MAESTRA CHC EL CAJON BROADWAY


Provider ID: 418501
 1032 BROADWAY
EL CAJON, CA 92021
 *Phone: (619) 795-5991*
Fax: (619) 795-5992

 *After Hours Phone: (619) 795-5991*

License Number: 550003567
NPI: 1134590086

Accepting New Patients: Yes
Min/Max Age: 0\None


 *Site English Spoken: Y*
Cultural Competency: N

 *Hours: M-F*
8:30AM-5:30PM



American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: La Maestra Family Clinic



 *Website: www.lamaestra.org*

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354
 1111 W CHASE AVE
EL CAJON, CA 92020
 *Phone: (619) 515-2499*
Fax: (619) 593-7164

 *After Hours Phone: (619) 515-2499*
NPI: 1104861681


Accepting New Patients: Yes
Min/Max Age: 0\None

 *Site English Spoken: Y*
 *Site Language(s) Spoken: Spanish*



Cultural Competency: N
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: Family Health Centers of San Diego

 *Website: www.fhcsd.org*
Email: jaquelinca@fhcsd.org


LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267
 165 S 1ST ST
EL CAJON, CA 92019
 *Phone: (619) 312-0347*
Fax: (619) 749-5480

 *After Hours Phone: (619) 312-0347*
NPI: 1336353721

Accepting New Patients: Yes
Min/Max Age: 0\None

 *Site English Spoken: Y*
Cultural Competency: N

 *Hours: M-TU*
8:00AM-5:00PM

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

TH-F 8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: La Maestra Family Clinic
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org

760-753-7842
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

ENCINITAS

TRUECARE

Provider ID: 480243
1130 2ND ST
ENCINITAS, CA
92024-5008
Phone: 760-753-7842
After Hours Phone: 760-753-7842
License Number: C54157
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

TRUECARE

Provider ID: 480243
1130 2ND ST
ENCINITAS, CA
92024-5008
Phone: 760-753-7842
Fax: 760-736-8740
After Hours Phone:

TRUECARE

Provider ID: 480243
1130 2ND ST
ENCINITAS, CA
92024-5008
Phone: 760-753-7842
Fax: 760-736-8740
After Hours Phone: 760-753-7842
License Number: 80000638
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

TRUECARE

Provider ID: 480243
1130 2ND ST
ENCINITAS, CA
92024-5008
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: PA19437

TRUECARE

Provider ID: 480243
1130 2ND ST
ENCINITAS, CA
92024-5008
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: PA22667
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

TRUECARE

Provider ID: 480243
1130 2ND ST
ENCINITAS, CA
92024-5008
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: DC29074
NPI: 1598122871
Accepting New Patients: Yes


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal



Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE Website: N/A	American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE Website: N/A	Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE Medical Group/IPA: TRUECARE Website: N/A
TRUECARE Provider ID: 480243 1130 2ND ST ENCINITAS, CA 92024-5008 Phone: 760-736-6767 After Hours Phone: 760-736-6767 License Number: NP21368 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE Website: N/A	TRUECARE Provider ID: 480243 1130 2ND ST ENCINITAS, CA 92024-5008 Phone: 760-753-7842 After Hours Phone: 760-753-7842 License Number: A116562 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE Website: N/A	TRUECARE Provider ID: 480243 1130 2ND ST ENCINITAS, CA 92024-5008 Phone: (760) 753-7842 Fax: (760) 736-8740 After Hours Phone: (760) 753-7842 License Number: 80000638 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE Website: N/A
TRUECARE Provider ID: 480243 1130 2ND ST ENCINITAS, CA 92024-5008 Phone: 760-753-7842 After Hours Phone: 760-753-7842 License Number: A103940 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No	TRUECARE Provider ID: 480243 1130 2ND ST ENCINITAS, CA 92024-5008 Phone: 760-736-6767 After Hours Phone: 760-736-6767 License Number: 20A17306 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N	TRUECARE Provider ID: 480243 1130 2ND ST ENCINITAS, CA 92024-5008 Phone: (760) 753-7842 After Hours Phone: (760) 753-7842 License Number: C54157 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal







D1. Clínicas de salud con calificación federal


PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE




Provider ID: 480243
 1130 2ND ST
ENCINITAS, CA
92024-5008
 Phone: (760) 753-7842
Fax: (760) 736-8740
 After Hours Phone: (760)
753-7842
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE







Provider ID: 480243
 1130 2ND ST
ENCINITAS, CA
92024-5008
 Phone: (760) 753-7842
 After Hours Phone: (760)
753-7842
License Number: A116562
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

 Website: N/A







TRUECARE

Provider ID: 480243
 1130 2ND ST
ENCINITAS, CA
92024-5008
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
License Number: 20A17306
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A







TRUECARE

Provider ID: 480243
 1130 2ND ST
ENCINITAS, CA
92024-5008
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
License Number: DC29074
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE

Provider ID: 480243
 1130 2ND ST
ENCINITAS, CA
92024-5008
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
License Number: NP21368
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE






Provider ID: 480243
 1130 2ND ST
ENCINITAS, CA
92024-5008
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
License Number: PA19437
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE







Provider ID: 480243

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 1130 2ND ST
ENCINITAS, CA
92024-5008
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
License Number: PA22667
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A







TRUECARE

Provider ID: 480243
 1130 2ND ST
ENCINITAS, CA
92024-5008
 Phone: (760) 753-7842
 After Hours Phone: (760)
753-7842
License Number: A103940
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A






ESCONDIDO

SAN YSIDRO HEALTH ESCONDIDO FAMILY







MEDICINE

Provider ID: 588941
 704 E GRAND AVE
ESCONDIDO, CA
92025-4405
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: C171064
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH ESCONDIDO
FAMILY MEDICINE
 Website: N/A





SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941
 704 E GRAND AVE
ESCONDIDO, CA
92025-4405
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: G58033
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN

YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

 Website: N/A
**SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE**
Provider ID: 588941
 704 E GRAND AVE
ESCONDIDO, CA
92025-4405
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: NP95005999
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH ESCONDIDO
FAMILY MEDICINE
 Website: N/A

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE







Provider ID: 588941
 704 E GRAND AVE
ESCONDIDO, CA
92025-4405
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: NP95006360
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal






Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE
 *Website: N/A*

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE







Provider ID: 588941
 704 E GRAND AVE
ESCONDIDO, CA
92025-4405
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
License Number: PA20490
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE
 *Website: N/A*

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941
 704 E GRAND AVE
ESCONDIDO, CA
92025-4405







 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
License Number: PA52347
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE
 *Website: N/A*

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE






Provider ID: 588941
 704 E GRAND AVE
ESCONDIDO, CA
92025-4405
 *Phone: (619) 662-4100*
Fax: (619) 662-7952
 *After Hours Phone: (619) 662-4100*
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE
 *Website: N/A*

SAN YSIDRO HEALTH

ESCONDIDO FAMILY MEDICINE

Provider ID: 588941
 704 E GRAND AVE
ESCONDIDO, CA
92025-4405
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: C171064
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE
 *Website: N/A*

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941
 704 E GRAND AVE
ESCONDIDO, CA
92025-4405
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: G58033
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

*Medical Group/IPA: SAN
YSIDRO HEALTH ESCONDIDO
FAMILY MEDICINE
Website: N/A*

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

*Provider ID: 588941
704 E GRAND AVE
ESCONDIDO, CA
92025-4405
Phone: 619-662-4100
After Hours Phone:
619-662-4100
License Number: NP95005999
NPI: 1598122871*

*Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER*

*Medical Group/IPA: SAN
YSIDRO HEALTH ESCONDIDO
FAMILY MEDICINE
Website: N/A*

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

*Provider ID: 588941
704 E GRAND AVE
ESCONDIDO, CA
92025-4405
Phone: 619-662-4100
After Hours Phone:
619-662-4100
License Number: NP95006360
NPI: 1598122871*

Accepting New Patients: Yes

*Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N*

*Accessibility: CONTACT
PROVIDER*

*Medical Group/IPA: SAN
YSIDRO HEALTH ESCONDIDO
FAMILY MEDICINE
Website: N/A*

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

*Provider ID: 588941
704 E GRAND AVE
ESCONDIDO, CA
92025-4405
Phone: 619-662-4100
After Hours Phone:
619-662-4100*

*License Number: PA20490
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N*

*Accessibility: CONTACT
PROVIDER*

*Medical Group/IPA: SAN
YSIDRO HEALTH ESCONDIDO
FAMILY MEDICINE
Website: N/A*

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

*Provider ID: 588941
704 E GRAND AVE
ESCONDIDO, CA*

*92025-4405
Phone: 619-662-4100
After Hours Phone:
619-662-4100
License Number: PA52347
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N*

*Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH ESCONDIDO
FAMILY MEDICINE
Website: N/A*

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

*Provider ID: 588941
704 E GRAND AVE
ESCONDIDO, CA
92025-4405
Phone: 619-662-4100
Fax: 619-662-7952*

*After Hours Phone:
619-662-4100
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N*

*Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH ESCONDIDO
FAMILY MEDICINE
Website: N/A*


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal



D1. Clínicas de salud con calificación federal

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100

License Number: 20A14292

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO



 Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100

License Number: A107557

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO



 Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100

License Number: A109655

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE ESCONDIDO



 Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100

License Number: A119661

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE ESCONDIDO



 Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100

License Number: A120771

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE ESCONDIDO



 Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100

License Number: A139490

NPI: 1598122871

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

License Number: A152372

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

License Number: A159727

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

License Number: A45413

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

License Number: A61751

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

License Number: A78116

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

License Number: A82173

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

License Number: A94128

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

License Number: DC12036

NPI: 1598122871


Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

License Number: DC28605

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

License Number: G61829

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO

 Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002




 Phone: (760) 520-8100

Fax: (360) 466-2745

 After Hours Phone: (760)

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal







520-8100
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO







Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: (760) 520-8100
Fax: (360) 466-2745
 After Hours Phone: (760)
520-8100
License Number: 80000397
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO







Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: 20A14292
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org






NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: A107557
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: A109655
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO




Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: A119661
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: A120771




NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):



N
 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org




NEIGHBORHOOD HEALTHCARE ESCONDIDO


Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100

License Number: A139490
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL): NPI: 1598122871
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100




License Number: A152372
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org




NEIGHBORHOOD HEALTHCARE ESCONDIDO


Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100


License Number: A159727

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO


Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100

License Number: A45413
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org







NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA







D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: A61751
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org







NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: A78116
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org





NEIGHBORHOOD

HEALTHCARE ESCONDIDO
Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: A82173
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: A94128
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD

HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: DC12036
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: DC28605
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 *Website: www.ihpsocal.org*


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 *Phone: 760-520-8100*

 *After Hours Phone:*
760-520-8100

License Number: G61829

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): *License Number: 80000397*
N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 *Website: www.ihpsocal.org*

NEIGHBORHOOD


HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 *Phone: 760-520-8100*

Fax: 360-466-2745

 *After Hours Phone:*
760-520-8100

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): *License Number: A101773*
N
NPI: 1598122871

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 *Website: www.ihpsocal.org*

NEIGHBORHOOD


HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 *Phone: 760-520-8100*

Fax: 360-466-2745

 *After Hours Phone:*
760-520-8100

License Number: 80000397
NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): *N*

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE ESCONDIDO


 *Website: www.ihpsocal.org*

NEIGHBORHOOD

HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

 *Phone: (760) 520-8200*

 *After Hours Phone: (760)*
520-8200

License Number: A101773
NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): *N*

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GRAND AVE


 *Website: www.ihpsocal.org*


NEIGHBORHOOD

HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

 *Phone: (760) 520-8200*

 *After Hours Phone: (760)*
520-8200


License Number: A161074

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): *N*

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GRAND AVE

 *Website: www.ihpsocal.org*

NEIGHBORHOOD

HEALTHCARE GRAND AVE

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Provider ID: 206269

1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

Phone: (760) 520-8200
After Hours Phone: (760)
520-8200

License Number: A94128

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GRAND AVE

Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE GRAND AVE

Provider ID: 206269

1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

Phone: (760) 520-8200
After Hours Phone: (760)
520-8200

License Number: PA51508

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): License Number: 550000697

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GRAND AVE

Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE GRAND AVE

Provider ID: 206269

1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

Phone: (760) 520-8200
Fax: (360) 462-2749

After Hours Phone: (760)
520-8200

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GRAND AVE

Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE GRAND AVE

Provider ID: 206269

1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

Phone: (760) 520-8200
Fax: (360) 462-2749

After Hours Phone: (760)
520-8200

License Number: 550000697

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GRAND AVE

Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE GRAND AVE

Provider ID: 206269

1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

Phone: (760) 520-8200
Fax: (360) 462-2749

After Hours Phone: (760)
520-8200

License Number: 80000397

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GRAND AVE

Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE GRAND AVE

Provider ID: 206269

1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

Phone: (760) 520-8200
Fax: (360) 462-2749

After Hours Phone: (760)
520-8200

License Number: 80000483

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GRAND AVE

 Website: www.ihpsocal.org

NEIGHBORHOOD


HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE

ESCONDIDO, CA

92025-4604

 Phone: 760-520-8200

 After Hours Phone:

760-520-8200

License Number: A101773

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GRAND AVE

 Website: www.ihpsocal.org

NEIGHBORHOOD


HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE

ESCONDIDO, CA

92025-4604

 Phone: 760-520-8200

 After Hours Phone:

760-520-8200

License Number: A161074

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GRAND AVE

 Website: www.ihpsocal.org

NEIGHBORHOOD


HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE

ESCONDIDO, CA

92025-4604

 Phone: 760-520-8200

 After Hours Phone:

760-520-8200

License Number: A94128

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GRAND AVE

 Website: www.ihpsocal.org

NEIGHBORHOOD


HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE

ESCONDIDO, CA

92025-4604

 Phone: 760-520-8200

 After Hours Phone:

760-520-8200

License Number: PA51508

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GRAND AVE

 Website: www.ihpsocal.org

NEIGHBORHOOD


HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE

ESCONDIDO, CA

92025-4604

 Phone: 760-520-8200

Fax: 360-462-2749

 After Hours Phone:

760-520-8200

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


HEALTHCARE GRAND AVE
 Website: www.ihpsocal.org

NEIGHBORHOOD


HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

 Phone: 760-520-8200

Fax: 360-462-2749

 After Hours Phone:
760-520-8200

License Number: 550000697

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GRAND AVE


 Website: www.ihpsocal.org

NEIGHBORHOOD


HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

 Phone: 760-520-8200

Fax: 360-462-2749

 After Hours Phone:
760-520-8200

License Number: 80000397

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GRAND AVE


 Website: www.ihpsocal.org

NEIGHBORHOOD


HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

 Phone: 760-520-8200

Fax: 360-462-2749

 After Hours Phone:
760-520-8200

License Number: 80000483

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE GRAND AVE


 Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA
92025-3409

 Phone: (760) 690-5900

 After Hours Phone: (760)

690-5900

License Number: A56054

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE PEDIATRICS
AND PRENATAL


 Website: N/A


NEIGHBORHOOD

HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA
92025-3409

 Phone: (760) 690-5900

 After Hours Phone: (760)
690-5900

License Number: A62467

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE PEDIATRICS
AND PRENATAL

 Website: N/A


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


NEIGHBORHOOD

HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA
92025-3409

 Phone: (760) 690-5900

 After Hours Phone: (760)
690-5900

License Number: A67626

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE PEDIATRICS
AND PRENATAL


 Website: N/A


NEIGHBORHOOD

HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA
92025-3409

 Phone: (760) 690-5900

 After Hours Phone: (760)
690-5900

License Number: G83438

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE PEDIATRICS
AND PRENATAL


 Website: N/A


NEIGHBORHOOD

HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA
92025-3409

 Phone: (760) 690-5900

 After Hours Phone: (760)
690-5900

License Number: NP4799

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE PEDIATRICS
AND PRENATAL


 Website: N/A


NEIGHBORHOOD

HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA
92025-3409

 Phone: (760) 690-5900

 Fax: (360) 462-2747

 After Hours Phone: (760)
690-5900

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE PEDIATRICS
AND PRENATAL


 Website: N/A


NEIGHBORHOOD

HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA
92025-3409

 Phone: (760) 690-5900

 Fax: (360) 462-2747

 After Hours Phone: (760)
690-5900


License Number: 550000511

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE PEDIATRICS
AND PRENATAL

 Website: N/A

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

426 N DATE ST
ESCONDIDO, CA
92025-3409

Phone: 760-690-5900

After Hours Phone:
760-690-5900

License Number: A56054

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL

Website: N/A

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

426 N DATE ST
ESCONDIDO, CA
92025-3409

Phone: 760-690-5900

After Hours Phone:
760-690-5900

License Number: A62467

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL

Website: N/A

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

426 N DATE ST
ESCONDIDO, CA
92025-3409

Phone: 760-690-5900

After Hours Phone:
760-690-5900

License Number: A67626

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL

Website: N/A

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

426 N DATE ST
ESCONDIDO, CA
92025-3409

Phone: 760-690-5900

After Hours Phone:
760-690-5900

License Number: G83438

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL

Website: N/A

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

426 N DATE ST
ESCONDIDO, CA
92025-3409

Phone: 760-690-5900

After Hours Phone:
760-690-5900

License Number: NP4799

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

 Website: N/A


NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA
92025-3409

 Phone: 760-690-5900

Fax: 360-462-2747

 After Hours Phone:
760-690-5900

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE PEDIATRICS


AND PRENATAL

 Website: N/A


NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA
92025-3409

 Phone: 760-690-5900

Fax: 360-462-2747

 After Hours Phone:
760-690-5900

License Number: 550000511

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE PEDIATRICS


AND PRENATAL


 Website: N/A

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 206266

 425 N DATE ST
ESCONDIDO, CA
92025-3413

 Phone: (760) 520-8340

 After Hours Phone: (760)
520-8340

License Number: A56054

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE PEDIATRICS

AND PRENATAL

 Website: www.ihpsocal.org


NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL


Provider ID: 206266

 425 N DATE ST

ESCONDIDO, CA

92025-3413

 Phone: (760) 520-8340

 After Hours Phone: (760)
520-8340

License Number: A67626

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE PEDIATRICS


AND PRENATAL

 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 206266

 425 N DATE ST
ESCONDIDO, CA
92025-3413

 Phone: (760) 520-8340

Fax: (360) 462-2752

 After Hours Phone: (760)
520-8340

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE PEDIATRICS

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


PRENATAL


 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL

Provider ID: 206266

 425 N DATE ST
ESCONDIDO, CA
92025-3413

 Phone: 760-520-8340

 After Hours Phone:
760-520-8340

License Number: A56054

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE PEDS AND


PRENATAL


 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL

Provider ID: 206266

 425 N DATE ST
ESCONDIDO, CA
92025-3413

 Phone: 760-520-8340

 After Hours Phone:
760-520-8340

License Number: A67626

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE PEDS AND


PRENATAL

 Website: www.ihpsocal.org


NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL

Provider ID: 206266

 425 N DATE ST
ESCONDIDO, CA
92025-3413

 Phone: 760-520-8340

Fax: 360-462-2752

 After Hours Phone:
760-520-8340

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE PEDS AND

PRENATAL

 Website: www.ihpsocal.org


NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY


Provider ID: 206271

 728 E VALLEY PKWY

ESCONDIDO, CA

92025-3052

 Phone: (760) 737-6900

 After Hours Phone: (760)
737-6900

License Number: A120348

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE VALLEY


PARKWAY


 Website: N/A

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: (760) 737-6900

 After Hours Phone: (760)
737-6900

License Number: A139490

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE VALLEY

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


PARKWAY


 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: (760) 737-6900

 After Hours Phone: (760)
737-6900

License Number: A140398

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE VALLEY


PARKWAY


 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: (760) 737-6900

 After Hours Phone: (760)
737-6900

License Number: A145349

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE VALLEY


PARKWAY


 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: (760) 737-6900

 After Hours Phone: (760)
737-6900

License Number: A161074

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE VALLEY

PARKWAY

 Website: N/A


**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**


Provider ID: 206271

 728 E VALLEY PKWY

ESCONDIDO, CA

92025-3052

 Phone: (760) 737-6900

 After Hours Phone: (760)
737-6900

License Number: A94128

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE VALLEY


PARKWAY


 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: (760) 737-6900

 After Hours Phone: (760)
737-6900

License Number: DPM5260

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE VALLEY

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


PARKWAY


 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: (760) 737-6900

 After Hours Phone: (760)
737-6900

License Number: G61829

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE VALLEY


PARKWAY


 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: (760) 737-6900

 After Hours Phone: (760)
737-6900

License Number: NP8169

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE VALLEY


PARKWAY

 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: (760) 737-6900

Fax: (360) 462-2748

 After Hours Phone: (760)
737-6900

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE VALLEY

PARKWAY

 Website: N/A


**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY

ESCONDIDO, CA

92025-3052

 Phone: (760) 737-6900

Fax: (360) 462-2748

 After Hours Phone: (760)
737-6900

License Number: 80000158

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE VALLEY


PARKWAY

 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

 After Hours Phone:
760-737-6900

License Number: A120348

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


HEALTHCARE VALLEY
PARKWAY

 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

 After Hours Phone:
760-737-6900

License Number: A139490

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052


 Phone: 760-737-6900

 After Hours Phone:
760-737-6900

License Number: A140398

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

 After Hours Phone:
760-737-6900

License Number: A145349

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY


 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

 After Hours Phone:
760-737-6900


License Number: A161074

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

 After Hours Phone:
760-737-6900

License Number: A94128

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


HEALTHCARE VALLEY
PARKWAY

 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

 After Hours Phone:
760-737-6900

License Number: DPM5260

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052


 Phone: 760-737-6900

 After Hours Phone:
760-737-6900

License Number: G61829

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

 After Hours Phone:
760-737-6900

License Number: NP8169

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 Website: N/A


**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

Fax: 360-462-2748

 After Hours Phone:
760-737-6900

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

Fax: 360-462-2748

 After Hours Phone:
760-737-6900

License Number: 80000158

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


*NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY*

 *Website: N/A*

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270

 *460 N ELM ST
ESCONDIDO, CA 92025*

 *Phone: (760) 520-8100*

Fax: (360) 466-2745

 *After Hours Phone: (760)
520-8100*


License Number: 080000397

NPI: 1598703647


Accepting New Patients: Yes

Min/Max Age: 0\None

 *Site English Spoken: Y*
Cultural Competency: N

 *Hours: M-F
8:00AM-5:00PM*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*


*Medical Group/IPA: IHP of
Southern Cal-PHP*

 *Website: www.ihpsocal.org*

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 *426 N DATE ST
ESCONDIDO, CA 92025*

 *Phone: (760) 690-5900*

Fax: (360) 462-2747

 *After Hours Phone: (760)
690-5900*


License Number: 550000511

NPI: 1437335353

Accepting New Patients: Yes

Min/Max Age: 0\21

 *Site English Spoken: Y*
Cultural Competency: N

 *Hours: M-F
8:00AM-5:00PM*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*


*Medical Group/IPA: IHP of
Southern Cal-PHP*

 *Website: N/A*

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941

 *704 E GRAND AVE
ESCONDIDO, CA 92025*

 *Phone: (619) 662-4100*

Fax: (760) 745-7847


 *After Hours Phone: (619)
662-4100*

NPI: 1801438239

Accepting New Patients: Yes

Min/Max Age: 0\120

 *Site English Spoken: Y*

 *Site Languages(s) Spoken:
Arabic, Farsi, Spanish,
Tagalog*

Cultural Competency: N

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*


*Medical Group/IPA: IHP of
Southern Cal-PHP*


 *Website: N/A*

ESCONDIDO FAMILY HEALTH CENTER

Provider ID: 652372

 *128 N BROADWAY
ESCONDIDO, CA 92025*

 *Phone: (619) 515-2474*

 *After Hours Phone: (619)
515-2474*

License Number: 550002865

NPI: 1417640491

Accepting New Patients: Yes

Min/Max Age: 0\None

 *Site English Spoken: Y*
Cultural Competency: N

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*


*Medical Group/IPA: Family
Health Centers of San Diego*

 *Website: N/A*

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 206266

 *425 N DATE ST
ESCONDIDO, CA 92025*

 *Phone: (760) 520-8340*

Fax: (360) 462-2752


 *After Hours Phone: (760)
520-8340*

NPI: 1265618185

Accepting New Patients: Yes

Min/Max Age: 0\21

 *Site English Spoken: Y*
Cultural Competency: N

 *Hours: M-F
8:00AM-5:00PM*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

Medical Group/IPA: IHP of

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


Southern Cal-PHP

 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900

Fax: (360) 462-2748

 After Hours Phone: (760)
737-6900


License Number: 080000158

NPI: 1720264641

Accepting New Patients: Yes


Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

 Hours: M-TU
8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: N/A

CENTRO MEDICO ESCONDIDO

Provider ID: 419344

 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

 Phone: (760) 871-0606

Fax: (858) 634-6918

 After Hours Phone: (760)
871-0606


License Number: 550001260

NPI: 1023349883

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

 Hours: SU 8:00AM-0:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-0:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: BORREGO
COMMUNITY HEALTH
FOUNDATION

 Website: N


Email:


iselaocha@borregohealth.org

FALLBROOK

FALLBROOK FAMILY HLTH CTR

Provider ID: 183910

 1328 S MISSION RD
FALLBROOK, CA
92028-4006

 Phone: (760) 451-4720

Fax: (760) 451-4700

 After Hours Phone: (760)
451-4720

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:
FALLBROOK FAMILY HLTH
CTR

 Website: N/A

FALLBROOK FAMILY HLTH CTR

Provider ID: 183910

 1328 S MISSION RD
FALLBROOK, CA
92028-4006

 Phone: (760) 451-4720

Fax: (760) 451-4700

 After Hours Phone: (760)
451-4720

License Number: 80000150

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:
FALLBROOK FAMILY HLTH
CTR


 Website: N/A

FALLBROOK FAMILY HLTH CTR

Provider ID: 183910

 1328 S MISSION RD
FALLBROOK, CA
92028-4006

 Phone: (760) 451-4770

 After Hours Phone: (760)
451-4770

License Number: A169529

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
FALLBROOK FAMILY HLTH
CTR
 Website: N/A

FALLBROOK FAMILY HLTH CTR

Provider ID: 183910
 1328 S MISSION RD
FALLBROOK, CA
92028-4006
 Phone: 760-451-4720
Fax: 760-451-4700
 After Hours Phone:
760-451-4720
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
FALLBROOK FAMILY HLTH
CTR
 Website: N/A

FALLBROOK FAMILY HLTH CTR

Provider ID: 183910
 1328 S MISSION RD
FALLBROOK, CA
92028-4006

Phone: 760-451-4720
Fax: 760-451-4700
 After Hours Phone:
760-451-4720
License Number: 80000150
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
FALLBROOK FAMILY HLTH
CTR
 Website: N/A

FALLBROOK FAMILY HLTH CTR

Provider ID: 183910
 1328 S MISSION RD
FALLBROOK, CA
92028-4006
 Phone: 760-451-4770
 After Hours Phone:
760-451-4770
License Number: A169529
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
FALLBROOK FAMILY HLTH

CTR
 Website: N/A

VISTA COMMUNITY CLINIC

Provider ID: 624122
 321 E ALVARADO ST
FALLBROOK, CA
92028-2912
 Phone: (760) 723-6200
 After Hours Phone: (760)
723-6200
License Number: NP95003447
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC




Provider ID: 624122
 321 E ALVARADO ST
FALLBROOK, CA
92028-2912
 Phone: 760-723-6200
 After Hours Phone:
760-723-6200
License Number: NP95003447
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT
PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Medical Group/IPA: VISTA
COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122
 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760)
723-6200


License Number: 550003781

NPI: 1851300123

Accepting New Patients: No

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

 Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

American Sign Language (ASL):

N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122

 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760)
723-6200

License Number: 550004110


NPI: 1851300123

Accepting New Patients: No

Min/Max Age: 0\None

 Site English Spoken: Y

Cultural Competency: N

 Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

American Sign Language (ASL):

N



 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.vistacommunityclinic.org

FALLBROOK FAMILY HLTH CTR

Provider ID: 183910

 1328 S MISSION RD
FALLBROOK, CA 92028
 Phone: (760) 451-4720
Fax: (760) 451-4700

 After Hours Phone: (760)
451-4720


License Number: 080000150

NPI: 1982756086


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish

Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER



Medical Group/IPA: IHP of
Southern Cal-PHP


 Website: N/A

Email: a.escobedo@chsica.org

VISTA COMMUNITY CLINIC

Provider ID: 624122

 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200


License Number: 080000002

NPI: 1316501562

Accepting New Patients: No

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

 Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

American Sign Language (ASL):

N



 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122

 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200


 After Hours Phone: (760)
723-6200


License Number: 550003781

NPI: 1316501562

Accepting New Patients: No

Min/Max Age: 0\None

















































 Site English Spoken: Y
Cultural Competency: N

 Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: IHP of Southern Cal-PHP</i></p> <p> <i>Website: www.vistacommunityclinic.org</i></p>	<p><i>Accepting New Patients: No</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p> <i>Hours: M 8:00AM-4:00PM TU 8:00AM-0:30PM W-TH 8:00AM-5:00PM</i></p> <p><i>American Sign Language (ASL): N</i></p>	<p><i>Provider ID: 624122</i></p> <p> 321 E ALVARADO ST FALLBROOK, CA 92028</p> <p> <i>Phone: (760) 723-6200</i></p> <p> <i>After Hours Phone: (760) 723-6200</i></p> <p><i>License Number: 550004110</i></p> <p><i>NPI: 1649662719</i></p> <p><i>Accepting New Patients: No</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p> <i>Hours: M 8:00AM-4:00PM TU 8:00AM-0:30PM W-TH 8:00AM-5:00PM</i></p> <p><i>American Sign Language (ASL): N</i></p>
<p>VISTA COMMUNITY CLINIC</p> <p><i>Provider ID: 624122</i></p> <p> 321 E ALVARADO ST FALLBROOK, CA 92028</p> <p> <i>Phone: (760) 723-6200</i></p> <p> <i>After Hours Phone: (760) 723-6200</i></p> <p><i>License Number: 550004110</i></p> <p><i>NPI: 1316501562</i></p> <p><i>Accepting New Patients: No</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p> <i>Hours: M 8:00AM-4:00PM TU 8:00AM-0:30PM W-TH 8:00AM-5:00PM</i></p> <p><i>American Sign Language (ASL): N</i></p>	<p>VISTA COMMUNITY CLINIC</p> <p><i>Provider ID: 624122</i></p> <p> 321 E ALVARADO ST FALLBROOK, CA 92028</p> <p> <i>Phone: (760) 723-6200</i></p> <p> <i>After Hours Phone: (760) 723-6200</i></p> <p><i>License Number: 550003781</i></p> <p><i>NPI: 1649662719</i></p> <p><i>Accepting New Patients: No</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p> <i>Hours: M 8:00AM-4:00PM TU 8:00AM-0:30PM W-TH 8:00AM-5:00PM</i></p> <p><i>American Sign Language (ASL): N</i></p>	<p>VISTA COMMUNITY CLINIC</p> <p><i>Provider ID: 624122</i></p> <p> 321 E ALVARADO ST FALLBROOK, CA 92028</p> <p> <i>Phone: (760) 723-6200</i></p> <p> <i>After Hours Phone: (760) 723-6200</i></p> <p><i>License Number: 550003781</i></p> <p><i>NPI: 1649662719</i></p> <p><i>Accepting New Patients: No</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p> <i>Hours: M 8:00AM-4:00PM TU 8:00AM-0:30PM W-TH 8:00AM-5:00PM</i></p> <p><i>American Sign Language (ASL): N</i></p>
<p>VISTA COMMUNITY CLINIC</p> <p><i>Provider ID: 624122</i></p> <p> 321 E ALVARADO ST FALLBROOK, CA 92028</p> <p> <i>Phone: (760) 723-6200</i></p> <p> <i>After Hours Phone: (760) 723-6200</i></p> <p><i>License Number: 080000002</i></p> <p><i>NPI: 1649662719</i></p>	<p>VISTA COMMUNITY CLINIC</p> <p><i>Provider ID: 624122</i></p> <p> 321 E ALVARADO ST FALLBROOK, CA 92028</p> <p> <i>Phone: (760) 723-6200</i></p> <p> <i>After Hours Phone: (760) 723-6200</i></p> <p><i>License Number: 080000002</i></p> <p><i>NPI: 1851300123</i></p> <p><i>Accepting New Patients: No</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p> <i>Hours: M 8:00AM-4:00PM TU 8:00AM-0:30PM W-TH 8:00AM-5:00PM</i></p> <p><i>American Sign Language (ASL): N</i></p>	<p>VISTA COMMUNITY CLINIC</p> <p><i>Provider ID: 624122</i></p> <p> 321 E ALVARADO ST FALLBROOK, CA 92028</p> <p> <i>Phone: (760) 723-6200</i></p> <p> <i>After Hours Phone: (760) 723-6200</i></p> <p><i>License Number: 080000002</i></p> <p><i>NPI: 1851300123</i></p> <p><i>Accepting New Patients: No</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p> <i>Hours: M 8:00AM-4:00PM TU 8:00AM-0:30PM W-TH 8:00AM-5:00PM</i></p> <p><i>American Sign Language (ASL): N</i></p>
<p>VISTA COMMUNITY CLINIC</p> <p><i>Provider ID: 624122</i></p> <p> 321 E ALVARADO ST FALLBROOK, CA 92028</p> <p> <i>Phone: (760) 723-6200</i></p> <p> <i>After Hours Phone: (760) 723-6200</i></p> <p><i>License Number: 080000002</i></p> <p><i>NPI: 1649662719</i></p>	<p>VISTA COMMUNITY CLINIC</p> <p><i>Provider ID: 624122</i></p> <p> 321 E ALVARADO ST FALLBROOK, CA 92028</p> <p> <i>Phone: (760) 723-6200</i></p> <p> <i>After Hours Phone: (760) 723-6200</i></p> <p><i>License Number: 080000002</i></p> <p><i>NPI: 1649662719</i></p>	<p>VISTA COMMUNITY CLINIC</p> <p><i>Provider ID: 624122</i></p> <p> 321 E ALVARADO ST FALLBROOK, CA 92028</p> <p> <i>Phone: (760) 723-6200</i></p> <p> <i>After Hours Phone: (760) 723-6200</i></p> <p><i>License Number: 080000002</i></p> <p><i>NPI: 1851300123</i></p> <p><i>Accepting New Patients: No</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p> <i>Hours: M 8:00AM-4:00PM TU 8:00AM-0:30PM W-TH 8:00AM-5:00PM</i></p> <p><i>American Sign Language (ASL): N</i></p>

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: IHP of Southern Cal-PHP
 *Website: www.vistacommu
nityclinic.org*


IMPERIAL BEACH

IMPERIAL BEACH HEALTH CENTER

Provider ID: 179678

 949 PALM AVE
IMPERIAL BEACH, CA
91932-1503

 *Phone: (619) 429-3733*


 *After Hours Phone: (619)
429-3733*

License Number: A51447

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*

 *Site Languages(s) Spoken:
Spanish, Tagalog*

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IMPERIAL BEACH HEALTH CENTER


 *Website: www.ihpsocal.org*

IMPERIAL BEACH HEALTH CENTER

Provider ID: 179678

 949 PALM AVE
IMPERIAL BEACH, CA
91932-1503

 *Phone: (619) 429-3733*


 *After Hours Phone: (619)
429-3733*

License Number: A66830

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*

 *Site Languages(s) Spoken:
Spanish, Tagalog*

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IMPERIAL BEACH HEALTH CENTER

 *Website: www.ihpsocal.org*

IMPERIAL BEACH HEALTH CENTER

Provider ID: 179678

 949 PALM AVE
IMPERIAL BEACH, CA
91932-1503

 *Phone: 619-429-3733*


 *After Hours Phone:
619-429-3733*

License Number: A51447

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*

 *Site Languages(s) Spoken:
Spanish, Tagalog*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: IMPERIAL BEACH HEALTH CENTER


 *Website: www.ihpsocal.org*


IMPERIAL BEACH HEALTH CENTER

Provider ID: 179678

 949 PALM AVE

IMPERIAL BEACH, CA
91932-1503


 *Phone: 619-429-3733*


 *After Hours Phone:
619-429-3733*

License Number: A66830

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*

 *Site Languages(s) Spoken:
Spanish, Tagalog*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IMPERIAL BEACH HEALTH CENTER

 *Website: www.ihpsocal.org*

IMPERIAL BEACH HEALTH CENTER

Provider ID: 179678

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 *Phone: (619) 429-3733*

Fax: (619) 628-5550

 *After Hours Phone: (619)
429-3733*


License Number: 090000119

NPI: 1790718351


Accepting New Patients: Yes

Min/Max Age: 0\None

 *Site English Spoken: Y*

 *Site Languages(s) Spoken:
Spanish, Tagalog*

Cultural Competency: N

 *Hours: M-F
8:00AM-5:00PM*

American Sign Language (ASL):

N

 *Accessibility: CONTACT*






D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal




PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: www.ihpsocal.org



LA MESA

LA MESA PEDIATRICS






Provider ID: 480827
 8881 FLETCHER PKWY STE
200
LA MESA, CA 91942-3135
 Phone: (619) 464-6434
 After Hours Phone: (619)
464-6434
License Number: NP95017921
NPI: 1134144165
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA MESA
PEDIATRICS
 Website: N/A

LA MESA PEDIATRICS




Provider ID: 480827
 8881 FLETCHER PKWY STE
200
LA MESA, CA 91942-3135
 Phone: (619) 464-6434
Fax: (619) 464-5109
 After Hours Phone: (619)
464-6434
NPI: 1134144165
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):



N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA MESA
PEDIATRICS
 Website: N/A

LA MESA PEDIATRICS






Provider ID: 480827
 8881 FLETCHER PKWY STE
200
LA MESA, CA 91942-3135
 Phone: (619) 464-6434
Fax: (619) 464-5109
 After Hours Phone: (619)
464-6434
License Number: 20A11733
NPI: 1134144165
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA MESA
PEDIATRICS
 Website: N/A

LA MESA PEDIATRICS




Provider ID: 480827
 8881 FLETCHER PKWY STE
200
LA MESA, CA 91942-3135
 Phone: (619) 464-6434
Fax: (619) 464-5109
 After Hours Phone: (619)
464-6434
License Number: 550000430
NPI: 1134144165
Accepting New Patients: Yes
 Site English Spoken: Yes

Cultural Competency: Yes
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA MESA
PEDIATRICS
 Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827
 8881 FLETCHER PKWY STE
200
LA MESA, CA 91942-3135
 Phone: (619) 464-6434
Fax: (619) 464-5109
 After Hours Phone: (619)
464-6434
License Number: A113241
NPI: 1134144165
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA MESA
PEDIATRICS
 Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827
 8881 FLETCHER PKWY STE
200
LA MESA, CA 91942-3135
 Phone: (619) 464-6434
Fax: (619) 464-5109
 After Hours Phone: (619)
464-6434
License Number: A89865
NPI: 1134144165

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MESA PEDIATRICS


 Website: N/A

LA MESA PEDIATRICS


Provider ID: 480827

 8881 FLETCHER PKWY STE 200

LA MESA, CA 91942-3135

 Phone: (619) 464-6434

Fax: (619) 464-5109

 After Hours Phone: (619) 464-6434

License Number: C133872

NPI: 1134144165


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MESA PEDIATRICS


 Website: N/A


LA MESA PEDIATRICS

Provider ID: 480827

 8881 FLETCHER PKWY STE 200

LA MESA, CA 91942-3135

 Phone: 619-464-6434

 After Hours Phone: 619-464-6434

License Number: NP95017921

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MESA PEDIATRICS


 Website: N/A

LA MESA PEDIATRICS


Provider ID: 480827

 8881 FLETCHER PKWY STE 200

LA MESA, CA 91942-3135

 Phone: 619-464-6434

Fax: 619-464-5109

 After Hours Phone: 619-464-6434

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MESA PEDIATRICS


 Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827

 8881 FLETCHER PKWY STE 200

LA MESA, CA 91942-3135

 Phone: 619-464-6434

Fax: 619-464-5109

 After Hours Phone: 619-464-6434

License Number: 20A11733

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MESA PEDIATRICS


 Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827

 8881 FLETCHER PKWY STE 200

LA MESA, CA 91942-3135

 Phone: 619-464-6434

Fax: 619-464-5109

 After Hours Phone: 619-464-6434

License Number: 550000430

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: Yes

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MESA PEDIATRICS


 Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827

 8881 FLETCHER PKWY STE 200

LA MESA, CA 91942-3135

 Phone: 619-464-6434

Fax: 619-464-5109

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

☎ After Hours Phone:
619-464-6434

License Number: A113241

NPI: 1134144165

Accepting New Patients: Yes

☐ Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA MESA
PEDIATRICS

🌐 Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827

📍 8881 FLETCHER PKWY STE
200

LA MESA, CA 91942-3135

☎ Phone: 619-464-6434

Fax: 619-464-5109

☎ After Hours Phone:
619-464-6434

License Number: A89865

NPI: 1134144165

Accepting New Patients: Yes

☐ Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA MESA
PEDIATRICS

🌐 Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827

📍 8881 FLETCHER PKWY STE
200

LA MESA, CA 91942-3135

☎ Phone: 619-464-6434

Fax: 619-464-5109

☎ After Hours Phone:

619-464-6434

License Number: C133872

NPI: 1134144165

Accepting New Patients: Yes

☐ Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA MESA
PEDIATRICS

🌐 Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827

📍 8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

☎ Phone: (619) 464-6434

Fax: (619) 464-5109

☎ After Hours Phone: (619)
464-6434

License Number: 550000430

NPI: 1033759311

Accepting New Patients: Yes

Min/Max Age: 0\21

☐ Site English Spoken: Y

Cultural Competency: N

🕒 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: BORREGO
COMMUNITY HEALTH

FOUNDTION

🌐 Website: N/A

LAKESIDE

NEIGHBORHOOD

HEALTHCARE LAKESIDE

Provider ID: 353843

📍 10039 VINE ST
LAKESIDE, CA 92040-3120

☎ Phone: 858-218-3000

☎ After Hours Phone:
858-218-3000

License Number: A75411

NPI: 1598122871

Accepting New Patients: Yes

☐ Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE LAKESIDE

🌐 Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE LAKESIDE

Provider ID: 353843

📍 10039 VINE ST
LAKESIDE, CA 92040-3120

☎ Phone: 858-218-3000

☎ After Hours Phone:
858-218-3000

License Number: DC33688

NPI: 1598122871

Accepting New Patients: Yes

☐ Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):
N




♿ Accessibility: CONTACT
PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE LAKESIDE
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE LAKESIDE

Provider ID: 353843
 10039 VINE ST
LAKESIDE, CA 92040-3120
 Phone: 858-218-3000
Fax: 360-462-2744
 After Hours Phone:
858-218-3000
NPI: 1598122871


Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No




American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD
HEALTHCARE LAKESIDE
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE LAKESIDE

Provider ID: 353843
 10039 VINE ST
LAKESIDE, CA 92040-3120
 Phone: 858-218-3000
Fax: 360-462-2744
 After Hours Phone:
858-218-3000
License Number: 80000483
NPI: 1598122871


Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No




American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD
HEALTHCARE LAKESIDE
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE LAKESIDE

Provider ID: 353843
 10039 VINE ST
LAKESIDE, CA 92040-3120
 Phone: (858) 218-3000
 After Hours Phone: (858)
218-3000

License Number: A152372

NPI: 1598122871


Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No




American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD
HEALTHCARE LAKESIDE
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE LAKESIDE

Provider ID: 353843
 10039 VINE ST
LAKESIDE, CA 92040-3120
 Phone: (858) 218-3000
 After Hours Phone: (858)
218-3000

License Number: A43914

NPI: 1598122871


Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD
HEALTHCARE LAKESIDE
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE LAKESIDE

Provider ID: 353843
 10039 VINE ST
LAKESIDE, CA 92040-3120
 Phone: (858) 218-3000
 After Hours Phone: (858)
218-3000

License Number: A75411

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No




American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD
HEALTHCARE LAKESIDE
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE LAKESIDE

Provider ID: 353843
 10039 VINE ST
LAKESIDE, CA 92040-3120
 Phone: (858) 218-3000
 After Hours Phone: (858)
218-3000

License Number: DC33688

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE LAKESIDE


 Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE LAKESIDE

Provider ID: 353843

 10039 VINE ST
LAKESIDE, CA 92040-3120

 Phone: (858) 218-3000

Fax: (360) 462-2744

After Hours Phone: (858)
218-3000

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE LAKESIDE


 Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE LAKESIDE

Provider ID: 353843

 10039 VINE ST
LAKESIDE, CA 92040-3120

 Phone: (858) 218-3000

Fax: (360) 462-2744

After Hours Phone: (858)
218-3000

License Number: 80000483

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE LAKESIDE


 Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE LAKESIDE

Provider ID: 353843

 10039 VINE ST
LAKESIDE, CA 92040-3120

 Phone: 858-218-3000

After Hours Phone:
858-218-3000

License Number: A152372

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE LAKESIDE


 Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE LAKESIDE

Provider ID: 353843

 10039 VINE ST
LAKESIDE, CA 92040-3120

 Phone: 858-218-3000

After Hours Phone:
858-218-3000

License Number: A43914

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE LAKESIDE


 Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE LAKESIDE

Provider ID: 353843

 10039 VINE ST
LAKESIDE, CA 92040

 Phone: (858) 218-3000

Fax: (360) 462-2744

After Hours Phone: (858)
218-3000

License Number: 080000483


NPI: 1932384120

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


Southern Cal-PHP


 Website: www.ihpsocal.org


LEMON GROVE

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): NPI: 1134155377

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550


License Number: A165925

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

License Number: A154838


NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

 Website: N/A






LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139







 7592 BROADWAY
LEMON GROVE, CA

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal



D1. Clínicas de salud con calificación federal

91945-1604
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
License Number: A154298
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 Website: N/A






LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA 91945-1604
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
License Number: A164859
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 Website: N/A

LEMON GROVE FAMILY







HEALTH CENTER
Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA 91945-1604
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
License Number: A163464
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER





Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA 91945-1604
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
License Number: A148014
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH

CENTER
 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER



Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA 91945-1604
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
License Number: A116680
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA 91945-1604
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
License Number: A118095
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal



D1. Clínicas de salud con calificación federal

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 *Website: N/A*

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 *Phone: (619) 515-2550*
 *After Hours Phone: (619) 515-2550*

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

N


 *Accessibility: CONTACT PROVIDER*



Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

 *Website: N/A*

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139


 7592 BROADWAY
LEMON GROVE, CA
91945-1604


 *Phone: (619) 515-2550*
 *After Hours Phone: (619) 515-2550*

License Number: A107323

NPI: 1134155377

Accepting New Patients: Yes


 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

 *Website: N/A*

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 *Phone: (619) 515-2550*
 *After Hours Phone: (619) 515-2550*

License Number: A114181

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

N


 *Accessibility: CONTACT PROVIDER*



Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

 *Website: N/A*

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 *Phone: (619) 515-2550*
 *After Hours Phone: (619)*

515-2550

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*



Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

 *Website: N/A*

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 *Phone: (619) 515-2500*
 *After Hours Phone: (619) 515-2500*


License Number: G78814

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER







 *Website: N/A*

LEMON GROVE FAMILY HEALTH CENTER







Provider ID: 419139

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal







D1. Clínicas de salud con calificación federal

 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: (619) 515-2550
 After Hours Phone: (619)
515-2550
License Number: 20A14919
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER
 Website: N/A






LEMON GROVE FAMILY HEALTH CENTER


Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: (619) 515-2550
 After Hours Phone: (619)
515-2550
License Number: 20A11535
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER
 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER







Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: (619) 515-2550
 After Hours Phone: (619)
515-2550
License Number: A102060
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER
 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER





Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: (619) 515-2550
 After Hours Phone: (619)
515-2550
License Number: C174771
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER
 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: (619) 515-2550
 After Hours Phone: (619)
515-2550
License Number: NP15444
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER
 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER


Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: (619) 515-2550
 After Hours Phone: (619)
515-2550
License Number: C172318
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

American Sign Language (ASL): NPI: 1134155377

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


 *Website: N/A*

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 *Phone: (619) 515-2550*

 *After Hours Phone: (619) 515-2550*

License Number: NP95001050

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


 *Website: N/A*

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 *Phone: (619) 515-2550*

 *After Hours Phone: (619) 515-2550*

License Number: NP95008782

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


 *Website: N/A*

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 *Phone: (619) 515-2550*

 *After Hours Phone: (619) 515-2550*

License Number: PA56072

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


 *Website: N/A*


LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA

91945-1604

 *Phone: (619) 515-2550*

 *After Hours Phone: (619) 515-2550*

License Number: NP95013978


NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


 *Website: N/A*

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 *Phone: (619) 515-2550*

 *After Hours Phone: (619) 515-2550*

License Number: NP95009933


NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

 *Website: N/A*

LEMON GROVE FAMILY

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): NPI: 1134155377

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A107323

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): NPI: 1134155377

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH

CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A102060

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): NPI: 1134155377

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: (619) 515-2550

Fax: (619) 825-9577

 After Hours Phone: (619) 515-2550


NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): NPI: 1134155377

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:

619-515-2550

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: (619) 515-2550

Fax: (619) 825-9577

 After Hours Phone: (619) 515-2550

License Number: 550001268
NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: (619) 515-2550

 After Hours Phone: (619) 515-2550

License Number: RN428876
NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

License Number: PA12416

NPI: 1134155377


Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): NPI: 1134155377

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): NPI: 1134155377

N

 Accessibility: CONTACT


PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: A148014

NPI: 1134155377


Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): NPI: 1134155377

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: A116680


NPI: 1134155377

Accepting New Patients: Yes


 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY

LEMON GROVE, CA

91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A154838

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A165925

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LEMON

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


GROVE FAMILY HEALTH
CENTER


 Website: N/A

**LEMON GROVE FAMILY
HEALTH CENTER**

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER


 Website: N/A

**LEMON GROVE FAMILY
HEALTH CENTER**

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: RN428876

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

 Website: N/A


**LEMON GROVE FAMILY
HEALTH CENTER**

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

Fax: 619-825-9577

 After Hours Phone:
619-515-2550

License Number: 550001268

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

 Website: N/A


**LEMON GROVE FAMILY
HEALTH CENTER**

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

Fax: 619-825-9577

 After Hours Phone:
619-515-2550

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER


 Website: N/A

**LEMON GROVE FAMILY
HEALTH CENTER**

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: PA56072

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

 Website: N/A






**LEMON GROVE FAMILY
HEALTH CENTER**

Provider ID: 419139







 7592 BROADWAY
LEMON GROVE, CA

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal






D1. Clínicas de salud con calificación federal

91945-1604
 Phone: 619-515-2550
 After Hours Phone:
619-515-2550
License Number: NP95013978
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER
 Website: N/A






LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550
 After Hours Phone:
619-515-2550
License Number: PA12416
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER
 Website: N/A

LEMON GROVE FAMILY







HEALTH CENTER
Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550
 After Hours Phone:
619-515-2550
License Number: NP95009933
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER
 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER





Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550
 After Hours Phone:
619-515-2550
License Number: NP95001050
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LEMON
GROVE FAMILY HEALTH

CENTER
 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER



Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550
 After Hours Phone:
619-515-2550
License Number: NP95008782
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER
 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550
 After Hours Phone:
619-515-2550
License Number: C172318
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 *Website: N/A*

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 *Phone: 619-515-2550*

 *After Hours Phone: 619-515-2550*

License Number: NP15444

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


 *Website: N/A*

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604


 *Phone: 619-515-2550*

 *After Hours Phone: 619-515-2550*

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

 *Website: N/A*

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA 91945

 *Phone: (619) 515-2550*

Fax: (619) 825-9577


 *After Hours Phone: (619) 515-2550*


License Number: 550001268

NPI: 1427282466

Accepting New Patients: Yes

Min/Max Age: 0\None

 *Site English Spoken: Y*
Cultural Competency: N

 *Hours: M-F 9:00AM-5:00PM*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: Family Health Centers of San Diego


 *Website: N/A*


Email: valeriade@fhcsd.org

NATIONAL CITY

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

 330 E 8TH ST
NATIONAL CITY, CA
91950-2312

 *Phone: (619) 662-4100*
Fax: (619) 259-2807

 *After Hours Phone: (619) 662-4100*

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH SOUTH BAY

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

 330 E 8TH ST
NATIONAL CITY, CA
91950-2312

 *Phone: 619-662-4100*

 *After Hours Phone: 619-662-4100*

License Number: 20A12653

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN YSIDRO HEALTH SOUTH BAY

 *Website: www.ihpsocal.org*

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

330 E 8TH ST
NATIONAL CITY, CA
91950-2312

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A133539

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SOUTH BAY

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

330 E 8TH ST
NATIONAL CITY, CA
91950-2312

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

License Number: 20A12653

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SOUTH BAY

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

330 E 8TH ST
NATIONAL CITY, CA
91950-2312

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

License Number: G71855

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SOUTH BAY

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

330 E 8TH ST
NATIONAL CITY, CA
91950-2312

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

License Number: A133539

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SOUTH BAY

Website: www.ihpsocal.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

Phone: 619-564-8765

After Hours Phone:
619-564-8765

License Number: NP95009891

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC

Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

Phone: 619-798-3977

After Hours Phone:
619-798-3977

License Number: A41375

NPI: 1609849074

Accepting New Patients: Yes

































Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: LA</p> <p>MAESTRA FAMILY CLINIC INC</p> <p> <i>Website: www.lamaestra.org</i></p>	<p><i>NPI: 1609849074</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: LA</p> <p>MAESTRA FAMILY CLINIC INC</p> <p> <i>Website: www.lamaestra.org</i></p>	<p> <i>Phone: (619) 434-7308</i></p> <p><i>Fax: (619) 434-7310</i></p> <p> <i>After Hours Phone: (619) 434-7308</i></p> <p><i>License Number: NP95013257</i></p> <p><i>NPI: 1609849074</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: LA</p> <p>MAESTRA FAMILY CLINIC INC</p> <p> <i>Website: www.lamaestra.org</i></p>
<p>LA MAESTRA FAMILY CLINIC INC</p> <p><i>Provider ID: 185270</i></p> <p> 217 HIGHLAND AVE NATIONAL CITY, CA 91950-1518</p> <p> <i>Phone: 619-434-7308</i></p> <p><i>Fax: 619-434-7310</i></p> <p> <i>After Hours Phone: 619-434-7308</i></p> <p><i>License Number: NP95013257</i></p> <p><i>NPI: 1609849074</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: LA</p> <p>MAESTRA FAMILY CLINIC INC</p> <p> <i>Website: www.lamaestra.org</i></p>	<p>LA MAESTRA FAMILY CLINIC INC</p> <p><i>Provider ID: 185270</i></p> <p> 217 HIGHLAND AVE NATIONAL CITY, CA 91950-1518</p> <p> <i>Phone: (619) 798-3977</i></p> <p> <i>After Hours Phone: (619) 798-3977</i></p> <p><i>License Number: A41375</i></p> <p><i>NPI: 1609849074</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: LA</p> <p>MAESTRA FAMILY CLINIC INC</p> <p> <i>Website: www.lamaestra.org</i></p>	<p>LA MAESTRA FAMILY CLINIC INC</p> <p><i>Provider ID: 185270</i></p> <p> 217 HIGHLAND AVE NATIONAL CITY, CA 91950-1518</p> <p> <i>Phone: (619) 564-8765</i></p> <p> <i>After Hours Phone: (619) 564-8765</i></p> <p><i>License Number: NP95009891</i></p> <p><i>NPI: 1609849074</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: LA</p> <p>MAESTRA FAMILY CLINIC INC</p> <p> <i>Website: www.lamaestra.org</i></p>
<p>LA MAESTRA FAMILY CLINIC INC</p> <p><i>Provider ID: 185270</i></p> <p> 217 HIGHLAND AVE NATIONAL CITY, CA 91950-1518</p> <p> <i>Phone: 619-280-4213</i></p> <p> <i>After Hours Phone: 619-280-4213</i></p> <p><i>License Number: A167184</i></p>	<p>LA MAESTRA FAMILY CLINIC INC</p> <p><i>Provider ID: 185270</i></p> <p> 217 HIGHLAND AVE NATIONAL CITY, CA 91950-1518</p>	<p>LA MAESTRA FAMILY CLINIC INC</p>


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

INC

Provider ID: 185270

 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308

License Number: G45632

NPI: 1609849074

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

 Phone: 619-434-7308

 After Hours Phone:
619-434-7308

License Number: A123929

NPI: 1609849074

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

 Phone: 619-434-7308

 After Hours Phone:
619-434-7308

License Number: C55979

NPI: 1609849074

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

 Phone: 619-434-7308

 After Hours Phone:
619-434-7308

License Number: G45632

NPI: 1609849074

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

 Phone: 619-434-7308

 After Hours Phone:
619-434-7308

License Number: 20A6433

NPI: 1609849074

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

 Phone: (619) 280-4213

 After Hours Phone: (619)
280-4213

License Number: A167184

NPI: 1609849074

Accepting New Patients: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC


 *Website: www.lamaestra.org*

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

 *Phone: (619) 434-7308*

 *After Hours Phone: (619) 434-7308*

License Number: C55979

NPI: 1609849074

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC

 *Website: www.lamaestra.org*

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

 *Phone: (619) 434-7308*

 *After Hours Phone: (619) 434-7308*

434-7308
License Number: A123929

NPI: 1609849074

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC


 *Website: www.lamaestra.org*

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

 *Phone: (619) 434-7308*

 *After Hours Phone: (619) 434-7308*

License Number: 20A6433

NPI: 1609849074

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC


 *Website: www.lamaestra.org*

SAN YSIDRO HEALTH SOUTH BAY


Provider ID: 361428

 330 E 8TH ST

NATIONAL CITY, CA
91950-2312

 *Phone: 619-662-4100*

Fax: 619-259-2807


 *After Hours Phone: 619-662-4100*

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH SOUTH BAY

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

 330 E 8TH ST
NATIONAL CITY, CA
91950-2312

 *Phone: 619-662-4100*

 *After Hours Phone: 619-662-4100*

License Number: G71855

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN YSIDRO HEALTH SOUTH BAY


 *Website: www.ihpsocal.org*


OPERATION SAMAHAN - NATIONAL C

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

Provider ID: 417102

 2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410

 Phone: 844-200-2426

Fax: 619-474-3919

 After Hours Phone:
844-200-2426

License Number: 90000183

NPI: 1801907449

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Lao, Spanish

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:


OPERATION SAMAHAN -
NATIONAL C


 Website: www.operationsamahan.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

 2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410

 Phone: 844-200-2426

 After Hours Phone:
844-200-2426

License Number: NP22974

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Lao, Spanish

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:


OPERATION SAMAHAN -
NATIONAL C

 Website: www.operationsamahan.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

 2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410

 Phone: 844-200-2426

Fax: 619-474-3919

 After Hours Phone:
844-200-2426

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Lao, Spanish

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:


OPERATION SAMAHAN -
NATIONAL C


 Website: www.operationsamahan.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

 2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410

 Phone: 844-200-2426

 After Hours Phone:
844-200-2426

License Number: NP95000203

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Lao, Spanish

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:


OPERATION SAMAHAN -
NATIONAL C

 Website: www.operationsamahan.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

 2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410

 Phone: 844-200-2426

 After Hours Phone:
844-200-2426

License Number: A74777

NPI: 1801907449

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Lao, Spanish

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN -
NATIONAL C


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

 Website: www.operationsamahan.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

 2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410

 Phone: (844) 200-2426

Fax: (619) 474-3919


 After Hours Phone: (844)
200-2426

License Number: 90000183

NPI: 1801907449

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Tagalog, Lao, Spanish


Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:


OPERATION SAMAHAN -
NATIONAL C

 Website: www.operationsamahan.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

 2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410

 Phone: (844) 200-2426


Fax: (619) 474-3919

 After Hours Phone: (844)
200-2426

NPI: 1801907449

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Tagalog, Lao, Spanish


Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:


OPERATION SAMAHAN -
NATIONAL C


 Website: www.operationsamahan.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

 2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410

 Phone: (844) 200-2426


 After Hours Phone: (844)
200-2426

License Number: NP95000203

NPI: 1801907449

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Tagalog, Lao, Spanish


Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:


OPERATION SAMAHAN -
NATIONAL C


 Website: www.operationsamahan.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

 2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410

 Phone: (844) 200-2426


 After Hours Phone: (844)
200-2426

License Number: A74777

NPI: 1801907449

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Tagalog, Lao, Spanish


Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:


OPERATION SAMAHAN -
NATIONAL C


 Website: www.operationsamahan.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

 2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410

 Phone: (844) 200-2426


 After Hours Phone: (844)
200-2426

License Number: NP22974

NPI: 1801907449

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Tagalog, Lao, Spanish

Cultural Competency: No


American Sign Language (ASL):
N

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA:
OPERATION SAMAHAN -
NATIONAL C*

 *Website: www.operationsamahan.org*


OPERATION SAMAHAN GRANGER SCHOOL BASED

Provider ID: 418302

 2101 GRANGER AVE
NATIONAL CITY, CA
91950-6208

 *Phone: 844-200-2426*

Fax: 619-434-8999

 *After Hours Phone:
844-200-2426*

License Number: 550002622

NPI: 1801907449


Accepting New Patients: Yes

 *Site English Spoken: Yes
Cultural Competency: No*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA:
OPERATION SAMAHAN
GRANGER SCHOOL BASED*

 *Website: www.operationsamahan.org*

OPERATION SAMAHAN GRANGER SCHOOL BASED

Provider ID: 418302

 2101 GRANGER AVE
NATIONAL CITY, CA
91950-6208

 *Phone: 844-200-2426*

Fax: 619-434-8999

 *After Hours Phone:*

844-200-2426

NPI: 1801907449


Accepting New Patients: Yes

 *Site English Spoken: Yes
Cultural Competency: No*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA:
OPERATION SAMAHAN
GRANGER SCHOOL BASED*

 *Website: www.operationsamahan.org*

OPERATION SAMAHAN GRANGER SCHOOL BASED

Provider ID: 418302

 2101 GRANGER AVE
NATIONAL CITY, CA
91950-6208

 *Phone: (844) 200-2426*

Fax: (619) 434-8999

 *After Hours Phone: (844)
200-2426*

License Number: 550002622

NPI: 1801907449


Accepting New Patients: Yes

 *Site English Spoken: Yes
Cultural Competency: No*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA:
OPERATION SAMAHAN
GRANGER SCHOOL BASED*

 *Website: www.operationsamahan.org*


OPERATION SAMAHAN GRANGER SCHOOL BASED

Provider ID: 418302

 2101 GRANGER AVE
NATIONAL CITY, CA
91950-6208

 *Phone: (844) 200-2426*

Fax: (619) 434-8999

 *After Hours Phone: (844)
200-2426*

NPI: 1801907449


Accepting New Patients: Yes

 *Site English Spoken: Yes
Cultural Competency: No*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA:
OPERATION SAMAHAN
GRANGER SCHOOL BASED*


 *Website: www.operationsamahan.org*

OPERATION SAMAHAN GRANGER SCHOOL BASED

Provider ID: 418302

 2101 GRANGER AVE
NATIONAL CITY, CA
91950-6208

 *Phone: 844-200-2426*

 *After Hours Phone:
844-200-2426*


License Number: NP95000203

NPI: 1801907449

Accepting New Patients: Yes

 *Site English Spoken: Yes
Cultural Competency: No*

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA:
OPERATION SAMAHAN*

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

GRANGER SCHOOL BASED


 Website: www.operationsamahan.org


OPERATION SAMAHAN

GRANGER SCHOOL BASED

Provider ID: 418302

 2101 GRANGER AVE
NATIONAL CITY, CA
91950-6208

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

License Number: NP95000203

NPI: 1801907449

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

GRANGER SCHOOL BASED


 Website: www.operationsamahan.org

SAN YSIDRO HEALTH


NATIONAL CITY

Provider ID: 227412

 1136 D AVE
NATIONAL CITY, CA
91950-3412

 Phone: 619-662-4100

Fax: 619-474-3722

 After Hours Phone:
619-662-4100

License Number: G46444


NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN

YSIDRO HEALTH NATIONAL
CITY


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH

NATIONAL CITY

Provider ID: 227412

 1136 D AVE
NATIONAL CITY, CA
91950-3412

 Phone: 619-662-4100

Fax: 619-474-3722

 After Hours Phone:
619-662-4100

License Number: A55469

NPI: 1598122871


Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN

YSIDRO HEALTH NATIONAL
CITY


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH

NATIONAL CITY

Provider ID: 227412

 1136 D AVE
NATIONAL CITY, CA
91950-3412

 Phone: 619-428-4463

 After Hours Phone:

619-428-4463

License Number: G71855

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN

YSIDRO HEALTH NATIONAL
CITY


 Website: www.ihpsocal.org


SAN YSIDRO HEALTH

NATIONAL CITY

Provider ID: 227412

 1136 D AVE
NATIONAL CITY, CA
91950-3412

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A103218

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN

YSIDRO HEALTH NATIONAL
CITY

 Website: www.ihpsocal.org






SAN YSIDRO HEALTH

NATIONAL CITY

Provider ID: 227412


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 1136 D AVE
NATIONAL CITY, CA
91950-3412
 Phone: 619-662-4100
Fax: 619-336-2323
 After Hours Phone:
619-662-4100
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY







Provider ID: 227412

 1136 D AVE
NATIONAL CITY, CA
91950-3412
 Phone: 619-662-4100
Fax: 619-336-2323
 After Hours Phone:
619-662-4100
License Number: A112571
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY


Provider ID: 227412

 1136 D AVE
NATIONAL CITY, CA
91950-3412
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: C55180
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY







Provider ID: 227412

 1136 D AVE
NATIONAL CITY, CA
91950-3412
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A165184
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY
 Website: www.ihpsocal.org





SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

 1136 D AVE
NATIONAL CITY, CA
91950-3412
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A138919
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412




 1136 D AVE
NATIONAL CITY, CA
91950-3412
 Phone: 619-336-2300
 After Hours Phone:
619-336-2300
License Number: A78373
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal



D1. Clínicas de salud con calificación federal





Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH NATIONAL CITY
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH NATIONAL CITY







Provider ID: 227412
 1136 D AVE
NATIONAL CITY, CA
91950-3412
 *Phone: (619) 662-4100*
Fax: (619) 474-3722
 *After Hours Phone: (619) 662-4100*
License Number: G46444
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH NATIONAL CITY
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH NATIONAL CITY


Provider ID: 227412
 1136 D AVE
NATIONAL CITY, CA
91950-3412
 *Phone: (619) 662-4100*
Fax: (619) 474-3722







 *After Hours Phone: (619) 662-4100*
License Number: A55469
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH NATIONAL CITY
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH NATIONAL CITY






Provider ID: 227412
 1136 D AVE
NATIONAL CITY, CA
91950-3412
 *Phone: (619) 662-4100*
Fax: (619) 336-2323
 *After Hours Phone: (619) 662-4100*
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH NATIONAL CITY
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412
 1136 D AVE
NATIONAL CITY, CA
91950-3412
 *Phone: (619) 662-4100*
Fax: (619) 474-3722

Provider ID: 227412
 1136 D AVE
NATIONAL CITY, CA
91950-3412
 *Phone: (619) 662-4100*
Fax: (619) 336-2323
 *After Hours Phone: (619) 662-4100*
License Number: A112571
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH NATIONAL CITY
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412
 1136 D AVE
NATIONAL CITY, CA
91950-3412
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
License Number: C55180
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH NATIONAL CITY

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


CITY


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

 1136 D AVE
NATIONAL CITY, CA
91950-3412

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


License Number: A103218

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

 1136 D AVE
NATIONAL CITY, CA
91950-3412

 Phone: (619) 428-4463

 After Hours Phone: (619)
428-4463

License Number: G71855

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

 1136 D AVE
NATIONAL CITY, CA
91950-3412

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


License Number: A165184

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

 1136 D AVE
NATIONAL CITY, CA
91950-3412


 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

License Number: A138919

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY


 Website: www.ihpsocal.org

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

 1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

 Phone: (619) 515-2399

 After Hours Phone: (619)
515-2399

License Number: A176878

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR SD NATIONAL
CITY

 Website: www.fhcsd.org

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930



 1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

 Phone: (619) 515-2399






 After Hours Phone: (619)

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal






515-2399
License Number: A163862
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY
 Website: www.fhcsd.org

FAMILY HEALTH CTR SD NATIONAL CITY





Provider ID: 418930
 1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856
 Phone: (619) 515-2399
 After Hours Phone: (619) 515-2399
License Number: 20A18460
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY
 Website: www.fhcsd.org

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930






 1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856
 Phone: 619-515-2399
 After Hours Phone: 619-515-2399
License Number: 20A18460
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY
 Website: www.fhcsd.org

FAMILY HEALTH CTR SD NATIONAL CITY




Provider ID: 418930
 1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856
 Phone: 619-515-2399
Fax: 619-269-0053
 After Hours Phone: 619-515-2399
License Number: 550000465
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY

 Website: www.fhcsd.org

FAMILY HEALTH CTR SD NATIONAL CITY

































Provider ID: 418930
 1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856
 Phone: 619-515-2399
Fax: 619-269-0053
 After Hours Phone: 619-515-2399
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY
 Website: www.fhcsd.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418
 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: A118227
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Tagalog, Spanish
Cultural Competency: No
American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: SAN YSIDRO HEALTH PARADISE HILLS</p> <p> <i>Website: www.ihpsocal.org</i></p>	<p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY</p> <p> <i>Website: www.fhcsd.org</i></p>	<p> <i>After Hours Phone: 619-515-2399</i></p> <p><i>License Number: A163862</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY</p> <p> <i>Website: www.fhcsd.org</i></p>
<p>FAMILY HEALTH CTR SD NATIONAL CITY</p> <p><i>Provider ID: 418930</i></p> <p> 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856</p> <p> <i>Phone: 619-515-2399</i></p> <p> <i>After Hours Phone: 619-515-2399</i></p> <p><i>License Number: PA55660</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY</p> <p> <i>Website: www.fhcsd.org</i></p>	<p>FAMILY HEALTH CTR SD NATIONAL CITY</p> <p><i>Provider ID: 418930</i></p> <p> 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856</p> <p> <i>Phone: 619-515-2399</i></p> <p> <i>After Hours Phone: 619-515-2399</i></p> <p><i>License Number: A176878</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY</p> <p> <i>Website: www.fhcsd.org</i></p>	<p>FAMILY HEALTH CTR SD NATIONAL CITY</p> <p><i>Provider ID: 418930</i></p> <p> 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856</p> <p> <i>Phone: (619) 515-2399</i></p> <p><i>Fax: (619) 269-0053</i></p> <p> <i>After Hours Phone: (619) 515-2399</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY</p> <p> <i>Website: www.fhcsd.org</i></p>
<p>FAMILY HEALTH CTR SD NATIONAL CITY</p> <p><i>Provider ID: 418930</i></p> <p> 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856</p> <p> <i>Phone: 619-515-2399</i></p> <p> <i>After Hours Phone: 619-515-2399</i></p> <p><i>License Number: NP95010663</i></p> <p><i>NPI: 1134155377</i></p>	<p>FAMILY HEALTH CTR SD NATIONAL CITY</p> <p><i>Provider ID: 418930</i></p> <p> 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856</p> <p> <i>Phone: 619-515-2399</i></p>	<p>FAMILY HEALTH CTR SD NATIONAL CITY</p>


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Provider ID: 418930

 1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

 Phone: (619) 515-2399

 Fax: (619) 269-0053

 After Hours Phone: (619)
515-2399

License Number: 550000465

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR SD NATIONAL
CITY


 Website: www.fhcsd.org

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

 1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

 Phone: (619) 515-2399

 After Hours Phone: (619)
515-2399

License Number: PA55660

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR SD NATIONAL


CITY


 Website: www.fhcsd.org

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

 1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

 Phone: (619) 515-2399

 After Hours Phone: (619)
515-2399

License Number: NP95010663

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR SD NATIONAL
CITY


 Website: www.fhcsd.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A138534

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:

Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A167529

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956

 Phone: (619) 662-4100

 After Hours Phone: (619)

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

662-4100
License Number: A146819
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418
 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: A157488
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
PARADISE HILLS**
Provider ID: 227418
 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956
 Phone: (619) 662-4100
Fax: (619) 259-2806
 After Hours Phone: (619)
662-4100
License Number: 20A11518
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Spanish
Cultural Competency: No
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418
 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: G88347
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Spanish
Cultural Competency: No

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418
 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956
 Phone: (619) 662-4100
Fax: (619) 259-2807
 After Hours Phone: (619)
662-4100
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Spanish
Cultural Competency: No
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418
 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956
 Phone: (619) 662-4100
Fax: (619) 259-2807

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 After Hours Phone: (619)
662-4100

License Number: A113624

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A138534

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A146819

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A118227

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956

 Phone: (619) 662-4100

Fax: (619) 259-2807

 After Hours Phone: (619)
662-4100

License Number: A71304

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

 1136 D AVE
NATIONAL CITY, CA
91950-3412

 Phone: (619) 336-2300

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 After Hours Phone: (619)
336-2300

License Number: A78373

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956

 Phone: 619-662-4100

Fax: 619-259-2807

 After Hours Phone:
619-662-4100

License Number: A71304

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956

 Phone: 619-662-4100

Fax: 619-259-2807

 After Hours Phone:
619-662-4100

License Number: A113624

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956

 Phone: 619-662-4100

Fax: 619-259-2807

 After Hours Phone:
619-662-4100

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956

 Phone: 619-662-4100

Fax: 619-259-2806

 After Hours Phone:
619-662-4100

License Number: 20A11518

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS




Provider ID: 227418






 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956






 Phone: 619-662-4100




D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal




D1. Clínicas de salud con calificación federal







 After Hours Phone:
619-662-4100
License Number: G88347
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
PARADISE HILLS**
Provider ID: 227418
 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A157488
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
PARADISE HILLS**
Provider ID: 227418
 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A167529
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
PARADISE HILLS**
Provider ID: 227418
 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
Fax: (619) 259-2807
 After Hours Phone: (619)
662-4100
NPI: 1598907487
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
 Site Languages(s) Spoken:
Tagalog, Spanish
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: syhealth.org/clinics/paradise-hills-family-clinic

**FAMILY HEALTH CTR SD
NATIONAL CITY**
Provider ID: 418930
 1000 EUCLID AVE
NATIONAL CITY, CA 91950
 Phone: (619) 515-2399
Fax: (619) 269-0053
 After Hours Phone: (619)
515-2399
License Number: 550000465
NPI: 1417409228
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
 Hours: M 8:30AM-3:30PM
TU 10:30AM-5:30PM
W 8:30AM-3:30PM
TH 10:30AM-5:30PM
F 8:30AM-3:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: Family
Health Centers of San Diego
 Website: www.fhcsd.org
Email: lucinaj@fhcsd.org

SAN YSIDRO HEALTH

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NATIONAL CITY

Provider ID: 227412

1136 D AVE
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 474-3722

After Hours Phone: (619)
662-4100

NPI: 1003869363

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Cultural Competency: N

Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: syhealth.org/clinics/national-city-family-clinic-1

OPERATION SAMAHAN

GRANGER SCHOOL BASED

Provider ID: 418302

2101 GRANGER AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 434-8999

After Hours Phone: (844)
200-2426

License Number: 550002622

NPI: 1205134517

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Operation
Samahan

Website: www.operationsamahan.org

OPERATION SAMAHAN -

NATIONAL C

Provider ID: 417102

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 474-3919

After Hours Phone: (844)
200-2426

License Number: 090000183

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Site Languages(s) Spoken:
Tagalog, Lao, Spanish

Cultural Competency: N

Hours: M-TH
8:00AM-6:00PM
F 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Operation
Samahan

Website: www.operationsamahan.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

Fax: (619) 434-7310

After Hours Phone: (619)
434-7308

NPI: 1336353721

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

Hours: TH 8:00AM-2:00PM
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: La
Maestra Family Clinic

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

330 E 8TH ST
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 434-3514

After Hours Phone: (619)
662-4100

NPI: 1851757215

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog


Cultural Competency: N

Hours: M-F
8:00AM-5:00PM

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal







American Sign Language (ASL): Accepting New Patients: Yes
N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
 *Website:* www.syhealth.org
Email: dinah.pierce@syhealth.org

 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website:* www.vistacommunityclinic.org







Accepting New Patients: Yes
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website:* www.vistacommunityclinic.org

OCEANSIDE







VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 2057-6043
 *Phone:* 760-631-5000
 *After Hours Phone:* 760-631-5000
License Number: 20A18374
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website:* www.vistacommunityclinic.org




VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 2057-6043
 *Phone:* 760-631-5000
 *After Hours Phone:* 760-631-5000
License Number: A149340
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website:* www.vistacommunityclinic.org




VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 2057-6043
 *Phone:* 760-631-5000
 *After Hours Phone:* 760-631-5000
License Number: NP95009284
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website:* www.vistacommunityclinic.org




VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 2057-6043
 *Phone:* 760-631-5000
 *After Hours Phone:* 760-631-5000
License Number: 20A8949
NPI: 1598122871

VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 2057-6043
 *Phone:* 760-631-5000
 *After Hours Phone:* 760-631-5000
License Number: NP95003571
NPI: 1598122871

VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 2057-6043
 *Phone:* 760-631-5000
Fax: 760-414-3731
 *After Hours Phone:* 760-631-5000
License Number: A130883

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

4700 N RIVER RD
OCEANSIDE, CA
92057-6043

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

License Number: NP95016368

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

4700 N RIVER RD
OCEANSIDE, CA
92057-6043

Phone: 760-631-5000

After Hours Phone:

760-631-5000

License Number: NP95016368

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

PIER VIEW WAY

Provider ID: 402434

818 PIER VIEW WAY
OCEANSIDE, CA
92054-2803

Phone: 760-631-5000

Fax: 760-414-3892

After Hours Phone:
760-631-5000

License Number: 80000510

NPI: 1598122871

Accepting New Patients: No

Site English Spoken: Yes
Cultural Competency: Yes

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC PIER
VIEW WAY

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

PIER VIEW WAY

Provider ID: 402434

818 PIER VIEW WAY
OCEANSIDE, CA
92054-2803

Phone: 760-631-5000

Fax: 760-414-3892

After Hours Phone:
760-631-5000

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC PIER
VIEW WAY

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

4700 N RIVER RD
OCEANSIDE, CA 2057-6043

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

License Number: 20A18374

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC




Website: www.vistacommunityclinic.org

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 2057-6043
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000

License Number: 20A8949

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 2057-6043
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000

License Number: NP95003571

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 2057-6043
 Phone: (760) 631-5000
 Fax: (760) 414-3731

 After Hours Phone: (760)
631-5000

License Number: A130883

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 2057-6043
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000


License Number: A149340

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 2057-6043
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000

License Number: NP95009284

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 Website: www.vistacommunityclinic.org

TRUECARE

Provider ID: 480315

 3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

 Phone: (760) 433-3155

 After Hours Phone: (760)
433-3155

License Number: PA19825

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

 Website: N/A

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

TRUECARE

Provider ID: 480315

3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

Phone: (760) 433-3155

After Hours Phone: (760)
433-3155

License Number: PA53036

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: N/A

TRUECARE

Provider ID: 480315

3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

Phone: (760) 433-3155

Fax: (760) 736-8740

After Hours Phone: (760)
433-3155

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: N/A

TRUECARE

Provider ID: 480315

3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

Phone: (760) 433-3155

Fax: (760) 736-8740

After Hours Phone: (760)
433-3155

License Number: 80000240

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: N/A

TRUECARE

Provider ID: 480315

3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

License Number: NP21368

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: N/A

TRUECARE

Provider ID: 480315

3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

Phone: (760) 891-4667

After Hours Phone: (760)
891-4667

License Number: A131678

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: N/A

TRUECARE

Provider ID: 480315

3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

Phone: 760-433-3155

After Hours Phone:
760-433-3155

License Number: PA19825

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: N/A





TRUECARE

Provider ID: 480315



3220 MISSION AVE STE 1
OCEANSIDE, CA

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal



D1. Clínicas de salud con calificación federal




92058-1354
 Phone: 760-433-3155
 After Hours Phone:
760-433-3155
License Number: PA53036
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE


Provider ID: 480315
 3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354
 Phone: 760-433-3155
Fax: 760-736-8740
 After Hours Phone:
760-433-3155
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE




Provider ID: 480315
 3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354
 Phone: 760-433-3155

Fax: 760-736-8740
 After Hours Phone:
760-433-3155
License Number: 80000240
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE






Provider ID: 480315
 3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: NP21368
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE


Provider ID: 480315
 3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354
 Phone: 760-891-4667
 After Hours Phone:

760-891-4667
License Number: A131678
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

VISTA COMMUNITY CLINIC HORNE STREET






Provider ID: 402436
 517 N HORNE ST
OCEANSIDE, CA
92054-2518
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
License Number: NP95006826
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC HORNE
STREET
 Website: N/A

VISTA COMMUNITY CLINIC HORNE STREET







Provider ID: 402436
 517 N HORNE ST
OCEANSIDE, CA
92054-2518

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal







D1. Clínicas de salud con calificación federal

 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
License Number: 20A17371
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC HORNE STREET
 Website: N/A






VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436
 517 N HORNE ST
OCEANSIDE, CA
92054-2518
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
License Number: NP95007885
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC HORNE STREET
 Website: N/A

VISTA COMMUNITY CLINIC HORNE STREET







Provider ID: 402436
 517 N HORNE ST
OCEANSIDE, CA
92054-2518
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC HORNE STREET
 Website: N/A

VISTA COMMUNITY CLINIC HORNE STREET





Provider ID: 402436
 517 N HORNE ST
OCEANSIDE, CA
92054-2518
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
License Number: 80000745
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: Yes
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC HORNE

STREET
 Website: N/A

VISTA COMMUNITY CLINIC HORNE STREET



Provider ID: 402436
 517 N HORNE ST
OCEANSIDE, CA
92054-2518
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
License Number: 20A17371
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC HORNE STREET
 Website: N/A

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436
 517 N HORNE ST
OCEANSIDE, CA
92054-2518
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
License Number: NP95006826
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: VISTA COMMUNITY CLINIC HORNE STREET
 *Website: N/A*

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436

 517 N HORNE ST
OCEANSIDE, CA
92054-2518

 *Phone: 760-631-5000*

 *After Hours Phone: 760-631-5000*

License Number: NP95007885

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: VISTA COMMUNITY CLINIC HORNE STREET

 *Website: N/A*

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436

 517 N HORNE ST
OCEANSIDE, CA
92054-2518


 *Phone: 760-631-5000*

Fax: 760-414-3892

 *After Hours Phone: 760-631-5000*

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: VISTA COMMUNITY CLINIC HORNE STREET

 *Website: N/A*

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436

 517 N HORNE ST
OCEANSIDE, CA
92054-2518

 *Phone: 760-631-5000*

Fax: 760-414-3892

 *After Hours Phone: 760-631-5000*

License Number: 80000745

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: Yes

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: VISTA COMMUNITY CLINIC HORNE STREET

 *Website: N/A*

VISTA COMMUNITY CLINIC PIER VIEW WAY

Provider ID: 402434

 818 PIER VIEW WAY
OCEANSIDE, CA
92054-2803

 *Phone: (760) 631-5000*


Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

License Number: 80000510

NPI: 1598122871

Accepting New Patients: No

 *Site English Spoken: Yes*
Cultural Competency: Yes
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: VISTA COMMUNITY CLINIC PIER VIEW WAY

 *Website: www.vistacommunityclinic.org*

VISTA COMMUNITY CLINIC PIER VIEW WAY

Provider ID: 402434

 818 PIER VIEW WAY
OCEANSIDE, CA
92054-2803


 *Phone: (760) 631-5000*

Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: VISTA COMMUNITY CLINIC PIER VIEW WAY

 *Website: www.vistacommunityclinic.org*

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

TRUECARE

Provider ID: 296476

605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

License Number: 20A7241

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

License Number: A131678

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

License Number: NP95012681

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

License Number: NP95013879

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

Phone: (760) 757-4566

After Hours Phone: (760)
757-4566

License Number: 20A15689

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

Phone: (760) 757-4566

After Hours Phone: (760)
757-4566

License Number: C152937

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes





Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: TRUECARE</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p><i>American Sign Language (ASL):</i>  <i>Site Languages(s) Spoken: Spanish</i></p> <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: TRUECARE</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p><i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i> N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: TRUECARE</i></p> <p> <i>Website: www.ihpsocal.org</i></p>
<p>TRUECARE</p> <p><i>Provider ID: 296476</i></p> <p> 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415</p> <p> <i>Phone: (760) 757-4566</i></p> <p> <i>After Hours Phone: (760) 757-4566</i></p> <p><i>License Number: PA22667</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i> N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: TRUECARE</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p>TRUECARE</p> <p><i>Provider ID: 296476</i></p> <p> 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415</p> <p> <i>Phone: (760) 757-4566</i></p> <p><i>Fax: (760) 736-8740</i></p> <p> <i>After Hours Phone: (760) 757-4566</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i> N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: TRUECARE</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p>TRUECARE</p> <p><i>Provider ID: 296476</i></p> <p> 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415</p> <p> <i>Phone: (760) 757-4566</i></p> <p><i>Fax: (760) 757-3004</i></p> <p> <i>After Hours Phone: (760) 757-4566</i></p> <p><i>License Number: A66289</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i> N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: TRUECARE</i></p> <p> <i>Website: www.ihpsocal.org</i></p>
<p>TRUECARE</p> <p><i>Provider ID: 296476</i></p> <p> 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415</p> <p> <i>Phone: (760) 757-4566</i></p> <p> <i>After Hours Phone: (760) 757-4566</i></p> <p><i>License Number: PA53036</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p>	<p>TRUECARE</p> <p><i>Provider ID: 296476</i></p> <p> 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415</p> <p> <i>Phone: (760) 757-4566</i></p> <p><i>Fax: (760) 736-8740</i></p> <p> <i>After Hours Phone: (760) 757-4566</i></p> <p><i>License Number: 80000240</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p>	<p>TRUECARE</p> <p><i>Provider ID: 296477</i></p> <p> 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415</p> <p> <i>Phone: (760) 757-4566</i></p> <p><i>Fax: (760) 757-3004</i></p> <p> <i>After Hours Phone: (760) 757-4566</i></p>

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

License Number: A116562

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 296478

605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

Phone: (760) 757-4566

After Hours Phone: (760) 757-4566

License Number: NP21368

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 296479

605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

Phone: (760) 757-4566

After Hours Phone: (760) 757-4566

License Number: A64435

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

Phone: 760-736-6767

After Hours Phone: 760-736-6767

License Number: 20A7241

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

605 CROUCH ST BLDG C
OCEANSIDE, CA

92054-4415

Phone: 760-736-6767

After Hours Phone: 760-736-6767

License Number: A131678

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

Phone: 760-736-6767

After Hours Phone: 760-736-6767

License Number: NP95013879

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE


Website: www.ihpsocal.org

TRUECARE


Provider ID: 296476

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NP95012681

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-757-4566

 After Hours Phone:
760-757-4566

License Number: 20A15689

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish


Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-757-4566

 After Hours Phone:
760-757-4566

License Number: C152937

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish


Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-757-4566

 After Hours Phone:
760-757-4566

License Number: PA22667

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish


Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-757-4566

 After Hours Phone:
760-757-4566

License Number: PA53036

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish


Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org


TRUECARE

Provider ID: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-757-4566

Fax: 760-736-8740

 After Hours Phone:
760-757-4566

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 Website: www.ihpsocal.org N

TRUECARE

Provider ID: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-757-4566

Fax: 760-736-8740

 After Hours Phone:
760-757-4566

License Number: 80000240

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish


Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org N


TRUECARE

Provider ID: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-757-4566

Fax: 760-757-3004

 After Hours Phone:
760-757-4566

License Number: A66289

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE N

 Website: www.ihpsocal.org N


TRUECARE

Provider ID: 296477

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-757-4566

Fax: 760-757-3004

 After Hours Phone:
760-757-4566

License Number: A116562

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org N

TRUECARE

Provider ID: 296478

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-757-4566

 After Hours Phone:
760-757-4566

License Number: NP21368

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:

Spanish

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org N

TRUECARE

Provider ID: 296479

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-757-4566

 After Hours Phone:
760-757-4566

License Number: A64435

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org N

VISTA COMMUNITY CLINIC PIER VIEW WAY

Provider ID: 402434

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

License Number: 080000510

NPI: 1629357355

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

Hours: M-TU
8:00AM-5:00PM
W 8:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)

VISTA COMMUNITY CLINIC PIER VIEW WAY

Provider ID: 402434

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

License Number: 080000510

NPI: 1629357355

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

Hours: M-TU
8:00AM-5:00PM
W 8:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)

TRUECARE

Provider ID: 480247

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

License Number: 080000531

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: N/A

TRUECARE

Provider ID: 480247

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

License Number: 080000637

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: N/A

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

License Number: 080000745

NPI: 1609094036

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)


VISTA COMMUNITY CLINIC HORNE STREET

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Provider ID: 402436

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

License Number: 080000745


NPI: 1609094036

Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Y

Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892


 After Hours Phone: (760)
631-5000


License Number: 080000002

NPI: 1316501562

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL): 631-5000

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892


 After Hours Phone: (760)
631-5000


License Number: 550003781

NPI: 1316501562

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)


License Number: 550004110

NPI: 1316501562

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892


 After Hours Phone: (760)
631-5000


License Number: 080000002

NPI: 1649662719

Accepting New Patients: Yes


Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000


License Number: 550003781

NPI: 1649662719

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

License Number: 550004110


NPI: 1649662719

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y

Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892


 After Hours Phone: (760) 631-5000


License Number: 550003781

NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000


License Number: 080000002

NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892


 After Hours Phone: (760) 631-5000


License Number: 550004110

NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):
N

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: IHP of Southern Cal-PHP
 *Website: www.vistacommu-nityclinic.org*


PAUMA VALLEY


NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Provider ID: 206267

 16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524

 *Phone: (760) 742-9919*

 *After Hours Phone: (760) 742-9919*

License Number: A114419

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE PAUMA VALLEY


 *Website: www.ihpsocal.org*


NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Provider ID: 206267

 16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524

 *Phone: (760) 742-9919*

 *After Hours Phone: (760) 742-9919*

License Number: G61829

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE PAUMA VALLEY


 *Website: www.ihpsocal.org*

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Provider ID: 206267

 16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524

 *Phone: (760) 742-9919*

Fax: (858) 633-4696

 *After Hours Phone: (760) 742-9919*

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

 *Website: www.ihpsocal.org*


NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Provider ID: 206267

 16650 HIGHWAY 76
PAUMA VALLEY, CA

92061-9524

 *Phone: (760) 742-9919*

Fax: (858) 633-4696

 *After Hours Phone: (760) 742-9919*


License Number: 80000611

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE PAUMA VALLEY


 *Website: www.ihpsocal.org*


NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Provider ID: 206267

 16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524

 *Phone: 760-742-9919*

 *After Hours Phone: 760-742-9919*

License Number: A114419

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

 *Website: www.ihpsocal.org*

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Provider ID: 206267

16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524

Phone: 760-742-9919

After Hours Phone:
760-742-9919

License Number: G61829

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Provider ID: 206267

16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524

Phone: 760-742-9919

Fax: 858-633-4696

After Hours Phone:
760-742-9919

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Provider ID: 206267

16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524

Phone: 760-742-9919

Fax: 858-633-4696

After Hours Phone:
760-742-9919

License Number: 80000611

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Website: www.ihpsocal.org

POWAY

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY

HEALTH CENTER

Provider ID: 481187

13010 POWAY RD
POWAY, CA 92064-4520

Phone: 858-218-3000

After Hours Phone:
858-218-3000

License Number: PA23310

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY

HEALTH CENTER

Website: N/A

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY

HEALTH CENTER

Provider ID: 481187

13010 POWAY RD
POWAY, CA 92064-4520

Phone: 858-218-3000

Fax: 360-462-2742

After Hours Phone:
858-218-3000

License Number: 550004321

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY

HEALTH CENTER

Website: N/A

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY


HEALTH CENTER

Provider ID: 481187


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 13010 POWAY RD
POWAY, CA 92064-4520

 Phone: 858-218-3000

Fax: 360-462-2742

 After Hours Phone:
858-218-3000

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY


HEALTH CENTER


 Website: N/A

NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187

 13010 POWAY RD
POWAY, CA 92064-4520

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000


License Number: PA23310

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY


HEALTH CENTER

 Website: N/A

NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187

 13010 POWAY RD
POWAY, CA 92064-4520

 Phone: (858) 218-3000

Fax: (360) 462-2742

 After Hours Phone: (858)
218-3000

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY


HEALTH CENTER

 Website: N/A

NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187

 13010 POWAY RD
POWAY, CA 92064-4520

 Phone: (858) 218-3000

Fax: (360) 462-2742

 After Hours Phone: (858)
218-3000

License Number: 550004321

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY


HEALTH CENTER


 Website: N/A

NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187

 13010 POWAY RD
POWAY, CA 92064-4520

 Phone: 858-218-3000

 After Hours Phone:
858-218-3000

License Number: A119661

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY


HEALTH CENTER

 Website: N/A

NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187

 13010 POWAY RD
POWAY, CA 92064-4520







 Phone: 858-218-3000

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal






D1. Clínicas de salud con calificación federal

 After Hours Phone:
858-218-3000
License Number: A120771
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE GOLD FAMILY
HEALTH CENTER
 Website: N/A







NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER



Provider ID: 481187
 13010 POWAY RD
POWAY, CA 92064-4520
 Phone: (858) 218-3000
 After Hours Phone: (858)
218-3000
License Number: A119661
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE GOLD FAMILY
HEALTH CENTER
 Website: N/A

NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187
 13010 POWAY RD
POWAY, CA 92064-4520
 Phone: (858) 218-3000
 After Hours Phone: (858)
218-3000
License Number: A120771
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE GOLD FAMILY
HEALTH CENTER
 Website: N/A








NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187
 13010 POWAY RD
POWAY, CA 92064
 Phone: (858) 218-3000
 Fax: (360) 462-2742
 After Hours Phone: (858)
218-3000
License Number: 550004321
NPI: 1023518768
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F

8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: N/A


RAMONA

TRUECARE

Provider ID: 449438
 220 ROTANZI ST
RAMONA, CA 92065
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760)
736-6767
License Number: 080000149
NPI: 1245246917
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-0:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: www.ihpsocal.org




SAN DIEGO

SAN DIEGO FAMILY CARE

Provider ID: 482070
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 Phone: 858-810-8700  After Hours Phone: 858-810-8700 License Number: NP23847 NPI: 1598122871 Accepting New Patients: Yes  Site English Spoken: yes  Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN DIEGO FAMILY CARE  Website: www.sdfamilycare.org	<p>.org</p> <p>SAN DIEGO FAMILY CARE Provider ID: 482070  7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307  Phone: 858-810-8700  After Hours Phone: 858-810-8700 License Number: G70886 NPI: 1598122871 Accepting New Patients: Yes  Site English Spoken: yes  Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN DIEGO FAMILY CARE  Website: www.sdfamilycare.org</p>	<p>N</p> <p> Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN DIEGO FAMILY CARE  Website: www.sdfamilycare.org</p> <p>SAN DIEGO FAMILY CARE Provider ID: 482070  7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307  Phone: 858-810-8700  After Hours Phone: 858-810-8700 License Number: A61238 NPI: 1598122871 Accepting New Patients: Yes  Site English Spoken: yes  Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN DIEGO FAMILY CARE  Website: www.sdfamilycare.org</p>
<p>SAN DIEGO FAMILY CARE Provider ID: 482070  7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307  Phone: 858-810-8700  After Hours Phone: 858-810-8700 License Number: NP16433 NPI: 1598122871 Accepting New Patients: Yes  Site English Spoken: yes  Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN DIEGO FAMILY CARE  Website: www.sdfamilycare.org</p>	<p>SAN DIEGO FAMILY CARE Provider ID: 482070  7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307  Phone: 858-810-8700  After Hours Phone: 858-810-8700 License Number: A137415 NPI: 1598122871 Accepting New Patients: Yes  Site English Spoken: yes  Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese Cultural Competency: No American Sign Language (ASL):</p>	<p>SAN DIEGO FAMILY CARE Provider ID: 482070  7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307  Phone: 858-810-8700  After Hours Phone: 858-810-8700 License Number: A72833 NPI: 1598122871 Accepting New Patients: Yes</p>

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


 Site English Spoken: yes
 Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN DIEGO FAMILY CARE
 Website: www.sdfamilycare.org







SAN DIEGO FAMILY CARE

Provider ID: 482070
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
 Phone: 858-810-8700
 After Hours Phone: 858-810-8700
License Number: A92173
NPI: 1598122871


Accepting New Patients: Yes
 Site English Spoken: yes
 Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN DIEGO FAMILY CARE
 Website: www.sdfamilycare.org





SAN DIEGO FAMILY CARE

Provider ID: 482070
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700
 After Hours Phone: 858-810-8700
License Number: A94449
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: yes
 Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN DIEGO FAMILY CARE
 Website: www.sdfamilycare.org




SAN DIEGO FAMILY CARE

Provider ID: 482070
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
 Phone: 858-810-8700
 After Hours Phone: 858-810-8700
License Number: C174985
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: yes
 Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN DIEGO FAMILY CARE
 Website: www.sdfamilycare.org






www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
 Phone: 858-810-8700
 After Hours Phone: 858-810-8700
License Number: G41532
NPI: 1598122871






































Accepting New Patients: Yes
 Site English Spoken: yes
 Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN DIEGO FAMILY CARE
 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
 Phone: (858) 810-8700
 After Hours Phone: (858) 810-8700
License Number: 20A12402
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: yes
 Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese
Cultural Competency: No
American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN DIEGO FAMILY CARE</p> <p> Website: www.sdfamilycare.org</p>	<p> Site English Spoken: yes</p> <p> Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN DIEGO FAMILY CARE</p> <p> Website: www.sdfamilycare.org</p>	<p> Phone: (858) 810-8700</p> <p> After Hours Phone: (858) 810-8700</p> <p>License Number: A72833</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: yes</p> <p> Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN DIEGO FAMILY CARE</p> <p> Website: www.sdfamilycare.org</p>
<p>SAN DIEGO FAMILY CARE</p> <p>Provider ID: 482070</p> <p> 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307</p> <p> Phone: (858) 810-8700</p> <p> After Hours Phone: (858) 810-8700</p> <p>License Number: A119010</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: yes</p> <p> Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN DIEGO FAMILY CARE</p> <p> Website: www.sdfamilycare.org</p>	<p>SAN DIEGO FAMILY CARE</p> <p>Provider ID: 482070</p> <p> 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307</p> <p> Phone: (858) 810-8700</p> <p> After Hours Phone: (858) 810-8700</p> <p>License Number: A61238</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: yes</p> <p> Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN DIEGO FAMILY CARE</p> <p> Website: www.sdfamilycare.org</p>	<p>SAN DIEGO FAMILY CARE</p> <p>Provider ID: 482070</p> <p> 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307</p> <p> Phone: (858) 810-8700</p> <p> After Hours Phone: (858) 810-8700</p> <p>License Number: A92173</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: yes</p> <p> Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN DIEGO FAMILY CARE</p> <p> Website: www.sdfamilycare.org</p>
<p>SAN DIEGO FAMILY CARE</p> <p>Provider ID: 482070</p> <p> 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307</p> <p> Phone: (858) 810-8700</p> <p> After Hours Phone: (858) 810-8700</p> <p>License Number: A137415</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p>	<p>SAN DIEGO FAMILY CARE</p> <p>Provider ID: 482070</p> <p> 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307</p>	









































D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>.org</p> <p>SAN DIEGO FAMILY CARE Provider ID: 482070</p> <p> 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307</p> <p> Phone: (858) 810-8700</p> <p> After Hours Phone: (858) 810-8700</p> <p>License Number: A94449 NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: yes</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN DIEGO FAMILY CARE</p> <p> Website: www.sdfamilycare.org</p>	<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN DIEGO FAMILY CARE</p> <p> Website: www.sdfamilycare.org</p> <p>SAN DIEGO FAMILY CARE Provider ID: 482070</p> <p> 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307</p> <p> Phone: (858) 810-8700</p> <p> After Hours Phone: (858) 810-8700</p> <p>License Number: G41532 NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: yes</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN DIEGO FAMILY CARE</p> <p> Website: www.sdfamilycare.org</p>	<p><input type="checkbox"/> Site English Spoken: yes</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN DIEGO FAMILY CARE</p> <p> Website: www.sdfamilycare.org</p> <p>SAN DIEGO FAMILY CARE Provider ID: 482070</p> <p> 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307</p> <p> Phone: (858) 810-8700</p> <p> After Hours Phone: (858) 810-8700</p> <p>License Number: NP16433 NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: yes</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN DIEGO FAMILY CARE</p> <p> Website: www.sdfamilycare.org</p>
<p>SAN DIEGO FAMILY CARE Provider ID: 482070</p> <p> 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307</p> <p> Phone: (858) 810-8700</p> <p> After Hours Phone: (858) 810-8700</p> <p>License Number: C174985 NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: yes</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL):</p>	<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN DIEGO FAMILY CARE</p> <p> Website: www.sdfamilycare.org</p> <p>SAN DIEGO FAMILY CARE Provider ID: 482070</p> <p> 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307</p> <p> Phone: (858) 810-8700</p> <p> After Hours Phone: (858) 810-8700</p> <p>License Number: G70886 NPI: 1598122871</p> <p>Accepting New Patients: Yes</p>	<p><input type="checkbox"/> Site English Spoken: yes</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN DIEGO FAMILY CARE</p> <p> Website: www.sdfamilycare.org</p> <p>SAN DIEGO FAMILY CARE Provider ID: 482070</p> <p> 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307</p>

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 Phone: (858) 810-8700  After Hours Phone: (858) 810-8700 License Number: NP23847 NPI: 1598122871 Accepting New Patients: Yes  Site English Spoken: yes  Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN DIEGO FAMILY CARE  Website: www.sdfamilycare.org	<p>.org</p> <p>SAN DIEGO FAMILY CARE Provider ID: 482070  7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307  Phone: 858-810-8700  After Hours Phone: 858-810-8700 License Number: A119010 NPI: 1598122871 Accepting New Patients: Yes  Site English Spoken: yes  Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN DIEGO FAMILY CARE  Website: www.sdfamilycare.org</p>	American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: LINDA VISTA HEALTH CARE CTR  Website: www.sdfamilycare.org
<p>SAN DIEGO FAMILY CARE Provider ID: 482070  7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307  Phone: 858-810-8700  After Hours Phone: 858-810-8700 License Number: 20A12402 NPI: 1598122871 Accepting New Patients: Yes  Site English Spoken: yes  Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN DIEGO FAMILY CARE  Website: www.sdfamilycare.org</p>	<p>LINDA VISTA HEALTH CARE CTR Provider ID: 206046  6973 LINDA VISTA RD SAN DIEGO, CA 92111-6342  Phone: (858) 279-0925  After Hours Phone: (858) 279-0925 License Number: A119010 NPI: 1598122871 Accepting New Patients: Yes  Site English Spoken: Yes  Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian Cultural Competency: No</p>	<p>LINDA VISTA HEALTH CARE CTR Provider ID: 206046  6973 LINDA VISTA RD SAN DIEGO, CA 92111-6342  Phone: (858) 279-0925  After Hours Phone: (858) 279-0925 License Number: A144372 NPI: 1598122871 Accepting New Patients: Yes  Site English Spoken: Yes  Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: LINDA VISTA HEALTH CARE CTR  Website: www.sdfamilycare.org</p>
	<p>LINDA VISTA HEALTH CARE CTR Provider ID: 206046  6973 LINDA VISTA RD SAN DIEGO, CA 92111-6342  Phone: (858) 279-0925  After Hours Phone: (858) 279-0925</p>	<p>LINDA VISTA HEALTH CARE CTR Provider ID: 206046  6973 LINDA VISTA RD SAN DIEGO, CA 92111-6342  Phone: (858) 279-0925  After Hours Phone: (858) 279-0925</p>

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

License Number: C174985
NPI: 1598122871
Accepting New Patients: Yes


Site English Spoken: Yes
 Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR

 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925

License Number: DPM4434
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR

 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925

License Number: G41532
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR

 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925

License Number: G44807
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR

 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
 Phone: (858) 279-0925
Fax: (858) 279-0377
 After Hours Phone: (858)
279-0925

License Number: A93812

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR

 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR




Provider ID: 206046




 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
 Phone: (858) 279-0925
Fax: (858) 279-0377
 After Hours Phone: (858)



D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal




D1. Clínicas de salud con calificación federal

279-0925
License Number: G70886
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LINDA VISTA HEALTH CARE CTR
 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR
Provider ID: 206046
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
 Phone: (858) 279-0925
Fax: (858) 633-4680
 After Hours Phone: (858) 279-0925
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LINDA VISTA HEALTH CARE CTR
 Website: www.sdfamilycare.org




LINDA VISTA HEALTH CARE CTR
Provider ID: 206046
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
 Phone: (858) 810-8700
 After Hours Phone: (858) 810-8700



License Number: 20A12402
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LINDA VISTA HEALTH CARE CTR
 Website: www.sdfamilycare.org




LINDA VISTA HEALTH CARE CTR
Provider ID: 206046
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
 After Hours Phone: 858-279-0925

License Number: A119010
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian
Cultural Competency: No

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LINDA VISTA HEALTH CARE CTR
 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR
Provider ID: 206046
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
 After Hours Phone: 858-279-0925

License Number: A144372
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LINDA VISTA HEALTH CARE CTR
 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR
Provider ID: 206046
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
 After Hours Phone: 858-279-0925

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

License Number: C174985

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR


 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

 Phone: 858-279-0925

 After Hours Phone:
858-279-0925

License Number: DPM4434

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR


 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

 Phone: 858-279-0925

 After Hours Phone:
858-279-0925

License Number: G41532

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR


 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

 Phone: 858-279-0925

 After Hours Phone:
858-279-0925

License Number: G44807

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR

 Website: www.sdfamilycare.org


LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

 Phone: 858-279-0925

Fax: 858-279-0377

 After Hours Phone:
858-279-0925

License Number: A93812

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR

 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342


 Phone: 858-279-0925





Fax: 858-279-0377





 After Hours Phone:




D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal





858-279-0925
License Number: G70886
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR
 Website: www.sdfamilycare.org




**LINDA VISTA HEALTH CARE
CTR**
Provider ID: 206046
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
Fax: 858-633-4680
 After Hours Phone:
858-279-0925
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR
 Website: www.sdfamilycare.org

**LINDA VISTA HEALTH CARE
CTR**
Provider ID: 206046
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
 Phone: 858-810-8700
 After Hours Phone:
858-810-8700
License Number: 20A12402
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR
 Website: www.sdfamilycare.org

**FAMILY HLTH CTR SD
HILLCREST**
Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2400
 After Hours Phone: (619)
515-2400
License Number: 20A17836
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org


**FAMILY HLTH CTR SD
HILLCREST**
Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
License Number: 20A11612
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

**FAMILY HLTH CTR SD
HILLCREST**
Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
License Number: 20A12504
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org




PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
License Number: 20A14794
NPI: 1134155377


Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
License Number: 20A15459
NPI: 1134155377


Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
License Number: 20A17702
NPI: 1134155377




Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
License Number: 20A15413
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

FAMILY HLTH CTR SD HILLCREST




Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
License Number: 20A17657
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
License Number: 20A17926
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):
N

 Accessibility: CONTACT


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

PROVIDER



Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

License Number: 20A19399

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

License Number: A109633

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No




American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

License Number: A136616

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

License Number: A100333

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

License Number: A119631

NPI: 1134155377

Accepting New Patients: Yes



Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

License Number: A140324

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):
N

 Accessibility: CONTACT

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

License Number: A154708

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

License Number: A171135

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

License Number: A180044

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

License Number: A169207

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

License Number: A177462

NPI: 1134155377

Accepting New Patients: Yes




Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

License Number: A70175

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N



 Accessibility: CONTACT

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
License Number: A80153
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
License Number: A80461
NPI: 1134155377


Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
License Number: C52451
NPI: 1134155377


Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
License Number: DC31024
NPI: 1134155377



Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
License Number: DC33150
NPI: 1134155377




Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
License Number: DC33688
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):
N

 Accessibility: CONTACT

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

License Number: G16236

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

License Number: NP18098

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545


License Number: NP95001899

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

License Number: G80316

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

License Number: NP7374

NPI: 1134155377

Accepting New Patients: Yes



Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

License Number: NP95005103

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
License Number: NP95005293
NPI: 1134155377



Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
License Number: PA21385
NPI: 1134155377


Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
License Number: PA23231
NPI: 1134155377


Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
License Number: PT12930
NPI: 1134155377




Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
License Number: PT25155
NPI: 1134155377




Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
License Number: PT28061
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):
N

 Accessibility: CONTACT


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

License Number: PT292351

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

License Number: PT293536

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No




American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

License Number: PT296559

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

License Number: PT292613

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

License Number: PT295173

NPI: 1134155377

Accepting New Patients: Yes




Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

License Number: PT40975

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST




Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
Fax: (619) 501-9645
 After Hours Phone: (619)
515-2545
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
Fax: (619) 501-9645
 After Hours Phone: (619)
515-2545




License Number: 550003099
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org



FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
Fax: (619) 501-9645
 After Hours Phone: (619)
515-2545

License Number: A95356
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: 619-515-2400
 After Hours Phone:
619-515-2400

License Number: 20A17836
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org



FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
 After Hours Phone:
619-515-2545


License Number: 20A11612
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
 After Hours Phone:
619-515-2545

License Number: 20A12504
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No




American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: 20A14794
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: 20A15413
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: 20A15459
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: 20A17702
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: 20A17657
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST




Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: 20A17926
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: 20A19399
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: A100333
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: A109633
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):



N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: A119631
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: A136616
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST




Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: A140324
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: A154708
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: A169207
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: A171135
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: A177462
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*



FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: A180044
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: A70175
NPI: 1134155377




Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: A80153
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: A80461
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: C52451
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: DC31024
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: DC33150
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST




Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: DC33688
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: G16236
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: G80316
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: NP18098
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: NP7374
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: NP95001899
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST



Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: NP95005103
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*




FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: NP95005293
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*


FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: PA21385
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*


FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: PA23231
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*




FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: PT12930
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*


FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: PT25155
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: PT28061
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*

License Number: PT292351
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*

License Number: PT292613
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*

License Number: PT293536
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*

License Number: PT295173
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*

License Number: PT296559
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*




License Number: PT40975
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 Website: www.fhcsd.org


FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
Fax: 619-501-9645
 After Hours Phone: 619-515-2545
License Number: 550003099
NPI: 1134155377



Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 Website: www.fhcsd.org




FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
Fax: 619-501-9645
 After Hours Phone: 619-515-2545
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): Cultural Competency: No
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 Website: www.fhcsd.org




FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
Fax: 619-501-9645
 After Hours Phone: 619-515-2545
License Number: A95356
NPI: 1134155377


Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 Website: www.fhcsd.org




SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
NPI: 1598122871



Accepting New Patients: Yes
 Site English Spoken: Yes

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED
 Website: N/A




SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: 20A7502
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED
 Website: N/A

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403
 Phone: (619) 662-4100
 After Hours Phone: (619)

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

662-4100
License Number: 550003882
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED
 Website: N/A

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: NP95005999
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED
 Website: N/A

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED
 Website: N/A

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: 20A7502
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED
 Website: N/A

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: 550003882
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED
 Website: N/A

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: NP95005999
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


YSIDRO HEALTH COMMUNITY
HEIGHTS FAMILY MED


 Website: N/A

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH


CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

License Number: A103099

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH


CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424


License Number: A114181


NPI: 1134155377

Accepting New Patients: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

License Number: A126181

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424


License Number: A132576

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH

CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH

CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH

CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH

CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH

CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

License Number: A51318

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH

CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

License Number: A68463

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal



CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

License Number: A95577

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: NORTH



PARK FAMILY HEALTH CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: NORTH PARK FAMILY HEALTH



CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: NORTH PARK FAMILY HEALTH



CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

License Number: PA21042

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS

 *Website: www.fhcsd.org*


NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: (619) 515-2424*

Fax: (619) 683-7586

 *After Hours Phone: (619) 515-2424*

NPI: 1134155377


Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS

 *Website: www.fhcsd.org*


NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: (619) 515-2424*

Fax: (619) 683-7586

 *After Hours Phone: (619) 515-2424*

License Number: 90000469

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: NORTH PARK FAMILY HEALTH


CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: 619-515-2424*

 *After Hours Phone: 619-515-2424*

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: NORTH PARK FAMILY HEALTH


CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: 619-515-2424*

 *After Hours Phone: 619-515-2424*

License Number: 20A14919

NPI: 1134155377


Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: NORTH PARK FAMILY HEALTH


CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: 619-515-2424*

 *After Hours Phone: 619-515-2424*

License Number: A103099

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: NORTH PARK FAMILY HEALTH

CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH

CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH

CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH

CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH

CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH

CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424

License Number: A118095

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH

CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424

License Number: A132576

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A126181

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A148014

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: NORTH


PARK FAMILY HEALTH CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: NORTH PARK FAMILY HEALTH


CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: NORTH PARK FAMILY HEALTH


CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: 619-515-2424*

 *After Hours Phone: 619-515-2424*

License Number: A51318

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: 619-515-2424*

 *After Hours Phone: 619-515-2424*

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: 619-515-2424*

 *After Hours Phone: 619-515-2424*

License Number: A72005


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: 619-515-2424*

 *After Hours Phone: 619-515-2424*

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: 619-515-2424*

 *After Hours Phone: 619-515-2424*

License Number: A95577

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS

 *Website: www.fhcsd.org*






NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831







 3514 30TH ST
SAN DIEGO, CA 92104-4120

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal







D1. Clínicas de salud con calificación federal

 Phone: 619-515-2424
 After Hours Phone:
619-515-2424
License Number: G78814
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS
 Website: www.fhcsd.org







NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831
 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424
License Number: NP95013978
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS
 Website: www.fhcsd.org







NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831
 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424
License Number: PA21042
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS
 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831
 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
Fax: 619-683-7586
 After Hours Phone:
619-515-2424
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS
 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831
 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
Fax: 619-683-7586
 After Hours Phone:
619-515-2424
License Number: 90000469
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS
 Website: www.fhcsd.org


NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362
 3544 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
License Number: 20A11535
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: NORTH
PARK FAMILY HEALTH

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal



CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

License Number: 20A14794

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

License Number: 20A14919

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: NORTH

PARK FAMILY HEALTH



CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

License Number: 20A15068

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

License Number: 20A15413

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: NORTH PARK FAMILY HEALTH



CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

License Number: 20A20252

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: NORTH PARK FAMILY HEALTH



CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

License Number: A114181


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

License Number: A118095


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

License Number: A147758

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

License Number: A140646

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS

 *Website: www.fhcsd.org*






NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362







 3544 30TH ST
SAN DIEGO, CA 92104-4120

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal







D1. Clínicas de salud con calificación federal

 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
License Number: A148014
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 Website: www.fhcsd.org







NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362
 3544 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
License Number: A154298
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 Website: www.fhcsd.org







NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362
 3544 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
License Number: A173486
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 Website: www.fhcsd.org






NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362
 3544 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
License Number: A180044
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS


Provider ID: 206362
 3544 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
License Number: A68463
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362
 3544 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
License Number: A72005
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424


License Number: NP95002226

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH


PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

License Number: NP95006792

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

License Number: PA17220

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

License Number: PA18746

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org


NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: (619) 515-2424

Fax: (619) 501-0627

 After Hours Phone: (619)
515-2424

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No







D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal







D1. Clínicas de salud con calificación federal

<p>American Sign Language (ASL): Site English Spoken: Yes N Accessibility: CONTACT PROVIDER Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS Website: www.fhcsd.org</p>	<p>Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS Website: www.fhcsd.org</p>	<p>NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS Website: www.fhcsd.org</p>
<p>NORTH PARK FAMILY HEALTH CENTERS Provider ID: 206362 3544 30TH ST SAN DIEGO, CA 92104-4120 Phone: 619-515-2424 After Hours Phone: 619-515-2424 License Number: 20A11535 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS Website: www.fhcsd.org</p>	<p>NORTH PARK FAMILY HEALTH CENTERS Provider ID: 206362 3544 30TH ST SAN DIEGO, CA 92104-4120 Phone: 619-515-2424 After Hours Phone: 619-515-2424 License Number: 20A14919 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS Website: www.fhcsd.org</p>	<p>OPERATION SAMAHAN - MIRA MESA Provider ID: 432308 9855 ERMA RD STE 105 SAN DIEGO, CA 92131-1007 Phone: 844-200-2426 After Hours Phone: 844-200-2426 License Number: NP22974 NPI: 1801907449 Accepting New Patients: Yes Site English Spoken: yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA Website: www.operationsamahan.org</p>
<p>NORTH PARK FAMILY HEALTH CENTERS Provider ID: 206362 3544 30TH ST SAN DIEGO, CA 92104-4120 Phone: 619-515-2424 After Hours Phone: 619-515-2424 License Number: 20A14794 NPI: 1134155377 Accepting New Patients: Yes</p>	<p>NORTH PARK FAMILY HEALTH CENTERS Provider ID: 206362 3544 30TH ST SAN DIEGO, CA 92104-4120 Phone: 619-515-2424 After Hours Phone: 619-515-2424 License Number: 20A15068</p>	<p>OPERATION SAMAHAN - MIRA MESA Provider ID: 432308 9855 ERMA RD STE 105 SAN DIEGO, CA 92131-1007</p>

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 Phone: 844-200-2426
 After Hours Phone:
844-200-2426
License Number: NP95010585
NPI: 1801907449
Accepting New Patients: Yes
 Site English Spoken: yes
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN - MIRA
MESA
 Website: www.operationsamahan.org

**OPERATION SAMAHAN - MIRA
MESA**
Provider ID: 432308
 9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007
 Phone: 844-200-2426
Fax: 858-536-8034
 After Hours Phone:
844-200-2426
NPI: 1801907449
Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN - MIRA
MESA
 Website: www.operationsamahan.org

**OPERATION SAMAHAN - MIRA
MESA**
Provider ID: 432308
 9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007
 Phone: 844-200-2426
Fax: 858-536-8034
 After Hours Phone:
844-200-2426
License Number: 80000146
NPI: 1801907449
Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN - MIRA
MESA
 Website: www.operationsamahan.org

**OPERATION SAMAHAN - MIRA
MESA**
Provider ID: 432308
 9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007
 Phone: (844) 200-2426
Fax: (858) 536-8034
 After Hours Phone: (844)
200-2426
NPI: 1801907449
Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:
OPERATION SAMAHAN - MIRA
MESA
 Website: www.operationsamahan.org

**OPERATION SAMAHAN - MIRA
MESA**
Provider ID: 432308
 9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007
 Phone: (844) 200-2426
Fax: (858) 536-8034
 After Hours Phone: (844)
200-2426
License Number: 80000146
NPI: 1801907449
Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN - MIRA
MESA
 Website: www.operationsamahan.org


**OPERATION SAMAHAN - MIRA
MESA**
Provider ID: 432308
 9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007
 Phone: 844-200-2426
 After Hours Phone:
844-200-2426
License Number: A71544
NPI: 1801907449
Accepting New Patients: Yes
 Site English Spoken: yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

OPERATION SAMAHAN - MIRA MESA


 *Website: www.operationsamahan.org*

OPERATION SAMAHAN - MIRA MESA


Provider ID: 417101

 10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126-2375

 *Phone: 844-200-2426*

Fax: 858-578-4417


 *After Hours Phone: 844-200-2426*

License Number: 80000146

NPI: 1801907449

Accepting New Patients: Yes


 *Site English Spoken: yes*

 *Site Languages(s) Spoken: Spanish, Tagalog*

Cultural Competency: No


American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

OPERATION SAMAHAN - MIRA MESA


 *Website: www.operationsamahan.org*


OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308

 9855 ERMA RD STE 105

SAN DIEGO, CA 92131-1007

 *Phone: (844) 200-2426*

 *After Hours Phone: (844) 200-2426*

License Number: A71544

NPI: 1801907449

Accepting New Patients: Yes

 *Site English Spoken: yes*

Cultural Competency: No


American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

OPERATION SAMAHAN - MIRA MESA


 *Website: www.operationsamahan.org*


OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308

 9855 ERMA RD STE 105

SAN DIEGO, CA 92131-1007

 *Phone: (844) 200-2426*

 *After Hours Phone: (844) 200-2426*

License Number: NP22974

NPI: 1801907449

Accepting New Patients: Yes

 *Site English Spoken: yes*

Cultural Competency: No


American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

OPERATION SAMAHAN - MIRA MESA


 *Website: www.operationsamahan.org*


OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308

 9855 ERMA RD STE 105

SAN DIEGO, CA 92131-1007

 *Phone: (844) 200-2426*


 *After Hours Phone: (844) 200-2426*

License Number: NP95010585

NPI: 1801907449

Accepting New Patients: Yes

 *Site English Spoken: yes*

 *Site Languages(s) Spoken: Spanish, Tagalog*

Cultural Competency: No


American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

OPERATION SAMAHAN - MIRA MESA


 *Website: www.operationsamahan.org*


FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

License Number: A162946

NPI: 1134155377


Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):


N

 *Accessibility: CONTACT PROVIDER*

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: (619) 515-2444

 After Hours Phone: (619) 515-2444

License Number: 20A11535


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: (619) 515-2444

 After Hours Phone: (619) 515-2444

License Number: 20A13060

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: (619) 515-2444

 After Hours Phone: (619) 515-2444

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: (619) 515-2444

 After Hours Phone: (619) 515-2444

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA


 Website: www.fhcsd.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

 9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129-2889

 Phone: (844) 200-2426

 After Hours Phone: (844) 200-2426

License Number: DC15775

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:


OPERATION SAMAHAN

RANCHO PENASQUITOS

 Website: www.operationsamahan.org



OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

 9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129-2889

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426

License Number: DC29074

NPI: 1801907449

Accepting New Patients: Yes

 Site English Spoken: yes

 Site Languages(s) Spoken: Spanish

Cultural Competency: No


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:


OPERATION SAMAHAN


RANCHO PENASQUITOS


 Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

 9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129-2889

 Phone: (844) 200-2426


 After Hours Phone: (844) 200-2426

License Number: NP22974

NPI: 1801907449


Accepting New Patients: Yes

 Site English Spoken: yes

 Site Languages(s) Spoken: Spanish

Cultural Competency: No


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:


OPERATION SAMAHAN


RANCHO PENASQUITOS


 Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

 9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129-2889

 Phone: (844) 200-2426


 After Hours Phone: (844) 200-2426

License Number: NP95003211

NPI: 1801907449

Accepting New Patients: Yes

 Site English Spoken: yes

 Site Languages(s) Spoken: Spanish

Cultural Competency: No


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:


OPERATION SAMAHAN


RANCHO PENASQUITOS


 Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

 9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129-2889


 Phone: (844) 200-2426


 After Hours Phone: (844) 200-2426

License Number: PA19664

NPI: 1801907449

Accepting New Patients: Yes

 Site English Spoken: yes

 Site Languages(s) Spoken: Spanish

Cultural Competency: No


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:


OPERATION SAMAHAN


RANCHO PENASQUITOS

 Website: www.operationsamahan.org


OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

 9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129-2889

 Phone: (844) 200-2426


Fax: (858) 695-9074

 After Hours Phone: (844) 200-2426

NPI: 1801907449


Accepting New Patients: Yes

 Site English Spoken: yes

 Site Languages(s) Spoken: Spanish

Cultural Competency: No


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

RANCHO PENASQUITOS

 Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Provider ID: 418535

9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129-2889

Phone: (844) 200-2426

Fax: (858) 695-9074

After Hours Phone: (844)
200-2426

License Number: 550002478

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

RANCHO PENASQUITOS

Website: www.operationsa
mahan.org

OPERATION SAMAHAN

RANCHO PENASQUITOS

Provider ID: 418535

9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129-2889

Phone: (844) 200-2426

Fax: (858) 695-9074

After Hours Phone: (844)
200-2426

License Number: 550003857

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

RANCHO PENASQUITOS

Website: www.operationsa
mahan.org

OPERATION SAMAHAN

RANCHO PENASQUITOS

Provider ID: 418535

9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129-2889

Phone: 844-200-2426

After Hours Phone:
844-200-2426

License Number: DC15775

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

RANCHO PENASQUITOS

Website: www.operationsa
mahan.org

OPERATION SAMAHAN

RANCHO PENASQUITOS

Provider ID: 418535

9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129-2889

Phone: 844-200-2426

After Hours Phone:
844-200-2426

License Number: DC29074

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

RANCHO PENASQUITOS

Website: www.operationsa
mahan.org

OPERATION SAMAHAN

RANCHO PENASQUITOS

Provider ID: 418535

9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129-2889

Phone: 844-200-2426

After Hours Phone:
844-200-2426

License Number: NP22974

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


RANCHO PENASQUITOS


 Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889

 Phone: 844-200-2426

 After Hours Phone: 844-200-2426

License Number: NP95003211

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:


OPERATION SAMAHAN


RANCHO PENASQUITOS


 Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889

 Phone: 844-200-2426

 After Hours Phone: 844-200-2426

License Number: PA19664

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:


OPERATION SAMAHAN


RANCHO PENASQUITOS

 Website: www.operationsamahan.org


OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889

 Phone: 844-200-2426

Fax: 858-695-9074

 After Hours Phone: 844-200-2426

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:


OPERATION SAMAHAN


RANCHO PENASQUITOS

 Website: www.operationsamahan.org


OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889

 Phone: 844-200-2426

Fax: 858-695-9074

 After Hours Phone: 844-200-2426

License Number: 550002478

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:


OPERATION SAMAHAN


RANCHO PENASQUITOS

 Website: www.operationsamahan.org


OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889

 Phone: 844-200-2426

Fax: 858-695-9074

 After Hours Phone: 844-200-2426

License Number: 550003857

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN RANCHO PENASQUITOS Website: www.operationsamahan.org</p>	<p> Phone: (844) 200-2426 After Hours Phone: (844) 200-2426 License Number: C54941 NPI: 1801907449 Accepting New Patients: Yes Site English Spoken: yes Site Languages(s) Spoken: Spanish, Tagalog Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA Website: www.operationsamahan.org</p>	<p>MESA Website: www.operationsamahan.org</p>
<p>OPERATION SAMAHAN - MIRA MESA Provider ID: 417101 10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375 Phone: (844) 200-2426 After Hours Phone: (844) 200-2426 License Number: A161105 NPI: 1801907449 Accepting New Patients: Yes Site English Spoken: yes Site Languages(s) Spoken: Spanish, Tagalog Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA Website: www.operationsamahan.org</p>	<p>OPERATION SAMAHAN - MIRA MESA Provider ID: 417101 10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375 Phone: (844) 200-2426 After Hours Phone: (844) 200-2426 License Number: DC15775 NPI: 1801907449 Accepting New Patients: Yes Site English Spoken: yes Site Languages(s) Spoken: Spanish, Tagalog Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA Website: www.operationsamahan.org</p>	<p>OPERATION SAMAHAN - MIRA MESA Provider ID: 417101 10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375 Phone: (844) 200-2426 After Hours Phone: (844) 200-2426 NPI: 1801907449 Accepting New Patients: Yes</p>
<p>OPERATION SAMAHAN - MIRA MESA Provider ID: 417101 10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375</p>	<p>OPERATION SAMAHAN - MIRA MESA Provider ID: 417101 10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375 Phone: (844) 200-2426 After Hours Phone: (844) 200-2426 License Number: DC15775 NPI: 1801907449 Accepting New Patients: Yes Site English Spoken: yes Site Languages(s) Spoken: Spanish, Tagalog Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA Website: www.operationsamahan.org</p>	<p>OPERATION SAMAHAN - MIRA MESA Provider ID: 417101 10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375 Phone: (844) 200-2426 Fax: (858) 578-4417 After Hours Phone: (844) 200-2426 NPI: 1801907449 Accepting New Patients: Yes</p>



























D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<input type="checkbox"/> Site English Spoken: yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA Website: www.operationsamahan.org	MESA Provider ID: 417101 10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375 Phone: 844-200-2426 After Hours Phone: 844-200-2426 License Number: A161105 NPI: 1801907449 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA Website: www.operationsamahan.org	N Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA Website: www.operationsamahan.org
OPERATION SAMAHAN - MIRA MESA Provider ID: 417101 10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375 Phone: (844) 200-2426 Fax: (858) 578-4417 After Hours Phone: (844) 200-2426 License Number: 80000146 NPI: 1801907449 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA Website: www.operationsamahan.org	OPERATION SAMAHAN - MIRA MESA Provider ID: 417101 10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375 Phone: 844-200-2426 After Hours Phone: 844-200-2426 License Number: DC15775 NPI: 1801907449 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA Website: www.operationsamahan.org	OPERATION SAMAHAN - MIRA MESA Provider ID: 417101 10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375 Phone: 844-200-2426 After Hours Phone: 844-200-2426 License Number: C54941 NPI: 1801907449 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA Website: www.operationsamahan.org
OPERATION SAMAHAN - MIRA MESA Provider ID: 417101 10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375 Phone: 844-200-2426 After Hours Phone: 844-200-2426 License Number: C54941 NPI: 1801907449 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA Website: www.operationsamahan.org	OPERATION SAMAHAN - MIRA MESA Provider ID: 417101 10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375 Phone: 844-200-2426 After Hours Phone: 844-200-2426 License Number: C54941 NPI: 1801907449 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA Website: www.operationsamahan.org	OPERATION SAMAHAN - MIRA MESA Provider ID: 417101 10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375 Phone: 844-200-2426

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 After Hours Phone: 844-200-2426 License Number: NP95003211 NPI: 1801907449 Accepting New Patients: Yes	 Website: www.operationsamahan.org	Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA  Website: www.fhcsd.org
<input type="checkbox"/> Site English Spoken: yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA  Website: www.operationsamahan.org	FAMILY HLTH CTR SAN DIEGO-BEACH AREA Provider ID: 402851  3705 MISSION BLVD SAN DIEGO, CA 92109-7104  Phone: (619) 515-2444  After Hours Phone: (619) 515-2444 License Number: A113001 NPI: 1134155377 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA  Website: www.fhcsd.org	FAMILY HLTH CTR SAN DIEGO-BEACH AREA Provider ID: 402851  3705 MISSION BLVD SAN DIEGO, CA 92109-7104  Phone: (619) 515-2444  After Hours Phone: (619) 515-2444 License Number: A116680 NPI: 1134155377 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA  Website: www.fhcsd.org
OPERATION SAMAHAN - MIRA MESA Provider ID: 417101  10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375  Phone: 844-200-2426 Fax: 858-578-4417  After Hours Phone: 844-200-2426 NPI: 1801907449 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA	FAMILY HLTH CTR SAN DIEGO-BEACH AREA Provider ID: 402851  3705 MISSION BLVD SAN DIEGO, CA 92109-7104  Phone: (619) 515-2444  After Hours Phone: (619) 515-2444 License Number: A114181 NPI: 1134155377 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER	FAMILY HLTH CTR SAN DIEGO-BEACH AREA Provider ID: 402851  3705 MISSION BLVD SAN DIEGO, CA 92109-7104  Phone: (619) 515-2444  After Hours Phone: (619) 515-2444 License Number: A118095 NPI: 1134155377 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA</i>  <i>Website: www.fhcsd.org</i></p> <p>FAMILY HLTH CTR SAN DIEGO-BEACH AREA <i>Provider ID: 402851</i>  3705 MISSION BLVD SAN DIEGO, CA 92109-7104  <i>Phone: (619) 515-2444</i>  <i>After Hours Phone: (619) 515-2444</i> <i>License Number: A148014</i> <i>NPI: 1134155377</i> <i>Accepting New Patients: Yes</i> <input type="checkbox"/> <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA</i>  <i>Website: www.fhcsd.org</i></p> <p>FAMILY HLTH CTR SAN DIEGO-BEACH AREA <i>Provider ID: 402851</i>  3705 MISSION BLVD SAN DIEGO, CA 92109-7104  <i>Phone: (619) 515-2444</i>  <i>After Hours Phone: (619) 515-2444</i> <i>License Number: A154298</i> <i>NPI: 1134155377</i> <i>Accepting New Patients: Yes</i> <input type="checkbox"/> <i>Site English Spoken: Yes</i></p>	<p><i>Cultural Competency: No</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA</i>  <i>Website: www.fhcsd.org</i></p> <p>FAMILY HLTH CTR SAN DIEGO-BEACH AREA <i>Provider ID: 402851</i>  3705 MISSION BLVD SAN DIEGO, CA 92109-7104  <i>Phone: (619) 515-2444</i>  <i>After Hours Phone: (619) 515-2444</i> <i>License Number: A154399</i> <i>NPI: 1134155377</i> <i>Accepting New Patients: Yes</i> <input type="checkbox"/> <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA</i>  <i>Website: www.fhcsd.org</i></p> <p>FAMILY HLTH CTR SAN DIEGO-BEACH AREA <i>Provider ID: 402851</i>  3705 MISSION BLVD SAN DIEGO, CA 92109-7104  <i>Phone: (619) 515-2444</i>  <i>After Hours Phone: (619) 515-2444</i> <i>License Number: A163464</i> <i>NPI: 1134155377</i></p>	<p><i>Accepting New Patients: Yes</i> <input type="checkbox"/> <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA</i>  <i>Website: www.fhcsd.org</i></p> <p>FAMILY HLTH CTR SAN DIEGO-BEACH AREA <i>Provider ID: 402851</i>  3705 MISSION BLVD SAN DIEGO, CA 92109-7104  <i>Phone: (619) 515-2444</i>  <i>After Hours Phone: (619) 515-2444</i> <i>License Number: A164859</i> <i>NPI: 1134155377</i> <i>Accepting New Patients: Yes</i> <input type="checkbox"/> <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA</i>  <i>Website: www.fhcsd.org</i></p> <p>FAMILY HLTH CTR SAN DIEGO-BEACH AREA <i>Provider ID: 402851</i>  3705 MISSION BLVD SAN DIEGO, CA 92109-7104  <i>Phone: (619) 515-2444</i>  <i>After Hours Phone: (619) 515-2444</i></p>
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D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

License Number: A178499
NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

License Number: A76785

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

License Number: C53623

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA

Website: www.fhcsd.org


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

License Number: DC20729

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

License Number: DPM4819

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

License Number: NM1662

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-BEACH AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA


 Website: www.fhcsd.org


FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: (619) 515-2444

 Fax: (858) 488-1394

 After Hours Phone: (619)
515-2444

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*


FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 *Phone: (619) 515-2444*

Fax: (858) 488-1394

 *After Hours Phone: (619) 515-2444*

License Number: 80000115

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*

License Number: A162946

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 *Phone: 619-515-2444*

 *After Hours Phone: 619-515-2444*

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 *Phone: 619-515-2444*

 *After Hours Phone: 619-515-2444*

License Number: 20A13060

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 *Phone: 619-515-2444*

 *After Hours Phone: 619-515-2444*

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 *Phone: 619-515-2444*

 *After Hours Phone: 619-515-2444*

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

License Number: A108228

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-BEACH AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A113001

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-BEACH AREA

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104



Phone: 619-515-2444



After Hours Phone:
619-515-2444

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-BEACH AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-BEACH AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-BEACH AREA

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-BEACH AREA

 Website: www.fhcsd.org


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444


License Number: A154399

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-BEACH AREA

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444


License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No




American Sign Language (ASL):
N


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*



FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
 *3705 MISSION BLVD SAN DIEGO, CA 92109-7104*
 *Phone: 619-515-2444*
 *After Hours Phone: 619-515-2444*
License Number: A72005
NPI: 1134155377

Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
 *3705 MISSION BLVD SAN DIEGO, CA 92109-7104*
 *Phone: 619-515-2444*
 *After Hours Phone: 619-515-2444*
License Number: A76785
NPI: 1134155377


Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA


Provider ID: 402851
 *3705 MISSION BLVD SAN DIEGO, CA 92109-7104*
 *Phone: 619-515-2444*
 *After Hours Phone: 619-515-2444*
License Number: C174771
NPI: 1134155377

Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No


American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
 *3705 MISSION BLVD SAN DIEGO, CA 92109-7104*
 *Phone: 619-515-2444*
 *After Hours Phone: 619-515-2444*
License Number: C53623
NPI: 1134155377


Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA




Provider ID: 402851
 *3705 MISSION BLVD SAN DIEGO, CA 92109-7104*
 *Phone: 619-515-2444*
 *After Hours Phone: 619-515-2444*
License Number: DC20729
NPI: 1134155377

Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
 *3705 MISSION BLVD SAN DIEGO, CA 92109-7104*
 *Phone: 619-515-2444*
 *After Hours Phone: 619-515-2444*
License Number: DPM4819

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-BEACH AREA

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: 619-515-2444

After Hours Phone:
619-515-2444

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-BEACH AREA

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: 619-515-2444

After Hours Phone:
619-515-2444

License Number: NM1662

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-BEACH AREA

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: 619-515-2444

After Hours Phone:
619-515-2444

License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-BEACH AREA

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: 619-515-2444

Fax: 858-488-1394

After Hours Phone:
619-515-2444

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-BEACH AREA

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: 619-515-2444

Fax: 858-488-1394

After Hours Phone:
619-515-2444

License Number: 80000115

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-BEACH AREA

Website: www.fhcsd.org


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

 After Hours Phone:
619-515-2454

License Number: PA58505

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK

 Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

Fax: 619-794-2696

 After Hours Phone:
619-515-2454

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK




Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

Fax: 619-794-2696

 After Hours Phone:
619-515-2454

License Number: 550003556

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK


 Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

 After Hours Phone:
619-515-2454


License Number: C174538

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK


 Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

 After Hours Phone:
619-515-2454

License Number: 20A12796

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK

 Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

 After Hours Phone:
619-515-2454

License Number: 20A14772

NPI: 1134155377
































Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):



D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: FAMILY HEALTH CTR SAN DIEGO-OAK PARK</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>FAMILY HEALTH CTR SAN DIEGO-OAK PARK</p> <p><i>Provider ID: 418142</i></p> <p> 5160 FEDERAL BLVD SAN DIEGO, CA 92105-5429</p> <p> <i>Phone: (619) 515-2454</i></p> <p><i>Fax: (619) 794-2696</i></p> <p> <i>After Hours Phone: (619) 515-2454</i></p> <p><i>License Number: 550003556</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: FAMILY HEALTH CTR SAN DIEGO-OAK PARK</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p><i>Provider ID: 206360</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> <i>Phone: 619-515-2300</i></p> <p> <i>After Hours Phone: 619-515-2300</i></p> <p><i>License Number: SP27677</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p>	<p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p><i>Provider ID: 206360</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> <i>Phone: 619-515-2300</i></p> <p><i>Fax: 619-515-2510</i></p> <p> <i>After Hours Phone: 619-515-2300</i></p> <p><i>License Number: A178494</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>FAMILY HEALTH CTR SAN DIEGO-OAK PARK</p> <p><i>Provider ID: 418142</i></p> <p> 5160 FEDERAL BLVD SAN DIEGO, CA 92105-5429</p> <p> <i>Phone: (619) 515-2454</i></p> <p><i>Fax: (619) 794-2696</i></p>	<p> <i>After Hours Phone: (619) 515-2454</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: FAMILY HEALTH CTR SAN DIEGO-OAK PARK</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>FAMILY HEALTH CTR SAN DIEGO-OAK PARK</p> <p><i>Provider ID: 418142</i></p> <p> 5160 FEDERAL BLVD SAN DIEGO, CA 92105-5429</p> <p> <i>Phone: (619) 515-2454</i></p> <p> <i>After Hours Phone: (619) 515-2454</i></p> <p><i>License Number: PA58505</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: FAMILY HEALTH CTR SAN DIEGO-OAK PARK</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>FAMILY HEALTH CTR SAN DIEGO-OAK PARK</p> <p><i>Provider ID: 418142</i></p> <p> 5160 FEDERAL BLVD</p>
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D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

SAN DIEGO, CA 92105-5429
 Phone: (619) 515-2454
 After Hours Phone: (619) 515-2454
License Number: C174538
NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK

 Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429
 Phone: (619) 515-2454
 After Hours Phone: (619) 515-2454

License Number: 20A14772
NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No




American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK

 Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429
 Phone: (619) 515-2454
 After Hours Phone: (619) 515-2454

License Number: 20A12796

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300

License Number: NP95015780

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300

License Number: PA13752

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300


License Number: NP95022452

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95003689

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95007253

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LOGAN


HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95011313

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95011254

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA20396

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA15227

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: PA16245
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: PA17864
NPI: 1134155377
Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: PA61677
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: PT30272

NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: RN810863
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 After Hours Phone:
619-515-2300

License Number: RN486421

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PT295463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PT33914

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA54661

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org


LOGAN HEIGHTS FAMILY

HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA53788

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA23258

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: PA21591

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: NP95000205

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH

CENTER

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: NP95001705

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: NP95000602

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: NP11778

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: NP10906

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p><i>Provider ID: 206360</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> <i>Phone: 619-515-2300</i></p> <p> <i>After Hours Phone: 619-515-2300</i></p> <p><i>License Number: NP17852</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p><i>Provider ID: 206360</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> <i>Phone: 619-515-2300</i></p> <p> <i>After Hours Phone: 619-515-2300</i></p> <p><i>License Number: NP2286</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p>	<p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p><i>Provider ID: 206360</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> <i>Phone: 619-515-2300</i></p> <p> <i>After Hours Phone: 619-515-2300</i></p> <p><i>License Number: G81658</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p><i>Provider ID: 206360</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> <i>Phone: 619-515-2300</i></p> <p> <i>After Hours Phone: 619-515-2300</i></p> <p><i>License Number: NM792</i></p> <p><i>NPI: 1134155377</i></p>	<p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p><i>Provider ID: 206360</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> <i>Phone: 619-515-2300</i></p> <p> <i>After Hours Phone: 619-515-2300</i></p> <p><i>License Number: A95577</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p><i>Provider ID: 206360</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> <i>Phone: 619-515-2300</i></p> <p> <i>After Hours Phone: 619-515-2300</i></p>
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D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

License Number: A97036
NPI: 1134155377


Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: DPM4819

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: DPM5661

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A76785

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A77126

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: A93385

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A80504

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN


HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A163183

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A154298

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*


License Number: A160489

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*

License Number: A163978

NPI: 1134155377


Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*

License Number: A164859

NPI: 1134155377


Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*

License Number: A164889

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*

License Number: A177462

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*

License Number: A177373

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A169752

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A181809

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A46161

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A71671

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A68124

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A61687

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH


CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A151631

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N

 Accessibility: CONTACT
PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A160489

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A163183

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A163978

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A164859

NPI: 1134155377

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

License Number: A164889

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

License Number: A177462

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

License Number: A177373

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

License Number: A169752

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

License Number: A80504

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

Website: www.fhcsd.org


LOGAN HEIGHTS FAMILY HEALTH CENTER


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A77126


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A76785

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A71671

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A61687


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A46161

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A181809

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A68124

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A97036

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300


License Number: A95577


NPI: 1134155377

Accepting New Patients: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

License Number: A93385

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

License Number: DPM5661

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*


License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*


License Number: NP10906

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*


License Number: NM792

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER




 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

License Number: G81658
NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360


 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

License Number: G78814
NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER




Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY

HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

License Number: DPM4819
NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360


 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

License Number: NP11778
NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

License Number: NP17852
NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360


 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

License Number: NP2286
NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: NP95000205

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: NP95022452

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: NP95015780

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: NP95011313

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: NP95011254

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: NP95007253

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

License Number: NP95001705


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

License Number: NP95000602

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

License Number: NP95003689

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*

License Number: A113001


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 *Website: www.fhcsd.org*






LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360







 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal







D1. Clínicas de salud con calificación federal

 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A103099
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org







LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: 20A17072
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org







LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: 20A14919
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org






LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: 20A15743
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER


Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: 20A17478
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: 20A12732
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: 20A12653

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN


HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: SP27677

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org


LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

Fax: (619) 515-2510

 After Hours Phone: (619)
515-2300

License Number: A178494

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A114181

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*

License Number: A118095


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*

License Number: A120043

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*

License Number: A121451

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*

License Number: A122238

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*

License Number: A151631

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 *Website: www.fhcsd.org*






LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360







 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal







D1. Clínicas de salud con calificación federal

 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A148014
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org







LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A136616
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org







LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A146111
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org






LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A147939
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER


Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A142703
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A146838
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: RN810863

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: PT33914

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN


HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: RN486421

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: PT30272

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: PT295463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: PA61677

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
License Number: PA53788
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
License Number: PA54661
NPI: 1134155377
Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
License Number: PA13752
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
License Number: PA15227

NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
License Number: PA16245
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 After Hours Phone: (619)
515-2300

License Number: PA17864

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: PA23258

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: PA21591

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: PA20396

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

SAN YSIDRO HEALTH 25TH ST


FAMILY MEDICINE

Provider ID: 517403

 316 25TH ST
SAN DIEGO, CA 92102-3016

 Phone: 619-662-4100

Fax: 619-238-3807

 After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH 25TH ST
FAMILY MEDICINE


 Website: N/A

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

Provider ID: 517403

 316 25TH ST
SAN DIEGO, CA 92102-3016

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NP20849

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH 25TH ST
FAMILY MEDICINE

 Website: N/A

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE Provider ID: 517403 316 25TH ST SAN DIEGO, CA 92102-3016 Phone: 619-662-4100 After Hours Phone: 619-662-4100 License Number: A156607 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE Website: N/A</p>	<p>SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE Provider ID: 517403 316 25TH ST SAN DIEGO, CA 92102-3016 Phone: (619) 662-4100 Fax: (619) 238-3807 After Hours Phone: (619) 662-4100 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE Website: N/A</p>	<p>SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE Provider ID: 517403 316 25TH ST SAN DIEGO, CA 92102-3016 Phone: (619) 662-4100 Fax: (619) 238-3807 After Hours Phone: (619) 662-4100 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE Website: N/A</p>	<p>Medical Group/IPA: SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE Website: N/A</p>
<p>SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE Provider ID: 517403 316 25TH ST SAN DIEGO, CA 92102-3016 Phone: (619) 662-4100 After Hours Phone: (619) 662-4100 License Number: NP20849 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH 25TH ST</p>	<p>SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE Provider ID: 517403 316 25TH ST SAN DIEGO, CA 92102-3016 Phone: 619-238-5551 After Hours Phone: 619-238-5551 License Number: A97270 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER</p>	<p>SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE Provider ID: 517403 316 25TH ST SAN DIEGO, CA 92102-3016 Phone: 619-238-5551 After Hours Phone: 619-238-5551 License Number: A97270 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER</p>	
			<p>Medical Group/IPA: SHERMAN HEIGHTS FAMILY HLTH CTRS INC Website: N/A</p>
			<p>SHERMAN HEIGHTS FAMILY HLTH CTRS INC Provider ID: 356145 2391 ISLAND AVE SAN DIEGO, CA 92102-2941 Phone: (619) 515-2435 After Hours Phone: (619) 515-2435 License Number: PA53788 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SHERMAN HEIGHTS FAMILY HLTH CTRS INC Website: N/A</p>
			<p>SHERMAN HEIGHTS FAMILY HLTH CTRS INC Provider ID: 356145 2391 ISLAND AVE SAN DIEGO, CA 92102-2941 Phone: 619-515-2435 After Hours Phone: 619-515-2435 License Number: A80504 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: yes Cultural Competency: No American Sign Language (ASL):</p>

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SHERMAN HEIGHTS FAMILY HLTH CTRS INC  Website: N/A</p>	<p>Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SHERMAN HEIGHTS FAMILY HLTH CTRS INC  Website: N/A</p>	<p>Accepting New Patients: Yes  Site English Spoken: yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SHERMAN HEIGHTS FAMILY HLTH CTRS INC  Website: N/A</p>
<p>SHERMAN HEIGHTS FAMILY HLTH CTRS INC Provider ID: 356145  2391 ISLAND AVE SAN DIEGO, CA 92102-2941  Phone: (619) 515-2435  After Hours Phone: (619) 515-2435 License Number: PA16245 NPI: 1134155377 Accepting New Patients: Yes  Site English Spoken: yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SHERMAN HEIGHTS FAMILY HLTH CTRS INC  Website: N/A</p>	<p>SHERMAN HEIGHTS FAMILY HLTH CTRS INC Provider ID: 356145  2391 ISLAND AVE SAN DIEGO, CA 92102-2941  Phone: (619) 515-2435  After Hours Phone: (619) 515-2435 License Number: NP95011254 NPI: 1134155377 Accepting New Patients: Yes  Site English Spoken: yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SHERMAN HEIGHTS FAMILY HLTH CTRS INC  Website: N/A</p>	<p>SHERMAN HEIGHTS FAMILY HLTH CTRS INC Provider ID: 356145  2391 ISLAND AVE SAN DIEGO, CA 92102-2941  Phone: (619) 515-2435  After Hours Phone: (619) 515-2435 License Number: A80504 NPI: 1134155377 Accepting New Patients: Yes  Site English Spoken: yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SHERMAN HEIGHTS FAMILY HLTH CTRS INC  Website: N/A</p>
<p>SHERMAN HEIGHTS FAMILY HLTH CTRS INC Provider ID: 356145  2391 ISLAND AVE SAN DIEGO, CA 92102-2941  Phone: (619) 515-2435 Fax: (619) 515-2435  After Hours Phone: (619) 515-2435 NPI: 1134155377 Accepting New Patients: Yes  Site English Spoken: yes</p>	<p>SHERMAN HEIGHTS FAMILY HLTH CTRS INC Provider ID: 356145  2391 ISLAND AVE SAN DIEGO, CA 92102-2941  Phone: (619) 515-2435  After Hours Phone: (619) 515-2435 License Number: A97036 NPI: 1134155377</p>	<p>SHERMAN HEIGHTS FAMILY HLTH CTRS INC Provider ID: 356145  2391 ISLAND AVE SAN DIEGO, CA 92102-2941  Phone: 619-515-2435  After Hours Phone: 619-515-2435</p>

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

License Number: PA16245
NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Website: N/A

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

2391 ISLAND AVE
SAN DIEGO, CA 92102-2941

Phone: 619-515-2435

After Hours Phone:
619-515-2435

License Number: NP95011254

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Website: N/A

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

2391 ISLAND AVE
SAN DIEGO, CA 92102-2941

Phone: 619-515-2435

After Hours Phone:
619-515-2435

License Number: A97036

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Website: N/A

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

2391 ISLAND AVE
SAN DIEGO, CA 92102-2941

Phone: 619-515-2435

After Hours Phone:
619-515-2435

License Number: PA53788

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Website: N/A

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

2391 ISLAND AVE
SAN DIEGO, CA 92102-2941

Phone: 619-515-2435

Fax: 619-515-2435

After Hours Phone:
619-515-2435

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Website: N/A

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

Provider ID: 517403

316 25TH ST
SAN DIEGO, CA 92102-3016

Phone: (619) 238-5551

After Hours Phone: (619)
238-5551

License Number: A97270

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

Website: N/A


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

Provider ID: 517403

 316 25TH ST
SAN DIEGO, CA 92102-3016

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A156607

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH 25TH ST
FAMILY MEDICINE


 Website: N/A

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113-1195

 Phone: 619-515-2422

 After Hours Phone:
619-515-2422

License Number: PA53788

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO

COMMERCIAL


 Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


Provider ID: 419529

 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113-1195

 Phone: 619-515-2422

Fax: 619-269-0053

 After Hours Phone:
619-515-2422

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO
COMMERCIAL


 Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


Provider ID: 419529

 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113-1195

 Phone: 619-515-2422

Fax: 619-269-0053

 After Hours Phone:
619-515-2422

License Number: 550003113

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO
COMMERCIAL

 Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113-1195

 Phone: 619-515-2422

 After Hours Phone:
619-515-2422

License Number: PA20888

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO
COMMERCIAL


 Website: www.fhcsd.org


FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113-1195

 Phone: 619-515-2422

 After Hours Phone:
619-515-2422

License Number: NP95011254

NPI: 1134155377

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO
COMMERCIAL

Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113-1195

Phone: 619-515-2422

After Hours Phone:
619-515-2422

License Number: A121451

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO
COMMERCIAL

Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113-1195

Phone: 619-515-2422

After Hours Phone:
619-515-2422

License Number: A122238

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO
COMMERCIAL

Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113-1195

Phone: (619) 515-2422

Fax: (619) 269-0053

After Hours Phone: (619)
515-2422

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO
COMMERCIAL

Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113-1195

Phone: (619) 515-2422

Fax: (619) 269-0053

After Hours Phone: (619)
515-2422

License Number: 550003113

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO
COMMERCIAL

Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113-1195

Phone: (619) 515-2422

After Hours Phone: (619)
515-2422

License Number: PA53788

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

COMMERCIAL


 Website: www.fhcsd.org


FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113-1195

 Phone: (619) 515-2422

 After Hours Phone: (619) 515-2422

License Number: PA20888

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


 Website: www.fhcsd.org


FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113-1195

 Phone: (619) 515-2422

 After Hours Phone: (619) 515-2422

License Number: A122238

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


 Website: www.fhcsd.org


FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113-1195

 Phone: (619) 515-2422

 After Hours Phone: (619) 515-2422

License Number: NP95011254

NPI: 1134155377


Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


 Website: www.fhcsd.org


FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113-1195


 Phone: (619) 515-2422

 After Hours Phone: (619) 515-2422

License Number: A121451

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

License Number: 20A12653

NPI: 1134155377


Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

License Number: 20A12732

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

License Number: 20A11535

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

License Number: A103099

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

License Number: 20A17478

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

License Number: 20A17072

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

License Number: 20A14919

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: 20A15743

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A113001

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH


CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A116680

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N

 Accessibility: CONTACT
PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A121451

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A120043

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A147939

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A146838

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

N

 Accessibility: CONTACT
PROVIDER

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A146111

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

License Number: A142703

NPI: 1134155377

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

License Number: A136616

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

License Number: A122238

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: 619-515-2426

 After Hours Phone: 619-515-2426

License Number: PA58905

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CTR IBARRA


 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: 619-515-2426

 After Hours Phone: 619-515-2426

License Number: PA59481

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CTR IBARRA

 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: 619-515-2426

 After Hours Phone: 619-515-2426

License Number: A173486

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CTR IBARRA

 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: 619-515-2426

 After Hours Phone: 619-515-2426

License Number: G149974

NPI: 1134155377

Accepting New Patients: Yes








































D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CTR IBARRA Website: www.fhcsd.org	American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CTR IBARRA Website: www.fhcsd.org	Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CTR IBARRA Website: www.fhcsd.org
FAMILY HEALTH CTR IBARRA Provider ID: 417987 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: 619-515-2426 After Hours Phone: 619-515-2426 License Number: NP17838 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CTR IBARRA Website: www.fhcsd.org	FAMILY HEALTH CTR IBARRA Provider ID: 417987 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: 619-515-2426 After Hours Phone: 619-515-2426 License Number: PA21385 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CTR IBARRA Website: www.fhcsd.org	LA MAESTRA FAMILY CLINIC INC Provider ID: 185268 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608 Phone: 619-564-8765 After Hours Phone: 619-564-8765 License Number: NP95009891 NPI: 1609849074 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC Website: www.lamaestra.org
FAMILY HEALTH CTR IBARRA Provider ID: 417987 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: 619-515-2426 After Hours Phone: 619-515-2426 License Number: NP95004443 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No	FAMILY HEALTH CTR IBARRA Provider ID: 417987 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: 619-515-2426 After Hours Phone: 619-515-2426 License Number: PA58098 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N	LA MAESTRA FAMILY CLINIC INC Provider ID: 185268 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608 Phone: 619-798-3947 After Hours Phone: 619-798-3947 License Number: DC32800 NPI: 1609849074 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC</p> <p> <i>Website: www.lamaestra.org</i></p>	<p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: yes</i></p> <p> <i>Site Languages(s) Spoken: Korean, Spanish, Hindi</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p>	<p> 2630 1ST AVE SAN DIEGO, CA 92103-6599</p> <p> <i>Phone: 619-234-2158</i></p> <p><i>Fax: 619-234-0206</i></p> <p> <i>After Hours Phone: 619-234-2158</i></p> <p><i>License Number: 90000168</i></p> <p><i>NPI: 1598122871</i></p>
<p>SAN DIEGO AMERICAN INDIAN HEALTH CENTER</p> <p><i>Provider ID: 207382</i></p> <p> 2630 1ST AVE SAN DIEGO, CA 92103-6599</p> <p> <i>Phone: (619) 234-2158</i></p> <p><i>Fax: (619) 234-0206</i></p> <p> <i>After Hours Phone: (619) 234-2158</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: yes</i></p> <p> <i>Site Languages(s) Spoken: Korean, Spanish, Hindi</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p>	<p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: SAN DIEGO AMERICAN INDIAN HEALTH CENTER</p> <p> <i>Website: www.sdaihc.org</i></p>	<p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: yes</i></p> <p> <i>Site Languages(s) Spoken: Korean, Spanish, Hindi</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p>
<p>SAN DIEGO AMERICAN INDIAN HEALTH CENTER</p> <p><i>Provider ID: 207382</i></p> <p> 2630 1ST AVE SAN DIEGO, CA 92103-6599</p> <p> <i>Phone: 619-234-2158</i></p> <p><i>Fax: 619-234-0206</i></p> <p> <i>After Hours Phone: 619-234-2158</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: yes</i></p> <p> <i>Site Languages(s) Spoken: Korean, Spanish, Hindi</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p>	<p>SAN DIEGO AMERICAN INDIAN HEALTH CENTER</p> <p><i>Provider ID: 207382</i></p> <p> 2630 1ST AVE SAN DIEGO, CA 92103-6599</p> <p> <i>Phone: 619-234-2158</i></p> <p><i>Fax: 619-234-0206</i></p> <p> <i>After Hours Phone: 619-234-2158</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: yes</i></p> <p> <i>Site Languages(s) Spoken: Korean, Spanish, Hindi</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p>	<p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: SAN DIEGO AMERICAN INDIAN HEALTH CENTER</p> <p> <i>Website: www.sdaihc.org</i></p>
<p>SAN DIEGO AMERICAN INDIAN HEALTH CENTER</p> <p><i>Provider ID: 207382</i></p> <p> 2630 1ST AVE SAN DIEGO, CA 92103-6599</p> <p> <i>Phone: (619) 234-2158</i></p> <p><i>Fax: (619) 234-0206</i></p> <p> <i>After Hours Phone: (619) 234-2158</i></p> <p><i>License Number: 90000168</i></p>	<p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: SAN DIEGO AMERICAN INDIAN HEALTH CENTER</p> <p> <i>Website: www.sdaihc.org</i></p>	<p>FAMILY HEALTH CTR IBARRA</p> <p><i>Provider ID: 417987</i></p> <p> 4874 POLK AVE SAN DIEGO, CA 92105-2026</p> <p> <i>Phone: (619) 515-2426</i></p> <p> <i>After Hours Phone: (619) 515-2426</i></p> <p><i>License Number: 20A17577</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p>
	<p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: FAMILY HEALTH CTR IBARRA</p> <p> <i>Website: www.fhcsd.org</i></p>	


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

License Number: 20A19345

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR IBARRA


 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

License Number: A145023

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR IBARRA


 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

License Number: A173486

NPI: 1134155377


Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR IBARRA


 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

License Number: G149974

NPI: 1134155377


Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR IBARRA


 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

License Number: NP17838

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR IBARRA


 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426


License Number: NP95004443

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR IBARRA

 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: (619) 515-2426

 After Hours Phone: (619)

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

515-2426
License Number: PA21385
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CTR IBARRA
 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987
 4874 POLK AVE
SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2426
 After Hours Phone: (619) 515-2426
License Number: PA58098
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CTR IBARRA
 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987
 4874 POLK AVE
SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2426
 After Hours Phone: (619) 515-2426
License Number: PA58905

NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CTR IBARRA
 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987
 4874 POLK AVE
SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2426
 After Hours Phone: (619) 515-2426
License Number: PA59481
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CTR IBARRA
 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987
 4874 POLK AVE
SAN DIEGO, CA 92105-2026
 Phone: 619-515-2426
 After Hours Phone: 619-515-2426
License Number: 20A17577
NPI: 1134155377
Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CTR IBARRA
 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987
 4874 POLK AVE
SAN DIEGO, CA 92105-2026
 Phone: 619-515-2426
 After Hours Phone: 619-515-2426
License Number: 20A19345
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CTR IBARRA
 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA


Provider ID: 417987
 4874 POLK AVE
SAN DIEGO, CA 92105-2026
 Phone: 619-515-2426
 After Hours Phone: 619-515-2426
License Number: A145023
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

American Sign Language (ASL): Cultural Competency: No

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HEALTH CTR IBARRA

 *Website: www.fhcsd.org*

FAMILY HEALTH CTR OF SDELM ST

Provider ID: 419167

 140 ELM ST
SAN DIEGO, CA 92101-2602

 *Phone: (619) 515-2520*

Fax: (619) 231-0431

 *After Hours Phone: (619) 515-2520*

License Number: 550002061

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HEALTH CTR OF SDELM ST

 *Website: www.fhcsd.org*


FAMILY HEALTH CTR OF SDELM ST

Provider ID: 419167

 140 ELM ST
SAN DIEGO, CA 92101-2602

 *Phone: (619) 515-2520*

Fax: (619) 231-0431

 *After Hours Phone: (619) 515-2520*

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

American Sign Language (ASL): Cultural Competency: No

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HEALTH CTR OF SDELM ST

 *Website: www.fhcsd.org*


FAMILY HEALTH CTR OF SDELM ST

Provider ID: 419167

 140 ELM ST
SAN DIEGO, CA 92101-2602

 *Phone: 619-515-2520*

Fax: 619-231-0431

 *After Hours Phone: 619-515-2520*

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HEALTH CTR OF SDELM ST

 *Website: www.fhcsd.org*


FAMILY HEALTH CTR OF SDELM ST

Provider ID: 419167

 140 ELM ST
SAN DIEGO, CA 92101-2602

 *Phone: 619-515-2520*

Fax: 619-231-0431

 *After Hours Phone: 619-515-2520*

License Number: 550002061

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HEALTH CTR OF SDELM ST


 *Website: www.fhcsd.org*

DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782

 1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368

 *Phone: (619) 515-2430*

 *After Hours Phone: (619) 515-2430*

License Number: 20A7147


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:


DOWNTOWN FAMILY CTR AT CONNECTIONS


 *Website: www.fhcsd.org*

DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782

 1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368

 *Phone: (619) 515-2430*

 *After Hours Phone: (619) 515-2430*

License Number: PA58826

NPI: 1134155377

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:
DOWNTOWN FAMILY CTR AT
CONNECTIONS

 Website: www.fhcsd.org


DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782

 1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368

 Phone: 619-515-2430

Fax: 619-578-2410

 After Hours Phone:
619-515-2430

License Number: 550002251

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:
DOWNTOWN FAMILY CTR AT
CONNECTIONS

 Website: www.fhcsd.org


DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782

 1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368

 Phone: 619-515-2430

Fax: 619-578-2410

 After Hours Phone:
619-515-2430

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:
DOWNTOWN FAMILY CTR AT
CONNECTIONS

 Website: www.fhcsd.org

DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782

 1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368

 Phone: (619) 515-2430

Fax: (619) 578-2410

 After Hours Phone: (619)
515-2430

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:
DOWNTOWN FAMILY CTR AT
CONNECTIONS

 Website: www.fhcsd.org

DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782

 1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368

 Phone: (619) 515-2430

Fax: (619) 578-2410

 After Hours Phone: (619)
515-2430


License Number: 550002251

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:
DOWNTOWN FAMILY CTR AT
CONNECTIONS

 Website: www.fhcsd.org

DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782

 1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368

 Phone: 619-515-2430

 After Hours Phone:
619-515-2430

License Number: 20A7147

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:
DOWNTOWN FAMILY CTR AT
CONNECTIONS

 Website: www.fhcsd.org

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782

1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368

Phone: 619-515-2430

After Hours Phone:
619-515-2430

License Number: PA58826

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

DOWNTOWN FAMILY CTR AT
CONNECTIONS

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

Phone: (619) 515-2525

After Hours Phone: (619)
515-2525

License Number: A128091

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGOCITY
COLLEGE

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

Phone: (619) 515-2525

After Hours Phone: (619)
515-2525

License Number: A163977

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGOCITY
COLLEGE

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

Phone: (619) 515-2525

After Hours Phone: (619)
515-2525

License Number: A76785

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGOCITY
COLLEGE

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

Phone: (619) 515-2525

After Hours Phone: (619)
515-2525

License Number: DPM4819

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGOCITY
COLLEGE

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

Phone: (619) 515-2525

After Hours Phone: (619)
515-2525

License Number: NP95010814

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 *3544 30TH ST
SAN DIEGO, CA 92104-4120*

 *Phone: 619-515-2424*

 *After Hours Phone:
619-515-2424*


License Number: 20A15413

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes
Cultural Competency: No*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 *3544 30TH ST
SAN DIEGO, CA 92104-4120*

 *Phone: 619-515-2424*

 *After Hours Phone:
619-515-2424*


License Number: 20A20252

NPI: 1134155377


Accepting New Patients: Yes

 *Site English Spoken: Yes
Cultural Competency: No*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS

 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 *3544 30TH ST
SAN DIEGO, CA 92104-4120*

 *Phone: 619-515-2424*

 *After Hours Phone:
619-515-2424*

License Number: A113001

NPI: 1134155377


Accepting New Patients: Yes

 *Site English Spoken: Yes
Cultural Competency: No*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 *3544 30TH ST
SAN DIEGO, CA 92104-4120*

 *Phone: 619-515-2424*

 *After Hours Phone:
619-515-2424*

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes
Cultural Competency: No*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 *3544 30TH ST
SAN DIEGO, CA 92104-4120*

 *Phone: 619-515-2424*

 *After Hours Phone:
619-515-2424*

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes
Cultural Competency: No*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 *3544 30TH ST
SAN DIEGO, CA 92104-4120*

 *Phone: 619-515-2424*

 *After Hours Phone:
619-515-2424*

License Number: A118095

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A140646

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A147758

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A173486

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A180044

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH


CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH

CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH

CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH

CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH

CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH


CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: NP95002226

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH


CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: NP95006792

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N

 Accessibility: CONTACT
PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424


License Number: PA17220

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: PA18746

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org


NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

Fax: 619-501-0627

 After Hours Phone:
619-515-2424

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233597

 4290 POLK AVE
SAN DIEGO, CA 92105-1524

 Phone: (619) 563-0250

 After Hours Phone: (619)
563-0250

License Number: 20A7662

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: MID-CITY
COMMUNITY CLINIC

 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233597

 4290 POLK AVE
SAN DIEGO, CA 92105-1524

 Phone: (619) 563-0250

 After Hours Phone: (619)
563-0250

License Number: A112176

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: MID-CITY
COMMUNITY CLINIC


 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233597

 4290 POLK AVE
SAN DIEGO, CA 92105-1524

 Phone: (619) 563-0250

 After Hours Phone: (619)
563-0250

License Number: A163512







NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


American Sign Language (ASL): *American Sign Language (ASL):* *American Sign Language (ASL):*
N N N
 *Accessibility: CONTACT PROVIDER*  *Accessibility: CONTACT PROVIDER*  *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: MID-CITY COMMUNITY CLINIC *Medical Group/IPA: MID-CITY COMMUNITY CLINIC* *Medical Group/IPA: MID-CITY COMMUNITY CLINIC*
 *Website: www.sdfamilycare.org*  *Website: www.sdfamilycare.org*  *Website: www.sdfamilycare.org*

MID-CITY COMMUNITY CLINIC

Provider ID: 233597
 4290 POLK AVE
SAN DIEGO, CA 92105-1524
 *Phone: (619) 563-0250*
 *After Hours Phone: (619) 563-0250*


License Number: A175116
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No


American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: MID-CITY COMMUNITY CLINIC
 *Website: www.sdfamilycare.org*

MID-CITY COMMUNITY CLINIC

Provider ID: 233597
 4290 POLK AVE
SAN DIEGO, CA 92105-1524
 *Phone: (619) 563-0250*
 *After Hours Phone: (619) 563-0250*


License Number: G60630
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No


American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: MID-CITY COMMUNITY CLINIC
 *Website: www.sdfamilycare.org*

MID-CITY COMMUNITY CLINIC

Provider ID: 233597
 4290 POLK AVE
SAN DIEGO, CA 92105-1524
 *Phone: 619-563-0250*
 *After Hours Phone: 619-563-0250*


License Number: A112176
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: MID-CITY COMMUNITY CLINIC
 *Website: www.sdfamilycare.org*


MID-CITY COMMUNITY CLINIC

Provider ID: 233597
 4290 POLK AVE
SAN DIEGO, CA 92105-1524
 *Phone: (619) 563-0250*
 *After Hours Phone: (619) 563-0250*

License Number: DPM4434
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No


MID-CITY COMMUNITY CLINIC

Provider ID: 233597
 4290 POLK AVE
SAN DIEGO, CA 92105-1524
 *Phone: 619-563-0250*
 *After Hours Phone: 619-563-0250*

License Number: 20A7662
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No

MID-CITY COMMUNITY CLINIC

Provider ID: 233597
 4290 POLK AVE
SAN DIEGO, CA 92105-1524
 *Phone: 619-563-0250*
 *After Hours Phone: 619-563-0250*

License Number: A163512
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

American Sign Language (ASL): American Sign Language (ASL): *Cultural Competency: No*
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: MID-CITY COMMUNITY CLINIC
 *Website: www.sdfamilycare.org*

MID-CITY COMMUNITY CLINIC


Provider ID: 233597
 4290 POLK AVE
SAN DIEGO, CA 92105-1524
 *Phone: 619-563-0250*
 *After Hours Phone: 619-563-0250*
License Number: A175116
NPI: 1598122871

Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: MID-CITY COMMUNITY CLINIC
 *Website: www.sdfamilycare.org*

MID-CITY COMMUNITY CLINIC

Provider ID: 233597
 4290 POLK AVE
SAN DIEGO, CA 92105-1524
 *Phone: 619-563-0250*
 *After Hours Phone: 619-563-0250*
License Number: DPM4434
NPI: 1598122871

Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: MID-CITY COMMUNITY CLINIC
 *Website: www.sdfamilycare.org*

MID-CITY COMMUNITY CLINIC




Provider ID: 233597
 4290 POLK AVE
SAN DIEGO, CA 92105-1524
 *Phone: 619-563-0250*
 *After Hours Phone: 619-563-0250*
License Number: G60630
NPI: 1598122871

Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: MID-CITY COMMUNITY CLINIC
 *Website: www.sdfamilycare.org*




MID-CITY COMMUNITY CLINIC


Provider ID: 233532
 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105-1690
 *Phone: (619) 280-2058*
 *After Hours Phone: (619) 280-2058*
License Number: A112176
NPI: 1598122871

Accepting New Patients: Yes
 *Site English Spoken: Yes*

American Sign Language (ASL): American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: MID-CITY COMMUNITY CLINIC
 *Website: www.sdfamilycare.org*

MID-CITY COMMUNITY CLINIC




Provider ID: 233532
 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105-1690
 *Phone: (619) 280-2058*
 *After Hours Phone: (619) 280-2058*
License Number: A152267
NPI: 1598122871

Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: MID-CITY COMMUNITY CLINIC
 *Website: www.sdfamilycare.org*

MID-CITY COMMUNITY CLINIC

Provider ID: 233532
 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105-1690
 *Phone: (619) 280-2058*
 *After Hours Phone: (619) 280-2058*
License Number: A163512
NPI: 1598122871

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: MID-CITY COMMUNITY CLINIC

Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105-1690

Phone: (619) 280-2058

After Hours Phone: (619) 280-2058

License Number: A61238

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: MID-CITY COMMUNITY CLINIC

Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105-1690

Phone: (619) 280-2058

After Hours Phone: (619) 280-2058

License Number: A72833

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: MID-CITY COMMUNITY CLINIC

Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105-1690

Phone: (619) 280-2058

After Hours Phone: (619) 280-2058

License Number: A94449

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: MID-CITY COMMUNITY CLINIC

Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105-1690

Phone: (619) 280-2058

After Hours Phone: (619) 280-2058

License Number: NP95019446

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: MID-CITY COMMUNITY CLINIC

Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105-1690

Phone: 619-280-2058

After Hours Phone:
619-280-2058

License Number: A112176

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: MID-CITY COMMUNITY CLINIC

Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

4305 UNIVERSITY AVE STE 150

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

SAN DIEGO, CA 92105-1690
 Phone: 619-280-2058
 After Hours Phone:
619-280-2058
License Number: A152267
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: MID-CITY
COMMUNITY CLINIC

 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690
 Phone: 619-280-2058
 After Hours Phone:
619-280-2058

License Number: A163512

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: MID-CITY
COMMUNITY CLINIC

 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690
 Phone: 619-280-2058
 After Hours Phone:
619-280-2058

License Number: A61238

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: MID-CITY
COMMUNITY CLINIC

 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690
 Phone: 619-280-2058
 After Hours Phone:
619-280-2058

License Number: A72833

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: MID-CITY
COMMUNITY CLINIC

 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690
 Phone: 619-280-2058
 After Hours Phone:
619-280-2058

License Number: A94449

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: MID-CITY
COMMUNITY CLINIC

 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690
 Phone: 619-280-2058
 After Hours Phone:
619-280-2058


License Number: NP95019446

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER






Medical Group/IPA: MID-CITY
COMMUNITY CLINIC





 Website: www.sdfamilycare.org





D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


.org






LA MAESTRA FAMILY CLINIC INC
Provider ID: 185268
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
 Phone: (619) 255-9154
 After Hours Phone: (619) 255-9154
License Number: A123929
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC
Provider ID: 185268
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
 Phone: (619) 255-9154
 After Hours Phone: (619) 255-9154
License Number: A163693
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA

LA MAESTRA FAMILY CLINIC INC
Provider ID: 185268
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
 Phone: (619) 255-9155
 After Hours Phone: (619) 255-9155
License Number: A111170
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC
Provider ID: 185268
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
 Phone: (619) 255-9155
 After Hours Phone: (619) 255-9155
License Number: A75533
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT

LA MAESTRA FAMILY CLINIC INC
PROVIDER
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC
Provider ID: 185268
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
 Phone: (619) 255-9155
 After Hours Phone: (619) 255-9155
License Number: A82639
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC
Provider ID: 185268
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
 Phone: (619) 255-9155
 After Hours Phone: (619) 255-9155
License Number: C55979
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC</p> <p> Website: www.lamaestra.org</p> <p>LA MAESTRA FAMILY CLINIC INC</p> <p>Provider ID: 185268</p> <p> 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608</p> <p> Phone: (619) 255-9155</p> <p> After Hours Phone: (619) 255-9155</p> <p>License Number: DC28966 NPI: 1609849074</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC</p> <p> Website: www.lamaestra.org</p> <p>LA MAESTRA FAMILY CLINIC INC</p> <p>Provider ID: 185268</p> <p> 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608</p> <p> Phone: (619) 255-9155</p> <p> After Hours Phone: (619) 255-9155</p> <p>License Number: G45632 NPI: 1609849074</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Yes</p>	<p>Cultural Competency: No American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC</p> <p> Website: www.lamaestra.org</p> <p>LA MAESTRA FAMILY CLINIC INC</p> <p>Provider ID: 185268</p> <p> 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608</p> <p> Phone: (619) 255-9155</p> <p> After Hours Phone: (619) 255-9155</p> <p>License Number: G87837 NPI: 1609849074</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC</p> <p> Website: www.lamaestra.org</p> <p>LA MAESTRA FAMILY CLINIC INC</p> <p>Provider ID: 185268</p> <p> 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608</p> <p> Phone: (619) 255-9155</p> <p> After Hours Phone: (619) 255-9155</p> <p>License Number: NP95013257 NPI: 1609849074</p>	<p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC</p> <p> Website: www.lamaestra.org</p> <p>LA MAESTRA FAMILY CLINIC INC</p> <p>Provider ID: 185268</p> <p> 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608</p> <p> Phone: (619) 255-9155</p> <p> After Hours Phone: (619) 255-9155</p> <p>License Number: PA13694 NPI: 1609849074</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC</p> <p> Website: www.lamaestra.org</p> <p>LA MAESTRA FAMILY CLINIC INC</p> <p>Provider ID: 185268</p> <p> 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608</p> <p> Phone: (619) 255-9155</p> <p> After Hours Phone: (619) 255-9155</p>
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D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

License Number: PA21625

NPI: 1609849074


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: (619) 255-9155

Fax: (619) 284-4731

 After Hours Phone: (619) 255-9155

License Number: 20A6433

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105-1608 **INC**

 Phone: (619) 255-9155

Fax: (619) 749-5480

 After Hours Phone: (619) 255-9155

License Number: A81682

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: (619) 280-7072

 After Hours Phone: (619) 280-7072

License Number: 20A14222

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: (619) 564-8765

 After Hours Phone: (619) 564-8765

License Number: NP95009891

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: (619) 798-3947

 After Hours Phone: (619) 798-3947

License Number: DC32800

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

Phone: 619-255-9154

After Hours Phone:
619-255-9154

License Number: A123929

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC INC

Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

Phone: 619-255-9154

After Hours Phone:
619-255-9154

License Number: A163693

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC INC

Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

Phone: 619-255-9155

After Hours Phone:
619-255-9155

License Number: A111170

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC INC

Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

Phone: 619-255-9155

After Hours Phone:
619-255-9155

License Number: A75533

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC INC

Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

Phone: 619-255-9155

After Hours Phone:
619-255-9155

License Number: A82639

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC INC

Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

Phone: 619-255-9155

After Hours Phone:
619-255-9155

License Number: C55979

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC


 *Website: www.lamaestra.org*

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 *4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608*

 *Phone: 619-255-9155*

 *After Hours Phone:
619-255-9155*

License Number: DC28966

NPI: 1609849074

Accepting New Patients: Yes

 *Site English Spoken: Yes
Cultural Competency: No*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC


 *Website: www.lamaestra.org*

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 *4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608*

 *Phone: 619-255-9155*

 *After Hours Phone:
619-255-9155*

License Number: G45632

NPI: 1609849074

Accepting New Patients: Yes

 *Site English Spoken: Yes
Cultural Competency: No*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC

 *Website: www.lamaestra.org*

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 *4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608*

 *Phone: 619-255-9155*

 *After Hours Phone:
619-255-9155*

License Number: G87837

NPI: 1609849074

Accepting New Patients: Yes

 *Site English Spoken: Yes
Cultural Competency: No*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC

 *Website: www.lamaestra.org*

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 *4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608*

 *Phone: 619-255-9155*

 *After Hours Phone:
619-255-9155*

License Number: NP95013257

NPI: 1609849074


Accepting New Patients: Yes

 *Site English Spoken: Yes
Cultural Competency: No*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC


 *Website: www.lamaestra.org*

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 *4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608*

 *Phone: 619-255-9155*

 *After Hours Phone:
619-255-9155*

License Number: PA13694

NPI: 1609849074

Accepting New Patients: Yes

 *Site English Spoken: Yes
Cultural Competency: No*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC

 *Website: www.lamaestra.org*

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 *4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608*

 *Phone: 619-255-9155*

 *After Hours Phone:
619-255-9155*

License Number: PA21625

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NPI: 1609849074


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org


LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

Fax: 619-284-4731

 After Hours Phone:
619-255-9155

License Number: 20A6433

NPI: 1609849074


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

Fax: 619-749-5480

 After Hours Phone:
619-255-9155

License Number: A81682

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-280-7072

 After Hours Phone:
619-280-7072

License Number: 20A14222

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org


FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 Phone: 619-515-2525

Fax: 619-501-5814

 After Hours Phone:
619-515-2525

License Number: 550002865

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGOCITY


COLLEGE


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 Phone: 619-515-2525

 After Hours Phone:
619-515-2525

License Number: PA22762

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGOCITY

COLLEGE

 Website: www.fhcsd.org

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

Phone: 619-515-2525

Fax: 619-501-5814

After Hours Phone:
619-515-2525

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGOCITY
COLLEGE

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

Phone: 619-515-2525

After Hours Phone:
619-515-2525

License Number: A76785

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGOCITY
COLLEGE

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

Phone: 619-515-2525

After Hours Phone:
619-515-2525

License Number: DPM4819

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGOCITY
COLLEGE

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

Phone: 619-515-2525

After Hours Phone:
619-515-2525

License Number: NP95010814

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGOCITY COLLEGE

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

Phone: (619) 515-2525

After Hours Phone: (619)
515-2525

License Number: PA22762

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGOCITY
COLLEGE

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

Phone: (619) 515-2525

Fax: (619) 501-5814

After Hours Phone: (619)
515-2525

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 *Phone: (619) 515-2525*

Fax: (619) 501-5814

 *After Hours Phone: (619) 515-2525*

License Number: 550002865

NPI: 1134155377


Accepting New Patients: Yes

 *Site English Spoken: Yes*


Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 *Phone: 619-515-2525*

 *After Hours Phone: 619-515-2525*

License Number: A128091

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 *Phone: 619-515-2525*

 *After Hours Phone: 619-515-2525*

License Number: A163977

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE


 *Website: www.fhcsd.org*

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 *Phone: (619) 233-8500*

 *After Hours Phone: (619) 233-8500*

License Number: A104052

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: yes*

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER


 *Website: N/A*

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 *Phone: (619) 233-8500*

 *After Hours Phone: (619) 233-8500*

License Number: A109828

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: yes*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER


 *Website: N/A*

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 *Phone: (619) 233-8500*

 *After Hours Phone: (619) 233-8500*

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

License Number: A115598
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER


 Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500


License Number: A136275

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500

License Number: A42127

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER


 Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

License Number: A54702

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

License Number: A60801

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER


 Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

License Number: A67762

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 Website: N/A


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

ST VINCENT DE PAUL VILLAGE Website: N/A FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

License Number: A82123

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: ST

VINCENT DE PAUL VILLAGE


FAMILY HEALTH CENTER


 Website: N/A

ST VINCENT DE PAUL VILLAGE Website: N/A FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

License Number: C53121

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: ST


VINCENT DE PAUL VILLAGE


FAMILY HEALTH CENTER

ST VINCENT DE PAUL VILLAGE Website: N/A FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

License Number: G29879

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: ST


VINCENT DE PAUL VILLAGE


FAMILY HEALTH CENTER


 Website: N/A

ST VINCENT DE PAUL VILLAGE Website: N/A FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

License Number: G71080

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: ST


VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

License Number: G72486

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: ST


VINCENT DE PAUL VILLAGE


FAMILY HEALTH CENTER


 Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

License Number: NP10769

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes



Cultural Competency: No

American Sign Language (ASL):

N

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
 *Website: N/A*

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER


Provider ID: 403583



 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
 *Phone: (619) 233-8500*
 *After Hours Phone: (619) 233-8500*

License Number: PA54617

NPI: 1598122871


Accepting New Patients: Yes

 *Site English Spoken: yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
 *Website: N/A*

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
 *Phone: 619-233-8500*
 *After Hours Phone: 619-233-8500*



License Number: A104052

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
 *Website: N/A*

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER


Provider ID: 403583



 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
 *Phone: 619-233-8500*
 *After Hours Phone: 619-233-8500*

License Number: A109828

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
 *Website: N/A*

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER


Provider ID: 403583



 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
 *Phone: 619-233-8500*
 *After Hours Phone: 619-233-8500*

License Number: A115598

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
 *Website: N/A*

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER


Provider ID: 403583



 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
 *Phone: 619-233-8500*
 *After Hours Phone: 619-233-8500*

License Number: A136275

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
 *Website: N/A*

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
 *Phone: 619-233-8500*
 *After Hours Phone: 619-233-8500*

License Number: A42127

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: ST

VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

Phone: 619-233-8500

After Hours Phone:
619-233-8500

License Number: A54702

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: ST

VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

Phone: 619-233-8500

After Hours Phone:
619-233-8500

License Number: A60801

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: ST

VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

Phone: 619-233-8500

After Hours Phone:
619-233-8500

License Number: A67762

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: ST

VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

Phone: 619-233-8500

After Hours Phone:
619-233-8500

License Number: A82123

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: ST

VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

Phone: 619-233-8500

After Hours Phone:
619-233-8500

License Number: C53121

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: ST

VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Website: N/A

ST VINCENT DE PAUL VILLAGE

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

FAMILY HEALTH CENTER

Provider ID: 403583

1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

Phone: 619-233-8500

After Hours Phone:
619-233-8500

License Number: G29879

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: ST

VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Website: N/A

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Provider ID: 403583

1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

Phone: 619-233-8500

After Hours Phone:
619-233-8500

License Number: G71080

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: ST

VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Website: N/A

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Provider ID: 403583

1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

Phone: 619-233-8500

After Hours Phone:
619-233-8500

License Number: G72486

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: ST

VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Website: N/A

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Provider ID: 403583

1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

Phone: 619-233-8500

After Hours Phone:
619-233-8500

License Number: NP10769

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: ST

VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Website: N/A

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Provider ID: 403583

1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

Phone: 619-233-8500

After Hours Phone:
619-233-8500

License Number: PA54617

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: ST

VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Website: N/A

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

Phone: 619-662-4100

Fax: 619-662-4158

After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N




Accessibility: CONTACT
PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org


KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100


License Number: A125329
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org


KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: A165432
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER



Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: NP8563
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org




KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100


License Number: A134995
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER




KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100


License Number: A153223
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: NP15657
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No






American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal





D1. Clínicas de salud con calificación federal


Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER






Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: DC27523
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER





Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A96919
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER






Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A79383
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER





Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A45942
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: (619) 428-4463
 After Hours Phone: (619)
428-4463
License Number: G71855
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER




Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: A101017
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100




License Number: 20A8204
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org


KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100




License Number: A125329
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER




Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

License Number: A134995
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org




KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100


License Number: 20A7435
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER




KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100


License Number: A153223
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

License Number: A165432
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No




American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org


KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100




License Number: 20A7435
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org


KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

License Number: NP8563
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER




Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: A101017
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org




KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: 619-428-4463
 After Hours Phone:
619-428-4463


License Number: G71855
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER




KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
Fax: (619) 662-4158
 After Hours Phone: (619)
662-4100


License Number: G71855
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: 20A8204
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No






American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal





D1. Clínicas de salud con calificación federal


Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER






Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: NP15657
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER





Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: DC27523
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER






Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: A79383
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER



Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: A96919
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: A45942
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
Fax: 619-263-2499
 After Hours Phone: 619-515-2560
License Number: A100391
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 *4725 MARKET ST
SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2560*
Fax: 619-263-2499
 *After Hours Phone:
619-515-2560*
NPI: 1134155377

Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 *4725 MARKET ST
SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2560*
 *After Hours Phone:
619-515-2560*
License Number: RN810863
NPI: 1134155377

Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No


*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 *4725 MARKET ST
SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2560*
 *After Hours Phone:
619-515-2560*

License Number: PA58081
NPI: 1134155377


Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 *4725 MARKET ST
SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2560*
 *After Hours Phone:
619-515-2560*

License Number: NP95021154
NPI: 1134155377
Accepting New Patients: Yes


 *Site English Spoken: Yes*
Cultural Competency: No
*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 *4725 MARKET ST
SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2560*
 *After Hours Phone:
619-515-2560*

License Number: PA20378
NPI: 1134155377

Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 *4725 MARKET ST
SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2560*
 *After Hours Phone:
619-515-2560*

License Number: PA60864

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND

NEIGHBORHOODS FAMILY


HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: PA58505

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND

NEIGHBORHOODS FAMILY


HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: NP95005321

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND


NEIGHBORHOODS FAMILY


HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: NP95009292

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND

NEIGHBORHOODS FAMILY


HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: NP95007000

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND

NEIGHBORHOODS FAMILY


HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: NP10146

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND

NEIGHBORHOODS FAMILY

HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: NP19911

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: NP17362

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: NP95000205

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: NP95001492

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY

HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: A142743

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: A161373

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N

Accessibility: CONTACT
PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A164879

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: MT2061555

NPI: 1134155377

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: DC33150

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: G61394

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: C174538

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org


DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: C174771


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A112379

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A120447

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A120576

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: C55180


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: C54198

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


YSIDRO HEALTH CHC - OCEAN VIEW


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A78373

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH CHC - OCEAN VIEW


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A162332

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH CHC - OCEAN VIEW


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A157505

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH CHC - OCEAN VIEW


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A153414


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH CHC - OCEAN VIEW


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: DC33300

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH CHC - OCEAN VIEW

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: (619) 662-4100

Fax: (619) 595-0258




 After Hours Phone: (619)
662-4100

NPI: 1598122871

Accepting New Patients: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

 *Site English Spoken: yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 *Phone: (619) 662-4100*

Fax: (619) 858-1003

 *After Hours Phone: (619)*
662-4100

License Number: A88893

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: yes*
Cultural Competency: No

American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW


 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 *Phone: 619-662-4100*

 *After Hours Phone:*
619-662-4100

License Number: A78373

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: yes*
Cultural Competency: No

American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 *Phone: 619-662-4100*

 *After Hours Phone:*
619-662-4100


License Number: C54198

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: yes*
Cultural Competency: No

American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW


 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 *Phone: 619-662-4100*

 *After Hours Phone:*
619-662-4100

License Number: A162332

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: yes*
Cultural Competency: No

American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 *Phone: 619-662-4100*

Fax: 619-595-0258

 *After Hours Phone:*
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: yes*
Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW

 *Website: www.ihpsocal.org*


SAN YSIDRO HEALTH CHC - OCEAN VIEW


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: DC33300


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: C55180

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A153414

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A157505

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A112379


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A120447

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


YSIDRO HEALTH CHC - OCEAN VIEW

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A120576

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH CHC - OCEAN VIEW


 Website: www.ihpsocal.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

License Number: A137260

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

License Number: A140912

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

License Number: A141057


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

License Number: A161373

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560


License Number: A148014


NPI: 1134155377

Accepting New Patients: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

License Number: A142743

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560


License Number: A164879

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

License Number: C174538

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

License Number: NP10146

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

License Number: MT2061555

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

License Number: G78814

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

License Number: G61394

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

License Number: DC33150

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND


NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

License Number: 20A13745

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2420

 After Hours Phone: (619) 515-2420

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

License Number: 20A14772

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 *Phone: (619) 515-2420*
 *After Hours Phone: (619) 515-2420*
License Number: A154298
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 *Phone: (619) 515-2420*
 *After Hours Phone: (619) 515-2420*
License Number: A113001
NPI: 1134155377



Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*




DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 *Phone: (619) 515-2420*
 *After Hours Phone: (619) 515-2420*
License Number: 20A11535
NPI: 1134155377






Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
 *Phone: 619-662-4100*
Fax: 619-858-1003

 *After Hours Phone: 619-662-4100*
License Number: A88893
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHC - OCEAN VIEW
 *Website: www.ihpsocal.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 *Phone: (619) 263-2499*
 *After Hours Phone: (619) 263-2499*
License Number: 20A7241
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

License Number: A119689

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

License Number: A126187

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

License Number: A113448

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

License Number: A114181

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

License Number: A115598

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

License Number: 20A15471

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND

NEIGHBORHOODS FAMILY


HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

Fax: (619) 263-2499

 After Hours Phone: (619)
515-2560

License Number: A100391

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

License Number: PA60864

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N
 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

Fax: (619) 263-2499


 After Hours Phone: (619)
515-2560


NPI: 1134155377

Accepting New Patients: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

License Number: RN810863

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

License Number: PA58505

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

License Number: PA58081

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

License Number: PA20378

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

License Number: NP95021154

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

License Number: NP95005321
NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

License Number: NP95009292
NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

License Number: NP95007000
NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

License Number: NP17362

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560


License Number: NP19911

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560


License Number: NP95000205

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

License Number: NP95001492

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2420

 After Hours Phone:
619-515-2420

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND N


NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-263-2499

 After Hours Phone:
619-263-2499

License Number: 20A7241

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2420

 After Hours Phone:
619-515-2420

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2420

 After Hours Phone:
619-515-2420

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2420

 After Hours Phone:
619-515-2420

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 *Phone: 619-515-2560*

 *After Hours Phone: 619-515-2560*

License Number: 20A13745

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 *Phone: 619-515-2560*

 *After Hours Phone: 619-515-2560*

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 *Phone: 619-515-2560*

 *After Hours Phone: 619-515-2560*

License Number: 20A14772

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 *Phone: 619-515-2560*

 *After Hours Phone: 619-515-2560*

License Number: A113448

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 *Phone: 619-515-2560*

 *After Hours Phone: 619-515-2560*

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 *Website: www.fhcsd.org*






DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363







 4725 MARKET ST
SAN DIEGO, CA 92102-4715

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal







D1. Clínicas de salud con calificación federal

 Phone: 619-515-2560
 After Hours Phone:
619-515-2560
License Number: A115598
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC
 Website: www.fhcsd.org







DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone:
619-515-2560
License Number: A108228
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC
 Website: www.fhcsd.org







DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone:
619-515-2560
License Number: 20A15471
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC
 Website: www.fhcsd.org






DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone:
619-515-2560
License Number: A116680
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC
 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


Provider ID: 206363
 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone:
619-515-2560
License Number: A119689
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC
 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone:
619-515-2560
License Number: A118095
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A141057

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A140912

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND

NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A126187

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A137260

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 Website: www.fhcsd.org


NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492

 1016 OUTER RD
SAN DIEGO, CA 92154-1351

 Phone: 619-429-3733

Fax: 619-628-5550

 After Hours Phone:
619-429-3733

License Number: 550001474

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER

 Website: www.ibclinic.org

NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492

 1016 OUTER RD
SAN DIEGO, CA 92154-1351

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

NPI: 1598122871

Accepting New Patients: Yes



























D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER Website: www.ibclinic.org	619-429-3733 License Number: A112781 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER Website: www.ibclinic.org	1016 OUTER RD SAN DIEGO, CA 92154-1351 Phone: 619-429-3733 After Hours Phone: 619-429-3733 License Number: NP22031 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER Website: www.ibclinic.org
NESTOR COMMUNITY HEALTH CENTER Provider ID: 214492 1016 OUTER RD SAN DIEGO, CA 92154-1351 Phone: (619) 429-3733 After Hours Phone: (619) 429-3733 License Number: NP22031 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER Website: www.ibclinic.org	NESTOR COMMUNITY HEALTH CENTER Provider ID: 214492 1016 OUTER RD SAN DIEGO, CA 92154-1351 Phone: 619-429-3733 Fax: 619-628-5550 After Hours Phone: 619-429-3733 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER Website: www.ibclinic.org	NESTOR COMMUNITY HEALTH CENTER Provider ID: 214492 1016 OUTER RD SAN DIEGO, CA 92154-1351 Phone: (619) 429-3733 Fax: (619) 628-5550 After Hours Phone: (619) 429-3733 License Number: 550001474 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER Website: www.ibclinic.org
NESTOR COMMUNITY HEALTH CENTER Provider ID: 214492 1016 OUTER RD SAN DIEGO, CA 92154-1351 Phone: 619-429-3733 After Hours Phone:	NESTOR COMMUNITY HEALTH CENTER Provider ID: 214492 1016 OUTER RD SAN DIEGO, CA 92154-1351 Phone: 619-429-3733 Fax: 619-628-5550 After Hours Phone: 619-429-3733 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER Website: www.ibclinic.org	NESTOR COMMUNITY HEALTH CENTER Provider ID: 214492 1016 OUTER RD SAN DIEGO, CA 92154-1351 Phone: (619) 429-3733 Fax: (619) 628-5550 After Hours Phone: (619) 429-3733 License Number: 550001474 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER Website: www.ibclinic.org

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 Website: www.ibclinic.org	 Accessibility: CONTACT PROVIDER	Min/Max Age: 0\None
NESTOR COMMUNITY HEALTH CENTER	Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER	<input type="checkbox"/> Site English Spoken: Y
Provider ID: 214492	 Website: www.ibclinic.org	<input type="checkbox"/> Site Languages(s) Spoken: Spanish
 1016 OUTER RD SAN DIEGO, CA 92154-1351	NESTOR COMMUNITY HEALTH CENTER	Cultural Competency: N
 Phone: 619-429-3733	Provider ID: 214492	 Hours: M-TU 8:30AM-5:30PM W 10:00AM-7:00PM TH-F 8:30AM-5:30PM
 After Hours Phone: 619-429-3733	 1016 OUTER RD SAN DIEGO, CA 92154-1351	American Sign Language (ASL): N
License Number: A165398	 Phone: (619) 429-3733	 Accessibility: CONTACT PROVIDER
NPI: 1598122871	 After Hours Phone: (619) 429-3733	Medical Group/IPA: Operation Samahan
Accepting New Patients: Yes	License Number: A112781	 Website: www.operationsamahan.org
<input type="checkbox"/> Site English Spoken: Yes	NPI: 1598122871	OPERATION SAMAHAN RANCHO PENASQUITOS
<input type="checkbox"/> Site Languages(s) Spoken: Spanish	Accepting New Patients: Yes	Provider ID: 418535
Cultural Competency: No	<input type="checkbox"/> Site English Spoken: Yes	 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129
American Sign Language (ASL): N	<input type="checkbox"/> Site Languages(s) Spoken: Spanish	 Phone: (844) 200-2426
 Accessibility: CONTACT PROVIDER	Cultural Competency: No	Fax: (858) 695-9074
Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER	American Sign Language (ASL): N	 After Hours Phone: (844) 200-2426
 Website: www.ibclinic.org	 Accessibility: CONTACT PROVIDER	License Number: 550003857
NESTOR COMMUNITY HEALTH CENTER	Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER	NPI: 1699216622
Provider ID: 214492	 Website: www.ibclinic.org	Accepting New Patients: Yes
 1016 OUTER RD SAN DIEGO, CA 92154-1351	OPERATION SAMAHAN RANCHO PENASQUITOS	Min/Max Age: 0\None
 Phone: (619) 429-3733	Provider ID: 418535	<input type="checkbox"/> Site English Spoken: Y
 After Hours Phone: (619) 429-3733	 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129	<input type="checkbox"/> Site Languages(s) Spoken: Spanish
License Number: A165398	 Phone: (844) 200-2426	Cultural Competency: N
NPI: 1598122871	Fax: (858) 695-9074	 Hours: M-TU 8:30AM-5:30PM W 10:00AM-7:00PM TH-F 8:30AM-5:30PM
Accepting New Patients: Yes	 After Hours Phone: (844) 200-2426	American Sign Language (ASL): N
<input type="checkbox"/> Site English Spoken: Yes	License Number: 550002478	 Accessibility: CONTACT
<input type="checkbox"/> Site Languages(s) Spoken: Spanish	NPI: 1699216622	
Cultural Competency: No	Accepting New Patients: Yes	
American Sign Language (ASL): N		

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

PROVIDER
Medical Group/IPA: Operation Samahan
Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535
9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844) 200-2426

License Number: 550002478
NPI: 1699216622
Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Y
Site Languages(s) Spoken: Spanish

Cultural Competency: N

Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: Operation Samahan

Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535
9995 CARMEL MOUNTAIN RD STE B10 AND B11

SAN DIEGO, CA 92129
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844) 200-2426
License Number: 550003857
NPI: 1699216622

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Y
Site Languages(s) Spoken: Spanish

Cultural Competency: N

Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: Operation Samahan

Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
Fax: (858) 578-4417

After Hours Phone: (844) 200-2426
License Number: 080000146
NPI: 1871680397

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Y
Site Languages(s) Spoken:

Spanish, Tagalog
Cultural Competency: N
Hours: M-F
8:00AM-4:30PM
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: Operation Samahan

Website: www.operationsamahan.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
Fax: (858) 488-1394
After Hours Phone: (619) 515-2444

License Number: 080000115
NPI: 1386689701

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

Hours: M-W
8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego

Website: www.fhcsd.org
Email: sabay@fhcsd.org

OPERATION SAMAHAN - MIRA

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

MESA

Provider ID: 432308

9855 ERMA RD STE 105
SAN DIEGO, CA 92131

Phone: (844) 200-2426

Fax: (858) 536-8034

After Hours Phone: (844)
200-2426

License Number: 080000146

NPI: 1861933897

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Operation
Samahan

Website: www.operationsamahan.org

LINDA VISTA HEALTH CARE

CTR

Provider ID: 206046

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

NPI: 1609905215

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Site Languages(s) Spoken:

Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: N

Hours: M-F

8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE

CTR

Provider ID: 206046

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

NPI: 1780665877

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Site Languages(s) Spoken:

Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: N

Hours: M-F

8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: www.sdfamilycare.org

SAN YSIDRO HEALTH

COMMUNITY HEIGHTS FAMILY

MED

Provider ID: 517998

4690 EL CAJON BLVD

SAN DIEGO, CA 92115

Phone: (619) 662-4100

Fax: (619) 824-9076

After Hours Phone: (619)
662-4100

License Number: 550003882

NPI: 1205477841

Accepting New Patients: Yes

Min/Max Age: 0\120

Site English Spoken: Y

Site Languages(s) Spoken:
Chinese, Spanish, Tagalog,
Vietnamese

Cultural Competency: N

Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: N/A

FAMILY HLTH CTR SD

HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

Fax: (619) 501-9645

After Hours Phone: (619)
515-2545

License Number: 550003099

NPI: 1629456900

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

Hours: M-TH


8:00AM-9:00PM

F 8:00AM-5:00PM


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego


 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680


 After Hours Phone: (858) 810-8700

NPI: 1457724858


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y

 Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese

Cultural Competency: N

 Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP


 Website: www.sdfamilycare.org

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 233-8500

Fax: (619) 687-1067

 After Hours Phone: (619) 233-8500

License Number: 090000297


NPI: 1659415131

Accepting New Patients: No

Min/Max Age: 0\None

 Site English Spoken: Y

Cultural Competency: N

 Hours: M-F
8:00AM-5:30PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP of Southern Cal-PHP

 Website: N/A

MID-CITY COMMUNITY CLINIC

Provider ID: 233597

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

Fax: (858) 633-4681

 After Hours Phone: (619) 563-0250


NPI: 1962483040

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y

Cultural Competency: N


 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of

Southern Cal-PHP


 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

Fax: (858) 633-4682

 After Hours Phone: (619) 280-2058


NPI: 1962483040

Accepting New Patients: Yes

Min/Max Age: 0\22

 Site English Spoken: Y

Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP of Southern Cal-PHP

 Website: www.sdfamilycare.org


LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 280-4213

Fax: (619) 795-9849

 After Hours Phone: (619) 280-4213

NPI: 1336353721


Accepting New Patients: Yes

Min/Max Age: 0\None

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL): N
License Number: 090000469
NPI: 1700821303

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: La
Maestra Family Clinic


 Website: www.lamaestra.org


Email:
aschmaltz@lamaestra.org

NORTH PARK FAMILY HEALTH CENTERS


Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104


 Phone: (619) 515-2424
Fax: (619) 501-0627

 After Hours Phone: (619)
515-2424
NPI: 1184169963

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: Family
Health Centers of San Diego

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104


 Phone: (619) 515-2424
Fax: (619) 683-7586

 After Hours Phone: (619)
515-2424

License Number: 090000469
NPI: 1700821303

Accepting New Patients: Yes
Min/Max Age: 0\18


 Site English Spoken: Y
Cultural Competency: N

 Hours: M-TH
8:00AM-5:00PM

American Sign Language (ASL): N
Accepting New Patients: Yes
Min/Max Age: 0\None

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: Family
Health Centers of San Diego

 Website: www.fhcsd.org
Email: jenanm@fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424
Fax: (619) 501-0627

 After Hours Phone: (619)
515-2424

NPI: 1700821303

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: Family
Health Centers of San Diego

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101


 Phone: (619) 515-2525
Fax: (619) 501-5814

 After Hours Phone: (619)
515-2525


License Number: 550002865
NPI: 1952729303

Accepting New Patients: Yes
Min/Max Age: 0\None


 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:30AM-5:30PM

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: Family
Health Centers of San Diego

 Website: www.fhcsd.org
Email: janeta@fhcsd.org

DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782


 1250 6TH AVE STE 100
SAN DIEGO, CA 92101

 Phone: (619) 515-2430
Fax: (619) 578-2410

 After Hours Phone: (619)
515-2430




License Number: 550002251
NPI: 1588901045

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal



 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: Family
Health Centers of San Diego
 Website: www.fhcsd.org
Email: jinah@fhcsd.org



FAMILY HEALTH CTR OF SD- ELM ST

Provider ID: 419167
 140 ELM ST
SAN DIEGO, CA 92101
 Phone: (619) 515-2520
Fax: (619) 231-0431
 After Hours Phone: (619)
515-2520
License Number: 550002061
NPI: 1316419070
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: Family
Health Centers of San Diego
 Website: www.fhcsd.org
Email: jinah@fhcsd.org







FAMILY HEALTH CTR IBARRA


Provider ID: 417987
 4874 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 515-2426


Fax: (619) 255-8002
 After Hours Phone: (619)
515-2426
License Number: 550003108
NPI: 1477953933
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:30AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: Family
Health Centers of San Diego
 Website: www.fhcsd.org





SAN DIEGO AMERICAN INDIAN HEALTH CENTER



Provider ID: 207382
 2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
Fax: (619) 234-0206
 After Hours Phone: (619)
234-2158
License Number: 090000168
NPI: 1003902917
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
 Site Language(s) Spoken:
Korean, Spanish, Hindi
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: WWW.SDAIHC.ORG
Indian Health Services: Y

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
Fax: (619) 234-2447
 After Hours Phone: (619)
515-2300
NPI: 1447281936
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: Family
Health Centers of San Diego
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145
 2391 ISLAND AVE
SAN DIEGO, CA 92102
 Phone: (619) 515-2435
Fax: (619) 515-2435
 After Hours Phone: (619)
515-2435
NPI: 1174549232
Accepting New Patients: Yes
Min/Max Age: 0\None

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 *Site English Spoken: Y*
Cultural Competency: N
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: Family Health Centers of San Diego
 *Website: N/A*
Email: dalvarado@fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
 *Phone: (619) 515-2422*
Fax: (619) 269-0053
 *After Hours Phone: (619) 515-2422*


License Number: 550003113

NPI: 1235521782


Accepting New Patients: Yes

Min/Max Age: 0\None


 *Site English Spoken: Y*
Cultural Competency: N

 *Hours: M-F*
8:00AM-5:00PM

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: Family Health Centers of San Diego

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

Provider ID: 517403


 316 25TH ST
SAN DIEGO, CA 92102
 *Phone: (619) 238-5551*
Fax: (619) 238-3807
 *After Hours Phone: (619) 238-5551*

NPI: 1598308926

Accepting New Patients: Yes

Min/Max Age: 0\120

 *Site English Spoken: Y*
Cultural Competency: N

 *Hours: M-F*
8:00AM-5:00PM

American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: IHP of Southern Cal-PHP

 *Website: N/A*

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105
 *Phone: (619) 515-2454*
Fax: (619) 794-2696


 *After Hours Phone: (619) 515-2454*


License Number: 550003556

NPI: 1336525906

Accepting New Patients: Yes

Min/Max Age: 0\None

 *Site English Spoken: Y*
Cultural Competency: N

 *Hours: M-F*
8:30AM-5:30PM



American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: Family Health Centers of San Diego
 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 624977

 2204 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2355*
Fax: (619) 232-7011

 *After Hours Phone: (619) 515-2355*

NPI: 1447281936

Accepting New Patients: Yes

Min/Max Age: 0\None

 *Site English Spoken: Y*
Cultural Competency: N

American Sign Language (ASL): N




 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: Family Health Centers of San Diego

 *Website: www.fhcsd.org*

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 664747


 2114 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2406*
 *After Hours Phone: (619) 515-2406*

License Number: 550003556

NPI: 1336525906


Accepting New Patients: Yes

Min/Max Age: 0\None


 *Site English Spoken: Y*
Cultural Competency: N

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 Hours: M-F
8:30AM-5:30PM

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: Family
Health Centers of San Diego

 Website: www.fhcsd.org

SAN YSIDRO HEALTH PRECISION PARK

Provider ID: 631494

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

 Phone: (619) 662-4100
Fax: (619) 600-4870

 After Hours Phone: (619)
662-4100


License Number: 550007737

NPI: 1124782685


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish

Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.syhealth.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560
Fax: (619) 263-2499

 After Hours Phone: (619)
515-2560

NPI: 1982747671

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: Family
Health Centers of San Diego


 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100
Fax: (619) 595-0258


 After Hours Phone: (619)
662-4100

NPI: 1326225632


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y

 Site Languages(s) Spoken: ,
Spanish

Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: <https://www.syhealth.org/locations>

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100
Fax: (619) 205-1952


 After Hours Phone: (619)
662-4100

NPI: 1538262092


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Y

 Site Languages(s) Spoken:
Chinese, Spanish, Tagalog,
Vietnamese


Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.syhealth.org/clinics/king-chavez-health-center

NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492

 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733
Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

License Number: 550001474

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NPI: 1215246996

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Cultural Competency: N

Hours: M 8:30AM-5:00PM

TU-TH 8:30AM-8:00PM

F 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

Website: www.ibclinic.org

Email: avaldez@ibclinic.org

SAN MARCOS

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

License Number: G74757

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

License Number: 20A15159

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

License Number: 20A17306

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

License Number: A48980

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

License Number: A63903

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

License Number: A60958

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

License Number: A116562

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

License Number: C54157

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

License Number: A71311

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

License Number: A93248

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

License Number: NP95003903

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

License Number: NP95002545

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

License Number: NP95001653

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:

Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

License Number: NP20893

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:

Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

License Number: NP21368

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

License Number: NP18874

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

License Number: NM235997

NPI: 1598122871

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

- Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767

License Number: DC29074


NPI: 1598122871

Accepting New Patients: Yes


- Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767

License Number: G71182

NPI: 1598122871

Accepting New Patients: Yes


- Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767

License Number: NM235844

NPI: 1598122871

Accepting New Patients: Yes


- Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: (760) 736-6767
 After Hours Phone: (760)

736-6767

License Number: PA19825

NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767

License Number: PA21723

NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org





TRUECARE

Provider ID: 625875






 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal





 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
License Number: PA17101
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE






Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
License Number: PA22667
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE N
 Website: www.ihpsocal.org

TRUECARE






Provider ID: 625875
 1595 GRAND AVE STE 100

SAN MARCOS, CA
92069-2973
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
License Number: PA51867
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE N
 Website: www.ihpsocal.org





TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: (760) 736-6767
Fax: (760) 736-8740
 After Hours Phone: (760) 736-6767
License Number: 80000167
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: (760) 736-6767
Fax: (760) 736-8740
 After Hours Phone: (760) 736-6767
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone: 760-736-6767
License Number: 20A15159
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: G74757


NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: 20A17306

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: A63903

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: A48980

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: A116562

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: PA21723

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes































Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: TRUECARE</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p><i>American Sign Language (ASL):</i> Spanish</p> <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: TRUECARE</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i> N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: TRUECARE</i></p> <p> <i>Website: www.ihpsocal.org</i></p>
<p>TRUECARE</p> <p><i>Provider ID: 625875</i></p> <p> 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973</p> <p> <i>Phone: 760-736-6767</i></p> <p> <i>After Hours Phone: 760-736-6767</i></p> <p><i>License Number: PA19825</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><input type="checkbox"/> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i> N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: TRUECARE</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p>TRUECARE</p> <p><i>Provider ID: 625875</i></p> <p> 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973</p> <p> <i>Phone: 760-736-6767</i></p> <p> <i>After Hours Phone: 760-736-6767</i></p> <p><i>License Number: PA17101</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><input type="checkbox"/> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i> N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: TRUECARE</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p>TRUECARE</p> <p><i>Provider ID: 625875</i></p> <p> 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973</p> <p> <i>Phone: 760-736-6767</i></p> <p><i>Fax: 760-736-8740</i></p> <p> <i>After Hours Phone: 760-736-6767</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><input type="checkbox"/> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i> N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: TRUECARE</i></p> <p> <i>Website: www.ihpsocal.org</i></p>
<p>TRUECARE</p> <p><i>Provider ID: 625875</i></p> <p> 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973</p> <p> <i>Phone: 760-736-6767</i></p> <p> <i>After Hours Phone: 760-736-6767</i></p> <p><i>License Number: NP95003903</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><input type="checkbox"/> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p>	<p>TRUECARE</p> <p><i>Provider ID: 625875</i></p> <p> 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973</p> <p> <i>Phone: 760-736-6767</i></p> <p> <i>After Hours Phone: 760-736-6767</i></p> <p><i>License Number: PA51867</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><input type="checkbox"/> <i>Site Languages(s) Spoken: Spanish</i></p>	<p>TRUECARE</p> <p><i>Provider ID: 625875</i></p> <p> 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973</p> <p> <i>Phone: 760-736-6767</i></p> <p> <i>After Hours Phone: 760-736-6767</i></p> <p><i>License Number: PA22667</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p>

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<input type="checkbox"/> Site English Spoken: Yes	520-8200	License Number: 1598122871
<input type="checkbox"/> Site Languages(s) Spoken: Spanish	NPI: 1598122871	NPI: 1598122871
Cultural Competency: No	Accepting New Patients: Yes	Accepting New Patients: Yes
American Sign Language (ASL): N	<input type="checkbox"/> Site English Spoken: Yes	<input type="checkbox"/> Site English Spoken: Yes
<input type="checkbox"/> Accessibility: CONTACT PROVIDER	Cultural Competency: No	Cultural Competency: No
Medical Group/IPA: TRUECARE	American Sign Language (ASL): N	American Sign Language (ASL): N
<input type="checkbox"/> Website: www.ihpsocal.org	<input type="checkbox"/> Accessibility: CONTACT PROVIDER	<input type="checkbox"/> Accessibility: CONTACT PROVIDER
	Medical Group/IPA: TRUECARE	Medical Group/IPA: TRUECARE
	<input type="checkbox"/> Website: www.ihpsocal.org	<input type="checkbox"/> Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

Phone: 760-736-6767

Fax: 760-736-8740

After Hours Phone:
760-736-6767

License Number: 80000167

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92078-2450

Phone: (760) 520-8200

Fax: (360) 462-2749

After Hours Phone: (760)
520-8200

License Number: 80000167

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92078-2450

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

License Number: NP18788

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92078-2450

Phone: (760) 520-8200

Fax: (360) 462-2749

After Hours Phone: (760)

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92078-2450

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: NP20893

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: NM235997

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

Phone: 760-736-6767

After Hours Phone:

760-736-6767

License Number: NP18874

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: NP95001653

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: NP95002545

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: NP21368

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org





TRUECARE

Provider ID: 625875






1595 GRAND AVE STE 100

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal






D1. Clínicas de salud con calificación federal

SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: A71311
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org






TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: A93248
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org






TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: A60958
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org





TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: C54157
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: DC29074
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: G71182
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 Website: www.ihpsocal.org Medical Group/IPA: TRUECARE Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org  Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NM235844

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes


Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 614511

 1595 GRAND AVE STE 106
SAN MARCOS, CA
92078-2450

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

License Number: 80000167

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 614511

 1595 GRAND AVE STE 106
SAN MARCOS, CA
92078-2450

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

License Number: C54157


NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92078-2450

 Phone: 760-736-6767

Fax: 760-736-6744

 After Hours Phone:
760-736-6767

License Number: PA17718


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


TRUECARE

Provider ID: 614511

 1595 GRAND AVE STE 106
SAN MARCOS, CA
92078-2450

 Phone: 760-736-6767

Fax: 760-736-6744

 After Hours Phone:
760-736-6767

License Number: C54157

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


TRUECARE

Provider ID: 614511

 1595 GRAND AVE STE 106
SAN MARCOS, CA
92078-2450

 Phone: 760-736-6767

Fax: 760-736-6744

 After Hours Phone:
760-736-6767

License Number: 80000167


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N







 Accessibility: CONTACT
PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal






D1. Clínicas de salud con calificación federal

Medical Group/IPA: TRUECARE  Website: www.ihpsocal.org  Website: www.ihpsocal.org
 Website: www.ihpsocal.org






TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92078-2450
 Phone: 760-520-8200
Fax: 360-462-2749
 After Hours Phone:
760-520-8200
License Number: 80000167
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE  Website: www.ihpsocal.org
 Website: www.ihpsocal.org






TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92078-2450
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760)
736-6767
License Number: PA17718
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE  Website: www.ihpsocal.org






TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92078-2450
 Phone: 760-736-6767
Fax: 760-736-6744
 After Hours Phone:
760-736-6767
License Number: 1598122871
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE  Website: www.ihpsocal.org






TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92078-2450
 Phone: 760-520-8200
Fax: 360-462-2749
 After Hours Phone:
760-520-8200
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE  Website: www.ihpsocal.org

TRUECARE


Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92078-2450
 Phone: 760-736-6767
Fax: 760-736-6744
 After Hours Phone:
760-736-6767
License Number: NP18788
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE  Website: www.ihpsocal.org

TRUECARE







Provider ID: 614511
 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760)
736-6767
License Number: 080000167
NPI: 1811617939
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL): N
 Accessibility: CONTACT

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal



D1. Clínicas de salud con calificación federal

PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: www.ihpsocal.org

TRUECARE




Provider ID: 614511
 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760)
736-6767
License Number: 080000167
NPI: 1245246917
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: www.ihpsocal.org


TRUECARE



Provider ID: 614511
 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760)
736-6767
License Number: 080000167
NPI: 1598484255
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y

Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: www.ihpsocal.org


TRUECARE






Provider ID: 206426
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760)
736-6767
License Number: 080000167
NPI: 1245246917

Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM





American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 206426
 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760)
736-6767
License Number: 080000167
NPI: 1598484255
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 206426
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760)
736-6767
License Number: 080000167
NPI: 1811617939
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

American Sign Language (ASL): *Accepting New Patients: Yes*
N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP of Southern Cal-PHP


 *Website: www.ihpsocal.org*


SAN YSIDRO

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 *Phone: (619) 600-4870*

 *After Hours Phone: (619) 600-4870*


License Number: NP95018617

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS


 *Website: www.ihpsocal.org*

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 *Phone: (619) 600-4867*

 *After Hours Phone: (619) 600-4867*

License Number: PA22855

NPI: 1598122871

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS


 *Website: www.ihpsocal.org*

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

License Number: A145480

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS


 *Website: www.ihpsocal.org*

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

License Number: A120584

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN


YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS


 *Website: www.ihpsocal.org*

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*


License Number: A113624

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN


YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 *Website: www.ihpsocal.org*



SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

License Number: A153975

NPI: 1598122871


Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN


YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

License Number: A167529

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN


YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

License Number: A164201

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN


YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

License Number: A32571

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN


YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A167529

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN


YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A32571

NPI: 1598122871


Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER






























Medical Group/IPA: SAN

YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 Website: www.ihpsocal.org	YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS	 Accessibility: CONTACT PROVIDER
SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS	 Website: www.ihpsocal.org	Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Provider ID: 227469	SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS	 Website: www.ihpsocal.org
 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322	Provider ID: 227469	SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
 Phone: 619-662-4100	 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322	Provider ID: 227469
 After Hours Phone: 619-662-4100	 Phone: 619-662-4100	 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322
License Number: A164201	 After Hours Phone: 619-662-4100	 Phone: 619-662-4100
NPI: 1598122871	License Number: A113624	 After Hours Phone: 619-662-4100
Accepting New Patients: Yes	NPI: 1598122871	License Number: A145480
<input type="checkbox"/> Site English Spoken: Yes	Accepting New Patients: Yes	NPI: 1598122871
Cultural Competency: No	<input type="checkbox"/> Site English Spoken: Yes	Accepting New Patients: Yes
American Sign Language (ASL): N	Cultural Competency: No	<input type="checkbox"/> Site English Spoken: Yes
 Accessibility: CONTACT PROVIDER	American Sign Language (ASL): N	Cultural Competency: No
Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS	 Accessibility: CONTACT PROVIDER	American Sign Language (ASL): N
 Website: www.ihpsocal.org	Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS	 Accessibility: CONTACT PROVIDER
SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS	 Website: www.ihpsocal.org	Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Provider ID: 227469	SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS	 Website: www.ihpsocal.org
 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322	Provider ID: 227469	SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
 Phone: (619) 662-4100	 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322	Provider ID: 227469
 After Hours Phone: (619) 662-4100	 Phone: 619-662-4100	 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322
License Number: NP95017732	 After Hours Phone: 619-662-4100	 Phone: 619-662-4100
NPI: 1598122871	License Number: A120584	 After Hours Phone: 619-662-4100
Accepting New Patients: Yes	NPI: 1598122871	License Number: A153975
<input type="checkbox"/> Site English Spoken: Yes	Accepting New Patients: Yes	NPI: 1598122871
Cultural Competency: No	<input type="checkbox"/> Site English Spoken: Yes	Accepting New Patients: Yes
American Sign Language (ASL): N	Cultural Competency: No	<input type="checkbox"/> Site English Spoken: Yes
 Accessibility: CONTACT PROVIDER	American Sign Language (ASL): N	Cultural Competency: No
Medical Group/IPA: SAN		

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-600-4870

 After Hours Phone:
619-600-4870


License Number: NP95018617

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-600-4867

 After Hours Phone:
619-600-4867

License Number: PA22855

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


License Number: PT302385

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: (619) 662-4100

Fax: (619) 600-4870

 After Hours Phone: (619)
662-4100

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: NP95019995

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: (619) 662-4100

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 After Hours Phone: (619)
662-4100

License Number: PA58672

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN


YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: G66745

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN


YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: DPM2930

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN


YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: NP12112

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN

YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org


SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: NP95001960

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN


YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: C42207

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN

YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 Website: www.ihpsocal.org

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal





SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS Provider ID: 227469 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322 Phone: (619) 662-4100 After Hours Phone: (619) 662-4100 License Number: A40473 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS Website: www.ihpsocal.org	<i>PACE SENIOR HLTH SVS</i> Website: www.ihpsocal.org	<i>Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS</i>
SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS Provider ID: 227469 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322 Phone: (619) 662-4100 After Hours Phone: (619) 662-4100 License Number: NP95003721 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS Website: www.ihpsocal.org	SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS Provider ID: 227469 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322 Phone: (619) 662-4100 After Hours Phone: (619) 662-4100 License Number: NP95003721 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS Website: www.ihpsocal.org	SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS Provider ID: 227469 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322 Phone: (619) 662-4100 After Hours Phone: (619) 662-4100 License Number: NP95003671 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS Website: www.ihpsocal.org
SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS Provider ID: 227469 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322 Phone: (619) 662-4100 After Hours Phone: (619) 662-4100 License Number: A51843 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO	SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS Provider ID: 227469 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322 Phone: (619) 662-4100 After Hours Phone: (619) 662-4100 License Number: NP95004315 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER	SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 Phone: (619) 662-4100 After Hours Phone: (619) 662-4100 License Number: A40480 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Spanish, Tagalog,


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER





Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
License Number: A49267
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*


Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA



92173-2007
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
License Number: A180886
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*


Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER




Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*



License Number: A40061
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*


Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER




Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*

License Number: A173435
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*

Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*

License Number: A175006
NPI: 1598122871

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100

License Number: A177337

NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100

License Number: A71304

NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100

License Number: A66885

NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100

License Number: A77936

NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

- Phone: (619) 662-4100

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 After Hours Phone: (619)
662-4100

License Number: A72235

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A56153

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO


HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A63844

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A49307

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A130348

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

































 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007  Phone: (619) 662-4100  After Hours Phone: (619) 662-4100 License Number: A125329 NPI: 1598122871 Accepting New Patients: Yes  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER  Website: www.ihpsocal.org	 Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER  Website: www.ihpsocal.org	License Number: A131021 NPI: 1598122871 Accepting New Patients: Yes  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER  Website: www.ihpsocal.org
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292  4004 BEYER BLVD SAN YSIDRO, CA 92173-2007  Phone: (619) 662-4100  After Hours Phone: (619) 662-4100 License Number: A127188 NPI: 1598122871 Accepting New Patients: Yes  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No American Sign Language (ASL): N	 Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER  Website: www.ihpsocal.org	SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292  4004 BEYER BLVD SAN YSIDRO, CA 92173-2007  Phone: (619) 662-4100  After Hours Phone: (619) 662-4100 License Number: A131952 NPI: 1598122871 Accepting New Patients: Yes  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER  Website: www.ihpsocal.org
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292  4004 BEYER BLVD SAN YSIDRO, CA 92173-2007  Phone: (619) 662-4100  After Hours Phone: (619) 662-4100	 Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER  Website: www.ihpsocal.org	


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A138568

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A132982

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,

Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A145008

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA

92173-2007

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A145480

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese


Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: A159673

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal




Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org



SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: A158364
NPI: 1598122871



Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: A157505
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: A170738
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: A169694
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: 20A12653
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

<p>American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Website: www.ihpsocal.org</p>	<p>After Hours Phone: (619) 662-4100 License Number: 20A8081 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Website: www.ihpsocal.org</p>	<p>HEALTH CENTER Website: www.ihpsocal.org</p>
<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 Phone: (619) 662-4100 After Hours Phone: (619) 662-4100 License Number: 20A17643 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Website: www.ihpsocal.org</p>	<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 Phone: (619) 662-4100 After Hours Phone: (619) 662-4100 License Number: 20A7502 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Website: www.ihpsocal.org</p>	<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 Phone: (619) 428-4463 After Hours Phone: (619) 428-4463 License Number: 20A8245 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Website: www.ihpsocal.org</p>
<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 Phone: (619) 662-4100</p>	<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 Phone: (619) 662-4100 After Hours Phone: (619) 662-4100 License Number: 20A7502 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Website: www.ihpsocal.org</p>	<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 Phone: (619) 428-4463 After Hours Phone: (619) 428-4463 License Number: A112627 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes</p>

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal



 *Site Languages(s) Spoken:* Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website:* www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone:* (619) 662-4100
 *After Hours Phone:* (619) 662-4100

License Number: 20A11153
NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken:* Yes
 *Site Languages(s) Spoken:* Spanish, Tagalog, Portuguese

Cultural Competency: No
American Sign Language (ASL): N


 *Accessibility:* CONTACT PROVIDER



Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 *Website:* www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone:* (619) 662-4100
 *After Hours Phone:* (619) 662-4100

License Number: 20A10964
NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken:* Yes
 *Site Languages(s) Spoken:* Spanish, Tagalog, Portuguese

Cultural Competency: No
American Sign Language (ASL): N


 *Accessibility:* CONTACT PROVIDER



Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 *Website:* www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone:* (619) 662-4100
 *After Hours Phone:* (619) 662-4100

License Number: A106103
NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken:* Yes
 *Site Languages(s) Spoken:* Spanish, Tagalog, Portuguese

Cultural Competency: No
American Sign Language (ASL): N


 *Accessibility:* CONTACT PROVIDER



Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 *Website:* www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone:* (619) 662-4100
 *After Hours Phone:* (619) 662-4100

License Number: A113482
NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken:* Yes
 *Site Languages(s) Spoken:* Spanish, Tagalog, Portuguese

Cultural Competency: No
American Sign Language (ASL): N


 *Accessibility:* CONTACT PROVIDER



Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 *Website:* www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone:* (619) 662-4100
 *After Hours Phone:* (619) 662-4100

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

License Number: A114008

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

License Number: A104660

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

License Number: A101827

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

License Number: A101017

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog,

Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

License Number: 20A9907

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org





SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469






3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal






D1. Clínicas de salud con calificación federal

 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: NP95017732
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org






SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: NP95004315
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org



SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: NP95003721
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
Fax: 619-600-4870
 After Hours Phone:
619-662-4100
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 205-6341
 After Hours Phone: (619)
205-6341
License Number: A64487
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS




Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: PA58672
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org




SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: PT302385
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org




SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: NP95019995
NPI: 1598122871



Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org


SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A51843
NPI: 1598122871


Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A40473
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes

Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org


SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: C42207
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: NP95003671
NPI: 1598122871

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NP95001960

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: G66745

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN


YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NP12112

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN


YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: DPM2930

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN


YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: G51462

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

YSIDRO HEALTH SAN YSIDRO

HEALTH CENTER


 Website: www.ihpsocal.org


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: DC33693

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: G59670

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,

Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: G80107

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA

92173-2007

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: G81461

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: NP12112

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal



Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org



SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: C51110
NPI: 1598122871




Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org



SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: C42207
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: A99433
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org




SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: A80832
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
License Number: A84160
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

American Sign Language (ASL): Fax: (619) 205-6341

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

License Number: A93785

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

License Number: A55469

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619) 662-4100

License Number: A78373

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-205-6341

 After Hours Phone: 619-205-6341

License Number: A64487

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-428-4463

 After Hours Phone: 619-428-4463

License Number: 20A8245

NPI: 1598122871

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: 20A10964

NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-428-4463

After Hours Phone: 619-428-4463

License Number: A112627

NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: (619) 662-4100

Fax: (619) 205-6341

After Hours Phone: (619) 662-4100

License Number: A164201

NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: (619) 662-4100

Fax: (619) 205-6341

After Hours Phone: (619) 662-4100

License Number: 20A7241

NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org






SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER







Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal




D1. Clínicas de salud con calificación federal





92173-2007
 Phone: (619) 662-4100
Fax: (619) 205-6341
 After Hours Phone: (619) 662-4100
License Number: DPM2930
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619) 662-4100
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO




HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER




Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: PA17162
NPI: 1598122871
Accepting New Patients: Yes

 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org






SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: PA20490
NPI: 1598122871
Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: NP95003355
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No


























American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007  Phone: 619-662-4100  After Hours Phone: 619-662-4100 License Number: 20A12653 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER  Website: www.ihpsocal.org	 Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER  Website: www.ihpsocal.org	License Number: 20A7502 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER  Website: www.ihpsocal.org
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292  4004 BEYER BLVD SAN YSIDRO, CA 92173-2007  Phone: 619-662-4100  After Hours Phone: 619-662-4100 License Number: 20A11153 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No American Sign Language (ASL): N	 Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER  Website: www.ihpsocal.org	SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292  4004 BEYER BLVD SAN YSIDRO, CA 92173-2007  Phone: 619-662-4100  After Hours Phone: 619-662-4100 License Number: 20A8081 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER  Website: www.ihpsocal.org
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292  4004 BEYER BLVD SAN YSIDRO, CA 92173-2007  Phone: 619-662-4100  After Hours Phone: 619-662-4100 License Number: 20A11153 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No American Sign Language (ASL): N	SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292  4004 BEYER BLVD SAN YSIDRO, CA 92173-2007  Phone: 619-662-4100  After Hours Phone: 619-662-4100	


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 20A9907

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A101017

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,

Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A106103

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA

92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A113482

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A101827

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No


American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: A104660

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: A125329

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No




American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: A114893

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A114008


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No


American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A131952

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Website: www.ihpsocal.org</p>	<p>After Hours Phone: 619-662-4100 License Number: A130348 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Website: www.ihpsocal.org</p>	<p>HEALTH CENTER Website: www.ihpsocal.org</p>
<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 Phone: 619-662-4100 After Hours Phone: 619-662-4100 License Number: A131021 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Website: www.ihpsocal.org</p>	<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 Phone: 619-662-4100 After Hours Phone: 619-662-4100 License Number: A127188 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Website: www.ihpsocal.org</p>	<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 Phone: 619-662-4100 After Hours Phone: 619-662-4100 License Number: A138568 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Website: www.ihpsocal.org</p>
<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 Phone: 619-662-4100</p>	<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 Phone: 619-662-4100 After Hours Phone: 619-662-4100 License Number: A132982 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes</p>	<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 Phone: 619-662-4100 After Hours Phone: 619-662-4100 License Number: A132982 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes</p>




D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal





D1. Clínicas de salud con calificación federal

 *Site Languages(s) Spoken:* Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website:* www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone:* 619-662-4100
 *After Hours Phone:* 619-662-4100
License Number: A145480
NPI: 1598122871


Accepting New Patients: Yes
 *Site English Spoken:* Yes
 *Site Languages(s) Spoken:* Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website:* www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER




Provider ID: 206292



 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone:* 619-662-4100
 *After Hours Phone:* 619-662-4100
License Number: A145008
NPI: 1598122871



Accepting New Patients: Yes
 *Site English Spoken:* Yes
 *Site Languages(s) Spoken:* Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website:* www.ihpsocal.org




SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone:* 619-662-4100
 *After Hours Phone:* 619-662-4100
License Number: A157505
NPI: 1598122871

Accepting New Patients: Yes
 *Site English Spoken:* Yes
 *Site Languages(s) Spoken:* Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N



 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website:* www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone:* 619-662-4100
 *After Hours Phone:* 619-662-4100
License Number: A169694
NPI: 1598122871

Accepting New Patients: Yes
 *Site English Spoken:* Yes
 *Site Languages(s) Spoken:* Spanish, Tagalog, Portuguese

Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website:* www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone:* 619-662-4100
 *After Hours Phone:* 619-662-4100

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

License Number: A170738

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: A159673

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: A158364

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

License Number: C160626

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

License Number: C158543

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: (619) 662-4100






 After Hours Phone: (619)

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal






D1. Clínicas de salud con calificación federal

662-4100
License Number: C149818
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 Website: www.ihpsocal.org





SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR


Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: A94813
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD






HEALTH CTR
Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: A74960
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR




Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: A178949
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN

YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: A175006
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR







Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: A169577
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR






Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
License Number: A47906
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007







 *Phone: (619) 662-4100*
Fax: (619) 205-1948
 *After Hours Phone: (619) 662-4100*
License Number: G20087
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR





Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: (619) 662-4100*
Fax: (619) 205-1948
 *After Hours Phone: (619) 662-4100*
License Number: A82187
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: (619) 662-4100*
Fax: (619) 205-1948
 *After Hours Phone: (619) 662-4100*
License Number: A72721
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: (619) 662-4100*
Fax: (619) 205-1948
 *After Hours Phone: (619) 662-4100*
License Number: A49307
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal



D1. Clínicas de salud con calificación federal

Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*

License Number: G52183

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 *Website: www.ihpsocal.org*


SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: (619) 662-4100*

Fax: (619) 205-1948

 *After Hours Phone: (619) 662-4100*

License Number: A63844

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*



Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*

License Number: 20A12555

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*



Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*


License Number: 20A14949

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*



Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*

License Number: 20A14222

NPI: 1598122871

Accepting New Patients: Yes


 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N







 *Accessibility: CONTACT*

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal



D1. Clínicas de salud con calificación federal




PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR


Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 Website: www.ihpsocal.org



SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
Fax: (619) 205-1948
 After Hours Phone: (619)
662-4100
License Number: G51462

NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 Website: www.ihpsocal.org







SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A112627
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N






 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: 20A8516
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A111118
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A113914


NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A157505

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A169577

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A138938

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A178949

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR


 Website: www.ihpsocal.org


SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: A175006

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A47906

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL


AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A74960

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

License Number: 20A14949

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


License Number: 20A14222

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: (619) 662-4100






 After Hours Phone: (619)

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal




D1. Clínicas de salud con calificación federal

662-4100
License Number: A111118
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 Website: www.ihpsocal.org





SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR


Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: 20A8516
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD






HEALTH CTR
Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: A157505
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
Provider ID: 227411




 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: A113914
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN

YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: A138938
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR






Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
License Number: A112627
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 *Website: www.ihpsocal.org*







SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: G81461
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*






Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: NP12112
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*




SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: NP95003355
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*
Cultural Competency: No

American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN

YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*




SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: PA20490
NPI: 1598122871

Accepting New Patients: Yes
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*

Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: PA17162
NPI: 1598122871
Accepting New Patients: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

 Site English Spoken: Yes	YSIDRO HEALTH CENTER	N
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese	Provider ID: 206292	 Accessibility: CONTACT PROVIDER
Cultural Competency: No	 4004 BEYER BLVD	Medical Group/IPA: SAN
American Sign Language (ASL): N	SAN YSIDRO, CA 92173-2007	YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 Accessibility: CONTACT PROVIDER	 Phone: 619-662-4100	 Website: www.ihpsocal.org
Medical Group/IPA: SAN	Fax: 619-205-6341	
YSIDRO HEALTH SAN YSIDRO HEALTH CENTER	 After Hours Phone: 619-662-4100	
 Website: www.ihpsocal.org	License Number: A55469	
	NPI: 1598122871	
	Accepting New Patients: Yes	
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER	 Site English Spoken: Yes	SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292	 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese	Provider ID: 206292
 4004 BEYER BLVD	Cultural Competency: No	 4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007	American Sign Language (ASL): N	SAN YSIDRO, CA 92173-2007
 Phone: 619-662-4100	 Accessibility: CONTACT PROVIDER	 Phone: 619-662-4100
Fax: 619-205-6341	Medical Group/IPA: SAN	Fax: 619-205-6341
 After Hours Phone: 619-662-4100	YSIDRO HEALTH SAN YSIDRO HEALTH CENTER	 After Hours Phone: 619-662-4100
License Number: A164201	 Website: www.ihpsocal.org	License Number: A78373
NPI: 1598122871		NPI: 1598122871
Accepting New Patients: Yes		Accepting New Patients: Yes
 Site English Spoken: Yes	SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR	 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese	Provider ID: 227411	 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No	 4050 BEYER BLVD	Cultural Competency: No
American Sign Language (ASL): N	SAN YSIDRO, CA 92173-2007	American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER	 Phone: (619) 662-4100	 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN	 After Hours Phone: (619) 662-4100	Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO HEALTH CENTER	License Number: 20A12555	YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org	NPI: 1598122871	 Website: www.ihpsocal.org
	Accepting New Patients: Yes	
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER	 Site English Spoken: Yes	SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292	Cultural Competency: No	Provider ID: 206292
 4004 BEYER BLVD	American Sign Language (ASL):	 4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007		SAN YSIDRO, CA 92173-2007
 Phone: 619-662-4100		 Phone: 619-662-4100

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Fax: 619-205-6305

 After Hours Phone:
619-662-4100

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

Fax: 619-205-6341

 After Hours Phone:
619-662-4100

License Number: 20A7241

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

Fax: 619-205-6341

 After Hours Phone:
619-662-4100

License Number: DPM2930

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: DC33693

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:

Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: C51110

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org







SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER




Provider ID: 206292



 4004 BEYER BLVD

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal




SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: G51462
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org



**SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER**
Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: G59670
NPI: 1598122871


Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER





Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: G80107
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org



SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: C42207

NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A99433
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A93785

NPI: 1598122871

Accepting New Patients: Yes


 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A84160

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A77936

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007


 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A80832

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A49307

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A49267

NPI: 1598122871

Accepting New Patients: Yes


 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A63844

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A56153

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007


 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A71304

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A66885

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes


























 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p> <i>Website: www.ihpsocal.org</i></p>	<p>619-662-4100</p> <p>License Number: A177337</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><input type="checkbox"/> <i>Site Languages(s) Spoken: Spanish, Tagalog, Portuguese</i></p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p>	<p> <i>Website: www.ihpsocal.org</i></p>
<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p>Provider ID: 206292</p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> <i>Phone: 619-662-4100</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p>License Number: A72235</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><input type="checkbox"/> <i>Site Languages(s) Spoken: Spanish, Tagalog, Portuguese</i></p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p>	<p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p> <i>Website: www.ihpsocal.org</i></p>	<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p>Provider ID: 206292</p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> <i>Phone: 619-662-4100</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p>License Number: A173435</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><input type="checkbox"/> <i>Site Languages(s) Spoken: Spanish, Tagalog, Portuguese</i></p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p>
<p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p> <i>Website: www.ihpsocal.org</i></p>	<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p>Provider ID: 206292</p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> <i>Phone: 619-662-4100</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p>License Number: A175006</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><input type="checkbox"/> <i>Site Languages(s) Spoken: Spanish, Tagalog, Portuguese</i></p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p>	<p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p> <i>Website: www.ihpsocal.org</i></p>
<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p>Provider ID: 206292</p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> <i>Phone: 619-662-4100</i></p> <p> <i>After Hours Phone:</i></p>	<p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p>	<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p>Provider ID: 206292</p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> <i>Phone: 619-662-4100</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p>License Number: A40480</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><input type="checkbox"/> <i>Site Languages(s) Spoken:</i></p>

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

*Spanish, Tagalog,
Portuguese*
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org



SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100


License Number: A40061
NPI: 1598122871



Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese



Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org




SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD


SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A180886
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: C149818
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN

YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: A94813
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100





License Number: C160626
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes



D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 *Website: www.ihpsocal.org*




SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: C158543
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 *Website: www.ihpsocal.org*


SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*
Fax: 619-205-1948
 *After Hours Phone: 619-662-4100*
License Number: G51462
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 *Website: www.ihpsocal.org*





SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR



Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-662-4100*
Fax: 619-205-1948
 *After Hours Phone: 619-662-4100*
License Number: A63844
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR


 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-662-4100*
Fax: 619-205-1948
 *After Hours Phone: 619-662-4100*
License Number: A72721
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR


Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-662-4100*
Fax: 619-205-1948
 *After Hours Phone: 619-662-4100*
License Number: A82187
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Cultural Competency: No

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*

Fax: 619-205-1948

 *After Hours Phone:
619-662-4100*

License Number: G20087

NPI: 1598122871


Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR


 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA

92173-2007

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: G52183

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 *Website: www.ihpsocal.org*


SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*

Fax: 619-205-1948

 *After Hours Phone:
619-662-4100*

License Number: A49307

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*

Fax: 619-205-6305

 *After Hours Phone:
619-662-4100*

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

Fax: (619) 205-6305


 *After Hours Phone: (619)
662-4100*

NPI: 1952364747

Accepting New Patients: Yes

Min/Max Age: 0\None

 *Site English Spoken: Y*

 *Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese*

Cultural Competency: N




D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal




 Hours: M-F
8:00AM-5:30PM
SA 8:30AM-2:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: www.syhealth.org/clinics/san-ysidro-health-center




SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-1967
 After Hours Phone: (619)
662-4100
NPI: 1558852947
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: syhealth.org/clinic/s/maternal-child-health-center




SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 600-4870
 After Hours Phone: (619)
662-4100
NPI: 1801438239
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: <https://www.syhealth.org/locations>




SPRING VALLE



GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
Fax: 619-462-5584
 After Hours Phone:
619-515-2555
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes




Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: PA54588
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

License Number: NP95013978

NPI: 1134155377


Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:


GROSSMONT SPRING VALLEY


FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

 Website: www.fhcsd.org


GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC


Provider ID: 206361

 8788 JAMACHA RD

SPRING VALLE, CA

91977-4035


 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

License Number: 20A15459

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:


GROSSMONT SPRING VALLEY


FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:


GROSSMONT SPRING VALLEY


FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:


GROSSMONT SPRING VALLEY


FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

License Number: A116680

NPI: 1134155377


Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):





































N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p><i>GROSSMONT SPRING VALLEY</i> N <i>FAMILY HLTH CTRS INC</i>  Website: www.fhcsd.org</p>	<p> Accessibility: CONTACT PROVIDER Medical Group/IPA:</p>	<p>Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):</p>
<p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Provider ID: 206361  8788 JAMACHA RD SPRING VALLE, CA 91977-4035  Phone: (619) 515-2555  After Hours Phone: (619) 515-2555 License Number: A113001 NPI: 1134155377 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):</p>	<p><i>GROSSMONT SPRING VALLEY</i> <i>FAMILY HLTH CTRS INC</i>  Website: www.fhcsd.org</p>	<p>N  Accessibility: CONTACT PROVIDER Medical Group/IPA:</p>
<p><i>GROSSMONT SPRING VALLEY</i> <i>FAMILY HLTH CTRS INC</i> Provider ID: 206361  8788 JAMACHA RD SPRING VALLE, CA 91977-4035  Phone: (619) 515-2555  After Hours Phone: (619) 515-2555 License Number: A148014 NPI: 1134155377 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):</p>	<p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Provider ID: 206361  8788 JAMACHA RD SPRING VALLE, CA 91977-4035  Phone: (619) 515-2555  After Hours Phone: (619) 515-2555 License Number: A148014 NPI: 1134155377 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):</p>	<p><i>GROSSMONT SPRING VALLEY</i> <i>FAMILY HLTH CTRS INC</i> Provider ID: 206361  8788 JAMACHA RD SPRING VALLE, CA 91977-4035  Phone: (619) 515-2555  After Hours Phone: (619) 515-2555 License Number: A169342 NPI: 1134155377 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):</p>
<p><i>GROSSMONT SPRING VALLEY</i> <i>FAMILY HLTH CTRS INC</i>  Website: www.fhcsd.org</p>	<p><i>GROSSMONT SPRING VALLEY</i> <i>FAMILY HLTH CTRS INC</i> Provider ID: 206361  8788 JAMACHA RD SPRING VALLE, CA 91977-4035  Phone: (619) 515-2555  After Hours Phone: (619) 515-2555 License Number: A108228 NPI: 1134155377 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):</p>	<p>N  Accessibility: CONTACT PROVIDER Medical Group/IPA:</p>
<p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Provider ID: 206361  8788 JAMACHA RD SPRING VALLE, CA 91977-4035  Phone: (619) 515-2555  After Hours Phone: (619) 515-2555 License Number: A108228 NPI: 1134155377 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):</p>	<p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Provider ID: 206361  8788 JAMACHA RD SPRING VALLE, CA 91977-4035  Phone: (619) 515-2555  After Hours Phone: (619) 515-2555 License Number: A178499 NPI: 1134155377</p>	<p><i>GROSSMONT SPRING VALLEY</i> <i>FAMILY HLTH CTRS INC</i> Provider ID: 206361  8788 JAMACHA RD SPRING VALLE, CA 91977-4035  Phone: (619) 515-2555</p>

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 After Hours Phone: (619) 515-2555

License Number: A149063

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:


GROSSMONT SPRING VALLEY


FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: (619) 515-2555

 After Hours Phone: (619) 515-2555

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:


GROSSMONT SPRING VALLEY


FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: (619) 515-2555

 After Hours Phone: (619) 515-2555

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:


GROSSMONT SPRING VALLEY


FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: (619) 515-2555

 After Hours Phone: (619) 515-2555

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:


GROSSMONT SPRING VALLEY


FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: (619) 515-2555

 After Hours Phone: (619) 515-2555

License Number: NP10943

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:


GROSSMONT SPRING VALLEY


FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: (619) 515-2555

 After Hours Phone: (619) 515-2555

License Number: A76059

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

































American Sign Language (ASL):

N

 Accessibility: CONTACT





D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal







D1. Clínicas de salud con calificación federal





<p><i>PROVIDER</i> Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC  Website: www.fhcsd.org</p>	<p><i>Cultural Competency: No</i> <i>American Sign Language (ASL):</i> N  <i>Accessibility: CONTACT</i> <i>PROVIDER</i> Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC  Website: www.fhcsd.org</p>	<p><i>License Number: PA54588</i> <i>NPI: 1134155377</i> <i>Accepting New Patients: Yes</i>  <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i> <i>American Sign Language (ASL):</i> N  <i>Accessibility: CONTACT</i> <i>PROVIDER</i> Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC  Website: www.fhcsd.org</p>
<p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Provider ID: 206361  8788 JAMACHA RD SPRING VALLE, CA 91977-4035  Phone: (619) 515-2555  After Hours Phone: (619) 515-2555 License Number: G78814 NPI: 1134155377 <i>Accepting New Patients: Yes</i>  <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i> <i>American Sign Language (ASL):</i> N  <i>Accessibility: CONTACT</i> <i>PROVIDER</i> Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC  Website: www.fhcsd.org</p>	<p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Provider ID: 206361  8788 JAMACHA RD SPRING VALLE, CA 91977-4035  Phone: (619) 515-2555  After Hours Phone: (619) 515-2555 License Number: A68463 NPI: 1134155377 <i>Accepting New Patients: Yes</i>  <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i> <i>American Sign Language (ASL):</i> N  <i>Accessibility: CONTACT</i> <i>PROVIDER</i> Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC  Website: www.fhcsd.org</p>	<p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Provider ID: 206361  8788 JAMACHA RD SPRING VALLE, CA 91977-4035  Phone: (619) 515-2555  After Hours Phone: (619) 515-2555 License Number: NP95013978 NPI: 1134155377 <i>Accepting New Patients: Yes</i>  <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i> <i>American Sign Language (ASL):</i> N  <i>Accessibility: CONTACT</i> <i>PROVIDER</i> Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC  Website: www.fhcsd.org</p>
<p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Provider ID: 206361  8788 JAMACHA RD SPRING VALLE, CA 91977-4035  Phone: (619) 515-2555  After Hours Phone: (619) 515-2555 License Number: A55932 NPI: 1134155377 <i>Accepting New Patients: Yes</i>  <i>Site English Spoken: Yes</i></p>	<p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Provider ID: 206361  8788 JAMACHA RD SPRING VALLE, CA 91977-4035  Phone: (619) 515-2555  After Hours Phone: (619) 515-2555</p>	<p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Provider ID: 206361  8788 JAMACHA RD</p>

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: 20A15459
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
 Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**
Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: A108228
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
 Website: www.fhcsd.org



**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**
Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: A113001
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
 Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**
Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: A114181
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
 Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**
Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: 20A14919
NPI: 1134155377
































Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
 Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**
Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: 20A11535
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p> Website: www.fhcsd.org</p>	<p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p> Website: www.fhcsd.org</p>	<p> After Hours Phone: 619-515-2555</p> <p>License Number: A149063</p> <p>NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p> Website: www.fhcsd.org</p>
<p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p>Provider ID: 206361</p> <p> 8788 JAMACHA RD SPRING VALLE, CA 91977-4035</p> <p> Phone: (619) 515-2555</p> <p>Fax: (619) 462-5584</p> <p> After Hours Phone: (619) 515-2555</p> <p>NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p> Website: www.fhcsd.org</p>	<p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p>Provider ID: 206361</p> <p> 8788 JAMACHA RD SPRING VALLE, CA 91977-4035</p> <p> Phone: 619-515-2555</p> <p> After Hours Phone: 619-515-2555</p> <p>License Number: A148014</p> <p>NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p> Website: www.fhcsd.org</p>	<p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p>Provider ID: 206361</p> <p> 8788 JAMACHA RD SPRING VALLE, CA 91977-4035</p> <p> Phone: 619-515-2555</p> <p> After Hours Phone: 619-515-2555</p> <p>License Number: A163464</p> <p>NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p> Website: www.fhcsd.org</p>
<p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p>Provider ID: 206361</p> <p> 8788 JAMACHA RD SPRING VALLE, CA 91977-4035</p> <p> Phone: 619-515-2555</p> <p> After Hours Phone: 619-515-2555</p> <p>License Number: A116680</p> <p>NPI: 1134155377</p>	<p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p>Provider ID: 206361</p> <p> 8788 JAMACHA RD SPRING VALLE, CA 91977-4035</p> <p> Phone: 619-515-2555</p>	<p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p>Provider ID: 206361</p> <p> 8788 JAMACHA RD SPRING VALLE, CA 91977-4035</p> <p> Phone: 619-515-2555</p>


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


GROSSMONT SPRING VALLEY


FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

GROSSMONT SPRING VALLEY


FAMILY HLTH CTRS INC





Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555

License Number: A169342

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


GROSSMONT SPRING VALLEY


FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555

License Number: A76059

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA:


GROSSMONT SPRING VALLEY


FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


GROSSMONT SPRING VALLEY


FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA:


**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**


 *Website: www.fhcsd.org*

**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 *Phone: 619-515-2555*

 *After Hours Phone:
619-515-2555*

License Number: NP10943

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA:


**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**


 *Website: www.fhcsd.org*

**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 *Phone: 619-515-2555*

 *After Hours Phone:
619-515-2555*

License Number: A55932


NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA:


**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**


 *Website: www.fhcsd.org*

**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 *Phone: 619-515-2555*

 *After Hours Phone:
619-515-2555*

License Number: A178499


NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:


**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**


 *Website: www.fhcsd.org*


SPRING VALLEY

**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

 *Phone: (619) 515-2555*

 *After Hours Phone: (619)
515-2555*

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA:


**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**


 *Website: www.fhcsd.org*

**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

 *Phone: (619) 515-2555*

 *After Hours Phone: (619)
515-2555*

License Number: A118095


NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

License Number: C174771

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


GROSSMONT SPRING VALLEY


FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA:


GROSSMONT SPRING VALLEY


FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555

License Number: A118095

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


GROSSMONT SPRING VALLEY


FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

GROSSMONT SPRING VALLEY


FAMILY HLTH CTRS INC

 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

Fax: (619) 462-5584

 After Hours Phone: (619)
515-2555

NPI: 1508801069


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y


Cultural Competency: N

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Family

Health Centers of San Diego

 Website: www.fhcsd.org


Email: angelad@fhcsd.org

VALLEY CENTER

NEIGHBORHOOD HEALTHCARE

Provider ID: 519918

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Fax: (360) 462-2750

☎ After Hours Phone: (760)
742-9919

License Number: 080000397

NPI: 1437335148

Accepting New Patients: Yes

Min/Max Age: 0\None

☑ Site English Spoken: Y
Cultural Competency: N

🕒 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

🌐 Website: N/A

NEIGHBORHOOD HEALTHCARE

Provider ID: 519918

📍 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

☎ Phone: (760) 742-9919

Fax: (360) 462-2750

☎ After Hours Phone: (760)
742-9919

License Number: 080000483

NPI: 1437335148

Accepting New Patients: Yes

Min/Max Age: 0\None

☑ Site English Spoken: Y
Cultural Competency: N

🕒 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

🌐 Website: N/A

NEIGHBORHOOD HEALTHCARE

Provider ID: 519918

📍 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

☎ Phone: (760) 742-9919

Fax: (360) 462-2750

☎ After Hours Phone: (760)
742-9919

License Number: 080000483
NPI: 1437335148

Accepting New Patients: Yes

Min/Max Age: 0\None

☑ Site English Spoken: Y
Cultural Competency: N

🕒 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

🌐 Website: N/A

NEIGHBORHOOD HEALTHCARE

Provider ID: 519918

📍 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

☎ Phone: (760) 742-9919

Fax: (360) 462-2750

☎ After Hours Phone: (760)
742-9919

License Number: 080000397
NPI: 1437335148

Accepting New Patients: Yes

Min/Max Age: 0\None

☑ Site English Spoken: Y
Cultural Competency: N

🕒 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

🌐 Website: N/A

VISTA

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

📍 135 GRAPEVINE RD
VISTA, CA 92083-4004

☎ Phone: (760) 631-5000

☎ After Hours Phone: (760)
631-5000

License Number: A60517

NPI: 1598122871

Accepting New Patients: Yes

☑ Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

GRAPEVINE

🌐 Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

📍 135 GRAPEVINE RD
VISTA, CA 92083-4004

☎ Phone: 760-631-5000

☎ After Hours Phone:
760-631-5000

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal



License Number: A60517
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC GRAPEVINE
 Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339
 136 GRAPEVINE RD
VISTA, CA 92083-4004
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
License Number: 80000328
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: Yes
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC GRAPEVINE
 Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339
 136 GRAPEVINE RD







VISTA, CA 92083-4004
 Phone: 760-631-5000
Fax: 760-414-3892
 After Hours Phone: 760-631-5000
License Number: 80000328
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: Yes
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC GRAPEVINE
 Website: N/A

VCC DURIAN





Provider ID: 411518
 105 DURIAN ST STE A
VISTA, CA 92083-6206
 Phone: (844) 308-5003
Fax: (760) 414-3892
 After Hours Phone: (844) 308-5003
License Number: 80000328
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VCC DURIAN
 Website: N/A

VCC DURIAN


Provider ID: 411518

 105 DURIAN ST STE A
VISTA, CA 92083-6206
 Phone: 844-308-5003
Fax: 760-414-3892
 After Hours Phone: 844-308-5003
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VCC DURIAN
 Website: N/A

VCC DURIAN





Provider ID: 411518
 105 DURIAN ST STE A
VISTA, CA 92083-6206
 Phone: 844-308-5003
Fax: 760-414-3892
 After Hours Phone: 844-308-5003
License Number: 1851300123
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VCC DURIAN
 Website: N/A

VCC DURIAN






Provider ID: 411518
 105 DURIAN ST STE A

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal






D1. Clínicas de salud con calificación federal

VISTA, CA 92083-6206
 Phone: 844-308-5003
Fax: 760-414-3892
 After Hours Phone:
844-308-5003
License Number: 80000328
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VCC
DURIAN
 Website: N/A





VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: (760) 414-3892
 After Hours Phone: (760)
414-3892
License Number: DC31392
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC
 Website: www.vistacommu
nityclinic.org

VISTA COMMUNITY CLINIC





Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: (760) 414-3892
 After Hours Phone: (760)
414-3892
License Number: NP23217
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC
 Website: www.vistacommu
nityclinic.org

VISTA COMMUNITY CLINIC


Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: (760) 414-3892
 After Hours Phone: (760)
414-3892
License Number: NP95003087
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommu
nityclinic.org




VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: (760) 414-3892
Fax: (760) 414-3892
 After Hours Phone: (760)
414-3892
License Number: 20A9149
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC







































 Website: www.vistacommu
nityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
License Number: 20A13745
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):





D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal






D1. Clínicas de salud con calificación federal






<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: VISTA COMMUNITY CLINIC</p> <p> <i>Website: www.vistacommunityclinic.org</i></p>	<p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: VISTA COMMUNITY CLINIC</p> <p> <i>Website: www.vistacommunityclinic.org</i></p>	<p><i>License Number: A125026</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: VISTA COMMUNITY CLINIC</p> <p> <i>Website: www.vistacommunityclinic.org</i></p>
<p>VISTA COMMUNITY CLINIC</p> <p><i>Provider ID: 206338</i></p> <p> 1000 VALE TERRACE DR VISTA, CA 92084-5218</p> <p> <i>Phone: (760) 631-5000</i></p> <p> <i>After Hours Phone: (760) 631-5000</i></p> <p><i>License Number: 20A18374</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: VISTA COMMUNITY CLINIC</p> <p> <i>Website: www.vistacommunityclinic.org</i></p>	<p>VISTA COMMUNITY CLINIC</p> <p><i>Provider ID: 206338</i></p> <p> 1000 VALE TERRACE DR VISTA, CA 92084-5218</p> <p> <i>Phone: (760) 631-5000</i></p> <p> <i>After Hours Phone: (760) 631-5000</i></p> <p><i>License Number: 20A8949</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: VISTA COMMUNITY CLINIC</p> <p> <i>Website: www.vistacommunityclinic.org</i></p>	<p>VISTA COMMUNITY CLINIC</p> <p><i>Provider ID: 206338</i></p> <p> 1000 VALE TERRACE DR VISTA, CA 92084-5218</p> <p> <i>Phone: (760) 631-5000</i></p> <p> <i>After Hours Phone: (760) 631-5000</i></p> <p><i>License Number: A173511</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: VISTA COMMUNITY CLINIC</p> <p> <i>Website: www.vistacommunityclinic.org</i></p>
<p>VISTA COMMUNITY CLINIC</p> <p><i>Provider ID: 206338</i></p> <p> 1000 VALE TERRACE DR VISTA, CA 92084-5218</p> <p> <i>Phone: (760) 631-5000</i></p> <p> <i>After Hours Phone: (760) 631-5000</i></p> <p><i>License Number: 20A7241</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p>	<p>VISTA COMMUNITY CLINIC</p> <p><i>Provider ID: 206338</i></p> <p> 1000 VALE TERRACE DR VISTA, CA 92084-5218</p> <p> <i>Phone: (760) 631-5000</i></p> <p> <i>After Hours Phone: (760) 631-5000</i></p>	<p>VISTA COMMUNITY CLINIC</p> <p><i>Provider ID: 206338</i></p> <p> 1000 VALE TERRACE DR</p>





D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal






VISTA, CA 92084-5218
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
License Number: A56214
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org




VISTA COMMUNITY CLINIC
Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
License Number: A62780
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
License Number: A80635
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
License Number: C162072
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
License Number: C143703
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
License Number: C171929
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000

License Number: C52564
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish

Cultural Competency: No
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000

License Number: DC32054
NPI: 1598122871
Accepting New Patients: Yes

Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000

License Number: DPM3999
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish

Cultural Competency: No
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
After Hours Phone: (760)

631-5000
License Number: G51286
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000

License Number: G79676
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish

Cultural Competency: No
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org


VISTA COMMUNITY CLINIC


Provider ID: 206338

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

License Number: G86902

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

License Number: NP10896

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)


nityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

License Number: NP95003571

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

License Number: NP95009149

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT


PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

License Number: NP95016368

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

License Number: NP95009284

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*


*Medical Group/IPA: VISTA
COMMUNITY CLINIC*


 *Website: www.vistacommunityclinic.org*

VISTA COMMUNITY CLINIC

Provider ID: 206338

 *1000 VALE TERRACE DR
VISTA, CA 92084-5218*

 *Phone: (760) 631-5000*

 *After Hours Phone: (760)
631-5000*

License Number: PA19629

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

*Site Languages(s) Spoken:
Spanish*

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*


*Medical Group/IPA: VISTA
COMMUNITY CLINIC*


 *Website: www.vistacommunityclinic.org*

VISTA COMMUNITY CLINIC

Provider ID: 206338

 *1000 VALE TERRACE DR
VISTA, CA 92084-5218*

 *Phone: (844) 308-5003*

 *After Hours Phone: (844)
308-5003*

License Number: NP11448

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

*Site Languages(s) Spoken:
Spanish*

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*


*Medical Group/IPA: VISTA
COMMUNITY CLINIC*


 *Website: www.vistacommunityclinic.org*

VISTA COMMUNITY CLINIC

Provider ID: 206338

 *1000 VALE TERRACE DR
VISTA, CA 92084-5218*

 *Phone: (844) 308-5003*

 *After Hours Phone: (844)
308-5003*

License Number: PA20775

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

*Site Languages(s) Spoken:
Spanish*

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*


*Medical Group/IPA: VISTA
COMMUNITY CLINIC*


 *Website: www.vistacommunityclinic.org*

VISTA COMMUNITY CLINIC

Provider ID: 206338

 *1000 VALE TERRACE DR
VISTA, CA 92084-5218*

 *Phone: 760-414-3892*

 *After Hours Phone:
760-414-3892*

License Number: DC31392

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


*Site Languages(s) Spoken:
Spanish*

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

*Medical Group/IPA: VISTA
COMMUNITY CLINIC*


 *Website: www.vistacommunityclinic.org*

VISTA COMMUNITY CLINIC

Provider ID: 206338

 *1000 VALE TERRACE DR
VISTA, CA 92084-5218*

 *Phone: 760-414-3892*

 *After Hours Phone:
760-414-3892*

License Number: NP23217

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


*Site Languages(s) Spoken:
Spanish*

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

*Medical Group/IPA: VISTA
COMMUNITY CLINIC*

 *Website: www.vistacommunityclinic.org*


VISTA COMMUNITY CLINIC


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-414-3892

 After Hours Phone:
760-414-3892

License Number: NP95003087

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommu
nityclinic.org


VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-414-3892

Fax: 760-414-3892

 After Hours Phone:
760-414-3892

License Number: 20A9149

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA


COMMUNITY CLINIC


 Website: www.vistacommu
nityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: 20A13745

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 Website: www.vistacommu
nityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: 20A18374

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 Website: www.vistacommu
nityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: 20A7241

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 Website: www.vistacommu
nityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: A125026



NPI: 1598122871

Accepting New Patients: Yes




Site English Spoken: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 *Site Languages(s) Spoken:* Spanish
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website:* www.vistacommunityclinic.org





VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 *Phone:* 760-631-5000
 *After Hours Phone:* 760-631-5000
License Number: 20A8949
NPI: 1598122871



Accepting New Patients: Yes
 *Site English Spoken:* Yes
 *Site Languages(s) Spoken:* Spanish
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website:* www.vistacommunityclinic.org





VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 *Phone:* 760-631-5000
 *After Hours Phone:* 760-631-5000


License Number: A173511
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken:* Yes
 *Site Languages(s) Spoken:* Spanish
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website:* www.vistacommunityclinic.org







VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 *Phone:* 760-631-5000
 *After Hours Phone:* 760-631-5000
License Number: A56214
NPI: 1598122871








Accepting New Patients: Yes
 *Site English Spoken:* Yes
 *Site Languages(s) Spoken:* Spanish
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website:* www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR

VISTA, CA 92084-5218
 *Phone:* 760-631-5000
 *After Hours Phone:* 760-631-5000
License Number: A62780
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken:* Yes
 *Site Languages(s) Spoken:* Spanish
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website:* www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC


Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 *Phone:* 760-631-5000
 *After Hours Phone:* 760-631-5000
License Number: A80635
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken:* Yes
 *Site Languages(s) Spoken:* Spanish
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website:* www.vistacommunityclinic.org


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 134 GRAPEVINE RD
VISTA, CA 92083-4004

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

License Number: NP7791

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


GRAPEVINE


 Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 134 GRAPEVINE RD
VISTA, CA 92083-4004

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

License Number: DC32054

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

GRAPEVINE

 Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 134 GRAPEVINE RD
VISTA, CA 92083-4004

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: NP7791

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC


GRAPEVINE


 Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 134 GRAPEVINE RD
VISTA, CA 92083-4004

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: PA20775

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


GRAPEVINE


 Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 134 GRAPEVINE RD
VISTA, CA 92083-4004

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: RN410247

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


GRAPEVINE


 Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 134 GRAPEVINE RD
VISTA, CA 92083-4004

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

License Number: PA20775

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: VISTA COMMUNITY CLINIC GRAPEVINE


 *Website: N/A*

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 134 GRAPEVINE RD
VISTA, CA 92083-4004

 *Phone: (760) 631-5000*

 *After Hours Phone: (760) 631-5000*

License Number: RN410247

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: VISTA COMMUNITY CLINIC


GRAPEVINE

 *Website: N/A*

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 134 GRAPEVINE RD
VISTA, CA 92083-4004

 *Phone: (760) 631-5000*

Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: VISTA COMMUNITY CLINIC


GRAPEVINE

 *Website: N/A*

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 134 GRAPEVINE RD
VISTA, CA 92083-4004

 *Phone: 760-631-5000*

 *After Hours Phone: 760-631-5000*

License Number: DC32054

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: VISTA COMMUNITY CLINIC


GRAPEVINE

 *Website: N/A*

VCC DURIAN

Provider ID: 411518

 105 DURIAN ST STE A
VISTA, CA 92083-6206

 *Phone: (844) 308-5003*

Fax: (760) 414-3892

 *After Hours Phone: (844) 308-5003*

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: VCC DURIAN

 *Website: N/A*


VCC DURIAN

Provider ID: 411518

 105 DURIAN ST STE A
VISTA, CA 92083-6206

 *Phone: (844) 308-5003*

Fax: (760) 414-3892

 *After Hours Phone: (844) 308-5003*

License Number: 1851300123

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: VCC DURIAN

 *Website: N/A*


VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 134 GRAPEVINE RD
VISTA, CA 92083-4004

 *Phone: 760-631-5000*

Fax: 760-414-3892




 *After Hours Phone: 760-631-5000*

NPI: 1598122871

Accepting New Patients: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC
GRAPEVINE
 Website: N/A

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 844-308-5003


 After Hours Phone:
844-308-5003

License Number: PA20775

NPI: 1598122871


Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218


 Phone: 760-631-5000


 After Hours Phone:
760-631-5000

License Number: NP95016368

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000


 After Hours Phone:
760-631-5000

License Number: PA19629

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 844-308-5003


 After Hours Phone:
844-308-5003

License Number: NP11448

NPI: 1598122871


Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000


 After Hours Phone:
760-631-5000

License Number: C143703

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: C162072

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: C171929

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA

COMMUNITY CLINIC

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: C52564

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: DC32054

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: DPM3999

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: G51286



NPI: 1598122871

Accepting New Patients: Yes




Site English Spoken: Yes



D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


 *Site Languages(s) Spoken:* Spanish
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website:* www.vistacommunityclinic.org





VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 *Phone:* 760-631-5000
 *After Hours Phone:* 760-631-5000
License Number: G79676
NPI: 1598122871




Accepting New Patients: Yes
 *Site English Spoken:* Yes
 *Site Languages(s) Spoken:* Spanish
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website:* www.vistacommunityclinic.org





VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 *Phone:* 760-631-5000
 *After Hours Phone:* 760-631-5000


License Number: G86902
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken:* Yes
 *Site Languages(s) Spoken:* Spanish
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website:* www.vistacommunityclinic.org







VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 *Phone:* 760-631-5000
 *After Hours Phone:* 760-631-5000
License Number: NP10896
NPI: 1598122871








Accepting New Patients: Yes
 *Site English Spoken:* Yes
 *Site Languages(s) Spoken:* Spanish
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website:* www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR

VISTA, CA 92084-5218
 *Phone:* 760-631-5000
 *After Hours Phone:* 760-631-5000
License Number: NP95003571
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken:* Yes
 *Site Languages(s) Spoken:* Spanish
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website:* www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC


Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 *Phone:* 760-631-5000
 *After Hours Phone:* 760-631-5000
License Number: NP95009149
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken:* Yes
 *Site Languages(s) Spoken:* Spanish
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website:* www.vistacommunityclinic.org


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: NP95009284

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

License Number: 080000328


NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

 Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VCC DURIAN

Provider ID: 411518

 105 DURIAN ST STE A
VISTA, CA 92083

 Phone: (844) 308-5003

Fax: (760) 414-3892

 After Hours Phone: (844)
308-5003


License Number: 080000328

NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:30AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VCC DURIAN

Provider ID: 411518

 105 DURIAN ST STE A
VISTA, CA 92083

 Phone: (844) 308-5003

Fax: (760) 414-3892

 After Hours Phone: (844)
308-5003


License Number: 1851300123

NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:30AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.vistacommunityclinic.org

D2. Directorio de atención primaria

ALPINE

CERTIFIED NURSE PRACTITIONER

KAHL, NICHOLAS

Provider ID: 517802

Provider Gender: Male


License Number: NP95006360


NPI: 1821306598


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

KAHL, NICHOLAS

Provider ID: 517802

Provider Gender: Male

License Number: NP95006360


NPI: 1821306598


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE

FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SANDERS, JESSICA

Provider ID: 517802

Provider Gender: Female

License Number: NP23004


NPI: 1760765333


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE

FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

CERTIFIED NURSE PRACTITIONER

SANDERS, JESSICA

Provider ID: 517802

Provider Gender: Female

License Number: NP23004


NPI: 1760765333


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Board Certified Specialty: No


IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE

FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA

Provider ID: 517802

Provider Gender: Female

License Number: NP95005999


NPI: 1316478092


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

D2. Directorio de atención primaria

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

CERTIFIED NURSE **PRACTITIONER**

TODD, MIKAYLA

Provider ID: 517802

Provider Gender: Female

License Number: NP95005999

NPI: 1316478092

 *Provider English Spoken: Y*


 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

CHIROPRACTOR


ABDULRAHIM, AHMED


Provider ID: 517802

Provider Gender: Male

License Number: DC28335

NPI: 1619040292

 *Provider English Spoken: Y*


 *Provider Language(s)*
Spoken: Burmese, Gujarati,
Hindi, Urdu


Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

CHIROPRACTOR

ABDULRAHIM, AHMED


Provider ID: 517802

Provider Gender: Male

License Number: DC28335

NPI: 1619040292

 *Provider English Spoken: Y*


 *Provider Language(s)*
Spoken: Burmese, Gujarati,
Hindi, Urdu


Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

CHIROPRACTOR

KELCHNER, MATTHEW

Provider ID: 517802

Provider Gender: Male

License Number: DC22733

NPI: 1174656755

 *Provider English Spoken: Y*


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE


 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

D2. Directorio de atención primaria


 Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N




 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM


CHIROPRACTOR

KELCHNER, MATTHEW

Provider ID: 517802
Provider Gender: Male
License Number: DC22733
NPI: 1174656755

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE



 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100



 Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM



FAMILY PRACTICE

BAUTISTA, LUIS

Provider ID: 517802
Provider Gender: Male



License Number: A97270
NPI: 1295712206
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
ST AGNES MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER




FAMILY PRACTICE



BAUTISTA, LUIS

Provider ID: 517802
Provider Gender: Male
License Number: A97270
NPI: 1295712206
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

ST AGNES MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE


 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

DUBE, BIANCA

Provider ID: 517802
Provider Gender: Female
License Number: C172036
NPI: 1740535152

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
 Phone: (619) 662-4100
Fax: (619) 205-6305


 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

DUBE, BIANCA

Provider ID: 517802

Provider Gender: Female


License Number: C172036


NPI: 1740535152

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

Fax: (619) 205-6305


 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


KAUFHOLD, ANNE

Provider ID: 517802

Provider Gender: Female

License Number: A88893

NPI: 1164508073


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic, Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



KAUFHOLD, ANNE

Provider ID: 517802

Provider Gender: Female

License Number: A88893

NPI: 1164508073


 Provider English Spoken: Y
 Provider Language(s)


Spoken: Arabic, Spanish
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA


Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE

FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

VANHOLLEBEKE, RACHEL

Provider ID: 517802

Provider Gender: Female

License Number: A177337

NPI: 1497217756

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


VANHOLLEBEKE, RACHEL


Provider ID: 517802

Provider Gender: Female

License Number: A177337

NPI: 1497217756

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

 *1620 ALPINE BLVD STE 110 ALPINE, CA 91901*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.mtnhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

WYLIE, BLAKE

Provider ID: 517802

Provider Gender: Male

License Number: 20A11088

NPI: 1922314145

 *Provider English Spoken: Y*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Board Certified Specialty: No IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

 *1620 ALPINE BLVD STE 110 ALPINE, CA 91901*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.mtnhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

WYLIE, BLAKE

Provider ID: 517802

Provider Gender: Male

License Number: 20A11088

NPI: 1922314145

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS


Board Certified Specialty: No IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

 *1620 ALPINE BLVD STE 110 ALPINE, CA 91901*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.mtnhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

FQHC

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,


Provider ID: 517802


NPI: 1770124315

 *Provider English Spoken: Y*

Cultural Competency: N

IHP of Southern Cal-PHP SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

 *1620 ALPINE BLVD STE 110 ALPINE, CA 91901*

 *Phone: (619) 662-4100*

Fax: (619) 320-3347

 *After Hours Phone: (619) 662-4100*

 *Website: www.mtnhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,

Provider ID: 517802


D2. Directorio de atención primaria


NPI: 1770124315

 Provider English Spoken: Y
Cultural Competency: N


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

Fax: (619) 320-3347


 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS



STENSMAN, LARS

Provider ID: 517802

Provider Gender: Male

License Number: A158569

NPI: 1659638062


 Provider English Spoken: Y
 Provider Language(s)


Spoken: Danish, French,
Norwegian, Swedish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



PEDIATRICS

STENSMAN, LARS

Provider ID: 595793

Provider Gender: Male

NPI: 1659638062

 Provider English Spoken: Y
 Provider Language(s)


Spoken: Danish, French,
Norwegian, Swedish


Cultural Competency: N

Board Certified Specialty: No


Rady Childrens Health Network

LARS M STENSMAN

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


STENSMAN, LARS

Provider ID: 517802

Provider Gender: Male

License Number: A158569

NPI: 1659638062

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Danish, French,
Norwegian, Swedish


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

BAISLEY, SHAWN

Provider ID: 517802

Provider Gender: Male


License Number: PA52347


NPI: 1376936120


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP



SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100





D2. Directorio de atención primaria

 Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BAISLEY, SHAWN


Provider ID: 517802
Provider Gender: Male
License Number: PA52347
NPI: 1376936120
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE






 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA






Provider ID: 517802
Provider Gender: Female
License Number: PA20490
NPI: 1619100237

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 517802
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE
 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):


N
 Accessibility: CONTACT PROVIDER




CARLSBAD



CERTIFIED NURSE

PRACTITIONER

YOUNG, JENNIFER

Provider ID: 480120
Provider Gender: Female
License Number: NP95003087
NPI: 1558701094
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM


CERTIFIED NURSE




PRACTITIONER


YOUNG, JENNIFER


Provider ID: 480120
Provider Gender: Female
License Number: NP95003087
NPI: 1558701094

D2. Directorio de atención primaria

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 *Phone: (760) 736-6767*
 *After Hours Phone: (760)*
736-6767

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM




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Provider ID: 480120
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 *Phone: (760) 736-6767*
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Min/Max Age: 0\None

American Sign Language (ASL):
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Board Certified Specialty: No
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736-6767

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
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 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM



FQHC

TRUECARE,


Provider ID: 480120
NPI: 1245246917


 *Provider English Spoken: Y*
Cultural Competency: N

IHP of Southern Cal-PHP
TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 *Phone: (760) 736-6767*
Fax: (760) 736-8740

 *After Hours Phone: (760)*
736-6767


 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N



 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
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FQHC


TRUECARE,

Provider ID: 480120
NPI: 1245246917


 *Provider English Spoken: Y*
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IHP of Southern Cal-PHP
TRUECARE

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 *Phone: (760) 736-6767*
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736-6767

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM

D2. Directorio de atención primaria

SA 8:00AM-2:00PM

INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 480120

Provider Gender: Male

License Number: G74757

NPI: 1467485078

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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Min/Max Age: 0\None

American Sign Language (ASL):

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 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 480120




Provider Gender: Female



License Number: A93248

NPI: 1174703680

D2. Directorio de atención primaria



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE





 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
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OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE



Provider ID: 480120
Provider Gender: Female
License Number: A93248
NPI: 1174703680
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 Provider Language(s)
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Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP

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 Accessibility: CONTACT
PROVIDER
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SA 8:00AM-2:00PM


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 Provider Language(s)
Spoken: Spanish



Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None




American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER
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SA 8:00AM-2:00PM



OBSTETRICS / GYNECOLOGY

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NPI: 1174703680
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PEDIATRICS

BURGAMY, ELIZABETH

D2. Directorio de atención primaria

Provider ID: 326275
Provider Gender: Female
NPI: 1164609558
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SHARP MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
ELIZABETH B BURGAMY

3257 CAMINO DE LOS
COCHES STE 202
CARLSBAD, CA 92009
 Phone: (760) 633-3640
Fax: (760) 633-3644

After Hours Phone: (760)
633-3640

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

IYENGAR, RADHA

Provider ID: 480120

Provider Gender: Female

License Number: A49273

NPI: 1265448112

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish,
Tagalog, Tamil

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PEDIATRICS

IYENGAR, RADHA

Provider ID: 480120

Provider Gender: Female

License Number: A49273

NPI: 1265448112

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish,
Tagalog, Tamil

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PEDIATRICS

IYENGAR, RADHA

Provider ID: 480120

Provider Gender: Female

License Number: A49273

NPI: 1265448112

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish,
Tagalog, Tamil

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PEDIATRICS

IYENGAR, RADHA

Provider ID: 480120

D2. Directorio de atención primaria

Provider Gender: Female

License Number: A49273

NPI: 1265448112

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish,
Tagalog, Tamil

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PEDIATRICS

MUTH, NATALIE

Provider ID: 328451

Provider Gender: Female

NPI: 1497982888

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network

NATALIE D MUTH

3257 CAMINO DE LOS
COCHES STE 202
CARLSBAD, CA 92009

Phone: (760) 633-3640

Fax: (760) 633-3644

After Hours Phone: (760)
633-3640

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

OCONNOR, ERICA

Provider ID: 651599

Provider Gender: Female

NPI: 1134782725

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Rady Childrens Health Network

ERICA L OCONNOR

3257 CAMINO DE LOS
COCHES STE 202
CARLSBAD, CA 92009

Phone: (760) 633-3640

Fax: (760) 633-3644

After Hours Phone: (760)
633-3640

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

TANAKA, MARY

Provider ID: 465387

Provider Gender: Female

NPI: 1295962686

Provider English Spoken: Y

Provider Language(s)
Spoken: Thai

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

Rady Childrens Health Network

MARY S TANAKA

3257 CAMINO DE LOS
COCHES STE 202
CARLSBAD, CA 92009

Phone: (760) 633-3640

Fax: (760) 633-3644

After Hours Phone: (760)
633-3640

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ZACHRY, ALISON



Provider ID: 480120




Provider Gender: Female


License Number: A131678

NPI: 1922402858


D2. Directorio de atención primaria

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None



American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM


PEDIATRICS


ZACHRY, ALISON

Provider ID: 480120
Provider Gender: Female
License Number: A131678
NPI: 1922402858

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE
 1295 CARLSBAD VILLAGE
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CARLSBAD, CA 92008
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767



 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM



PEDIATRICS


ZACHRY, ALISON

Provider ID: 480120
Provider Gender: Female
License Number: A131678
NPI: 1922402858


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP

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 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

CHISWICK, GARY

D2. Directorio de atención primaria

Provider ID: 480120

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

Phone: (760) 736-6767

Fax: (760) 720-7204

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

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PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480120

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

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Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

Phone: (760) 736-6767

Fax: (760) 720-7204

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

RUSSO, KRISTA


Provider ID: 480120




Provider Gender: Female


License Number: PA53036


NPI: 1922471192

D2. Directorio de atención primaria

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 *Phone: (760) 736-6767*
 *After Hours Phone: (760)*
736-6767


 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N




 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM


PHYSICIANS ASSISTANT


RUSSO, KRISTA

Provider ID: 480120
Provider Gender: Female
License Number: PA53036
NPI: 1922471192

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1295 CARLSBAD VILLAGE
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 *Phone: (760) 736-6767*
 *After Hours Phone: (760)*
736-6767


 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):




N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM


PHYSICIANS ASSISTANT


RUSSO, KRISTA

Provider ID: 480120
Provider Gender: Female
License Number: PA53036
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 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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Min/Max Age: 0\None
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PHYSICIANS ASSISTANT



RUSSO, KRISTA


Provider ID: 480120
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License Number: PA53036
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 *Provider English Spoken: Y*
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 *Website: N/A*
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Min/Max Age: 0\None
American Sign Language (ASL):
N



 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CHULA VISTA



ALLERGY IMMUNOLOGY

REDDY, SUMANA



Provider ID: 427322
Provider Gender: Female
License Number: C52581
NPI: 1053300251

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Cambodian, Hindi,
Spanish, Telugu
Cultural Competency: N
Hospital Affiliation:

GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA



 678 3RD AVE
CHULA VISTA, CA 91910
 *Phone: (619) 662-4100*
 *After Hours Phone: (619)*




D2. Directorio de atención primaria



662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 427322
Provider Gender: Female
License Number: C52581
NPI: 1053300251
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Cambodian, Hindi,
Spanish, Telugu
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
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 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

CHAPIN, DENISE

Provider ID: 206355
Provider Gender: Female
License Number: NP23687
NPI: 1952737033
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
CHULA VISTA FAMILY HLTH
CTR


 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:
MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER



CERTIFIED NURSE PRACTITIONER


CHAPIN, DENISE

Provider ID: 206355
Provider Gender: Female
License Number: NP23687
NPI: 1952737033
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

Family Health Centers of San
Diego

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Email:



MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER



FERNANDEZ LEYVA, JUAN


Provider ID: 206355
Provider Gender: Male
License Number: NP95001964
NPI: 1194115568

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
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515-2500

 Website: www.fhcsd.org
Email:

D2. Directorio de atención primaria

MARTHAO@FHCSO.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

FERNANDEZ LEYVA, JUAN

Provider ID: 206355

Provider Gender: Male

License Number: NP95001964

NPI: 1194115568

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego


CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE

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 Website: www.fhcsd.org
Email:

MARTHAO@FHCSO.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

IBARRA, MARTHA

Provider ID: 427322

Provider Gender: Female

License Number: NP12112

NPI: 1114957289

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,


SCRIPPS MERCY HOSPITAL

CHULA VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

IBARRA, MARTHA

Provider ID: 427322

Provider Gender: Female

License Number: NP12112

NPI: 1114957289

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,


SCRIPPS MERCY HOSPITAL

CHULA VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


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662-4100

 Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

LEONARD, BEVERLY

Provider ID: 206355

Provider Gender: Female

License Number: NP10943

NPI: 1285772392

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

D2. Directorio de atención primaria

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


LEONARD, BEVERLY

Provider ID: 206355

Provider Gender: Female

License Number: NP10943

NPI: 1285772392

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

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Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


OWEN, MICHAEL

Provider ID: 206355

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

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Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

OWEN, MICHAEL

Provider ID: 206355

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

QUILALANG, SUSAN

Provider ID: 427322



Provider Gender: Female

License Number: NP5579


NPI: 1841200482

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100


D2. Directorio de atención primaria

 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


QUILALANG, SUSAN

Provider ID: 427322
Provider Gender: Female
License Number: RN371480
NPI: 1841200482
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE **PRACTITIONER**

QUILALANG, SUSAN


Provider ID: 427322
Provider Gender: Female
License Number: RN371480
NPI: 1841200482
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
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 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER





CERTIFIED NURSE

PRACTITIONER

QUILALANG, SUSAN

Provider ID: 427322
Provider Gender: Female
License Number: NP5579
NPI: 1841200482
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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 Phone: (619) 662-4100
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 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

ROSS, CRYSTAL

Provider ID: 427322
Provider Gender: Female
License Number: NP95015413
NPI: 1548683378
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
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 Phone: (619) 662-4100
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 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

ROSS, CRYSTAL

Provider ID: 427322

Provider Gender: Female

License Number: NP95015413

NPI: 1548683378

 *Provider English Spoken: Y Cultural Competency: N*

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

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GROSSMONT HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

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 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*


 *Website: www.syhealth.org/clinics/chula-vista-medic-al-plaza*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

PRACTITIONER

SICKLES, MAGGIE

Provider ID: 427322

Provider Gender: Female

License Number: NP22000

NPI: 1821346826

 *Provider English Spoken: Y Cultural Competency: N*


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 *678 3RD AVE
CHULA VISTA, CA 91910*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

 *Website: www.syhealth.org/clinics/chula-vista-medic-al-plaza*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

PRACTITIONER

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Provider ID: 427322

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License Number: NP22000

NPI: 1821346826

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Board Certified Specialty: No


IHP of Southern Cal-PHP


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 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

 *Website: www.syhealth.org/clinics/chula-vista-medic*

al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

PRACTITIONER

VEGA, TERESA

Provider ID: 206355

Provider Gender: Female

License Number: NP95001705

NPI: 1912304569

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San


Diego

CHULA VISTA FAMILY HLTH

CTR

 *251 LANDIS AVE
CHULA VISTA, CA 91910*

 *Phone: (619) 515-2500*

 *After Hours Phone: (619)
515-2500*

 *Website: www.fhcsd.org*

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

PRACTITIONER

D2. Directorio de atención primaria


VEGA, TERESA

Provider ID: 206355

Provider Gender: Female

License Number: NP95001705

NPI: 1912304569

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

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Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


WILLIAMS, TAKISHA

Provider ID: 206355

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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WILLIAMS, TAKISHA


Provider ID: 206355

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

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Board Certified Specialty: No
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Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

BOSTON, LAURA

Provider ID: 206355

Provider Gender: Female

License Number: NM792

NPI: 1174553259

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
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 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

D2. Directorio de atención primaria

BOSTON, LAURA

Provider ID: 206355

Provider Gender: Female

License Number: NM792

NPI: 1174553259

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

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CTR

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Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

MARTINEZ, NANCY

Provider ID: 427322

Provider Gender: Female

License Number: NM1539

NPI: 1578576070

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

MARTINEZ, NANCY

Provider ID: 427322

Provider Gender: Female

License Number: NM1539

NPI: 1578576070

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

HASHEM, SHIVA

Provider ID: 206355

Provider Gender: Female

License Number: DC26269

NPI: 1952950776

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

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CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

D2. Directorio de atención primaria

CHIROPRACTOR


HASHEM, SHIVA

Provider ID: 206355

Provider Gender: Female

License Number: DC26269

NPI: 1952950776

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CHIROPRACTOR


KAZEM, HARON


Provider ID: 427322

Provider Gender: Male

License Number: DC33295

NPI: 1306221262

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Farsi, Persian,
Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR


KAZEM, HARON


Provider ID: 427322

Provider Gender: Male

License Number: DC33295

NPI: 1306221262

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Farsi, Persian,
Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

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 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

PLANTE, CHARLES

Provider ID: 427322

Provider Gender: Male

License Number: DC31963

NPI: 1760464960

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

PLANTE, CHARLES


Provider ID: 427322

Provider Gender: Male


License Number: DC31963

NPI: 1760464960

D2. Directorio de atención primaria


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza


Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR **REYNOSO, ALFONSO**

Provider ID: 427322
Provider Gender: Male
License Number: DC20760
NPI: 1285921627


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes


Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR **REYNOSO, ALFONSO**

Provider ID: 427322
Provider Gender: Male
License Number: DC20760
NPI: 1285921627


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

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CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY **METABOLISM DIABETES** **CARRILLO, MARITZA**


Provider ID: 427322
Provider Gender: Female
License Number: A163183
NPI: 1649628587

 Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA


 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

ENDOCRINOLOGY **METABOLISM DIABETES**

CARRILLO, MARITZA


Provider ID: 427322
Provider Gender: Female
License Number: A163183
NPI: 1649628587

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No

D2. Directorio de atención primaria

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA


 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM


ENDOCRINOLOGY METABOLISM DIABETES

CRUZ, MICHAEL

Provider ID: 427322
Provider Gender: Male
License Number: A138772
NPI: 1265851133



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org

/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

CRUZ, MICHAEL


Provider ID: 427322
Provider Gender: Male
License Number: A138772
NPI: 1265851133
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA


 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES **VINCENT, LAUREN**

Provider ID: 427322
Provider Gender: Female
License Number: A134303
NPI: 1053757997


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA


 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

VINCENT, LAUREN

Provider ID: 427322
Provider Gender: Female
License Number: A134303
NPI: 1053757997

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

D2. Directorio de atención primaria

CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ALANIZ, MATEO

Provider ID: 427322
Provider Gender: Male
License Number: A124388
NPI: 1700175577
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ALANIZ, MATEO

Provider ID: 427322
Provider Gender: Male
License Number: A124388
NPI: 1700175577
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



AMANAT, SOROOSH

Provider ID: 427322
Provider Gender: Male
License Number: A153022

NPI: 1003279621
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified Specialty: No IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8:00AM-2:30PM

FAMILY PRACTICE


AMANAT, SOROOSH

Provider ID: 427322
Provider Gender: Male
License Number: A153022
NPI: 1003279621
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA

D2. Directorio de atención primaria

JOHN SALLY THORNTON
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA



 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

FAMILY PRACTICE

ARCE GOMEZ, LAURA

Provider ID: 427322
Provider Gender: Female
License Number: A123604
NPI: 1053532986
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: CHULA
VISTA COMM HOSP
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA





 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

ARCE GOMEZ, LAURA

Provider ID: 427322
Provider Gender: Female
License Number: A123604
NPI: 1053532986
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: CHULA
VISTA COMM HOSP
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT




PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

CAMPOS, MELISSA

Provider ID: 427322
Provider Gender: Female
License Number: A138474
NPI: 1427475318
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


FAMILY PRACTICE

CAMPOS, MELISSA

Provider ID: 427322
Provider Gender: Female
License Number: A138474

D2. Directorio de atención primaria

NPI: 1427475318

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA


VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CHERY, FARAH

Provider ID: 417641

Provider Gender: Female

License Number: A108681

NPI: 1114183688

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: EL CENTRO

REGIONAL MEDICAL CENTER,


SHARP CHULA VISTA MED CTR

Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC

 352 L ST

CHULA VISTA, CA 91911

 Phone: (619) 515-2325

 After Hours Phone: (619)
515-2325

 Website: www.fhcsd.org

Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

CHERY, FARAH

Provider ID: 417641

Provider Gender: Female

License Number: A108681

NPI: 1114183688

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: EL CENTRO

REGIONAL MEDICAL CENTER,

SHARP CHULA VISTA MED CTR


Board Certified Specialty: No

Family Health Centers of San


Diego

FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC

 352 L ST

CHULA VISTA, CA 91911

 Phone: (619) 515-2325

 After Hours Phone: (619)
515-2325

 Website: www.fhcsd.org

Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

CHERY, FARAH

Provider ID: 206355

Provider Gender: Female

License Number: A108681

NPI: 1114183688

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: EL CENTRO

REGIONAL MEDICAL CENTER,

SHARP CHULA VISTA MED CTR

Board Certified Specialty: No

Family Health Centers of San


Diego


CHULA VISTA FAMILY HLTH

CTR

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


CHERY, FARAH

Provider ID: 206355
Provider Gender: Female
License Number: A108681
NPI: 1114183688
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP CHULA VISTA MED CTR

Board Certified Specialty: No
Family Health Centers of San Diego


CHULA VISTA FAMILY HLTH CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910
 *Phone: (619) 515-2500*
 *After Hours Phone: (619) 515-2500*

 *Website: www.fhcsd.org*
Email: MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None


American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM


FAMILY PRACTICE

DY, DIANE

Provider ID: 206355
Provider Gender: Female
License Number: A153344
NPI: 1467807560
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910
 *Phone: (619) 515-2500*
 *After Hours Phone: (619) 515-2500*


 *Website: www.fhcsd.org*
Email: MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

DY, DIANE


Provider ID: 206355
Provider Gender: Female
License Number: A153344
NPI: 1467807560
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

 251 LANDIS AVE
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 *Phone: (619) 515-2500*
 *After Hours Phone: (619) 515-2500*
 *Website: www.fhcsd.org*
Email: MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N



 *Accessibility: CONTACT PROVIDER*


FAMILY PRACTICE


ELSAIED, MOHAMMED

Provider ID: 19561
Provider Gender: Male
NPI: 1821033424
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, German, Spanish*
Cultural Competency: N

Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Community Care IPA LLC MOHAMMED K ELSAYED

 330 OXFORD ST STE 106
CHULA VISTA, CA 91911
 *Phone: (619) 409-1802*
Fax: (619) 409-1831


 *After Hours Phone: (619) 409-1802*

 *Website: N/A*
Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\None

American Sign Language (ASL): N
Hours: M-TH 9:00AM-5:00PM
F 8:00AM-4:00PM

 Accessibility: CONTACT PROVIDER

Hours: M-TH 9:00AM-5:00PM
F 8:00AM-4:00PM

FAMILY PRACTICE

ELSAYED, MOHAMMED

Provider ID: 19561

Provider Gender: Male

NPI: 1821033424

Provider English Spoken: Y


Provider Language(s)
Spoken: Arabic, German,
Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL,
PARADISE VALLEY HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Imperial Health Holdings
Medical Group-SD

MOHAMMED K ELSAYED

 330 OXFORD ST STE 106
CHULA VISTA, CA 91911

 Phone: (619) 409-1802

Fax: (619) 409-1831

 After Hours Phone: (619)
409-1802

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Hours: M-TH 9:00AM-5:00PM
F 8:00AM-4:00PM

FAMILY PRACTICE

GARCIA, KARLA

Provider ID: 427322

Provider Gender: Female

License Number: A120672

NPI: 1154647410


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

GARCIA, KARLA

Provider ID: 427322

Provider Gender: Female

License Number: A120672

NPI: 1154647410

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

HUBLEY, PAUL

Provider ID: 206355

Provider Gender: Male

License Number: A73172



NPI: 1568496974


Provider English Spoken: Y

Provider Language(s)

D2. Directorio de atención primaria

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
CHULA VISTA FAMILY HLTH CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


HUBLEY, PAUL

Provider ID: 206355

Provider Gender: Male

License Number: A73172

NPI: 1568496974

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N




Board Certified Specialty: No

Family Health Centers of San

Diego

CHULA VISTA FAMILY HLTH

CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)

515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


JIMENEZ, KRISTAL

Provider ID: 427322

Provider Gender: Female

License Number: A159831

NPI: 1922531250

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


JIMENEZ, KRISTAL

Provider ID: 427322

Provider Gender: Female

License Number: A159831

NPI: 1922531250

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE
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 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


LACH, REBECCA


Provider ID: 427322

Provider Gender: Female

License Number: A177922

NPI: 1679137780

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish

D2. Directorio de atención primaria

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza



Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


LACH, REBECCA

Provider ID: 427322
Provider Gender: Female
License Number: A177922
NPI: 1679137780

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA



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al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM




FAMILY PRACTICE


LAW, KAREN

Provider ID: 427322
Provider Gender: Female
License Number: A138534
NPI: 1205253150


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: CHULA VISTA COMM HOSP
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza



Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

LAW, KAREN

Provider ID: 427322
Provider Gender: Female
License Number: A138534
NPI: 1205253150

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: CHULA VISTA COMM HOSP
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

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 Website: www.syhealth.org/clinics/chula-vista-medical-plaza



Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

MCKENNETT, MARIANNE

Provider ID: 427322
Provider Gender: Female
License Number: G57243
NPI: 1376639666


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS

D2. Directorio de atención primaria



MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

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 Website: www.syhealth.org/clinics/chula-vista-medical-plaza


Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MCKENNETT, MARIANNE

Provider ID: 427322
Provider Gender: Female
License Number: G57243
NPI: 1376639666
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE

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 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER


FAMILY PRACTICE

MENON, POOJA

Provider ID: 427322
Provider Gender: Female
License Number: A123263
NPI: 1053600064
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No


IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA


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 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



MENON, POOJA

Provider ID: 427322
Provider Gender: Female
License Number: A123263
NPI: 1053600064
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

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 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MERRILL, SARAH

Provider ID: 427322
Provider Gender: Female
License Number: A123492
NPI: 1225399512
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified Specialty: No
IHP of Southern Cal-PHP

D2. Directorio de atención primaria

SAN YSIDRO HEALTH CHULA VISTA

678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

MERRILL, SARAH

Provider ID: 427322

Provider Gender: Female

License Number: A123492

NPI: 1225399512

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

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al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

MOYA, MARY

Provider ID: 427322

Provider Gender: Female

License Number: A80185

NPI: 1093844417

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

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Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MOYA, MARY

Provider ID: 427322

Provider Gender: Female

License Number: A80185

NPI: 1093844417

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

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After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, CARIE

Provider ID: 427322

Provider Gender: Female

License Number: A106103


NPI: 1174781132


Provider English Spoken: Y


D2. Directorio de atención primaria

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100


 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

NGUYEN, CARIE

Provider ID: 427322

Provider Gender: Female

License Number: A106103

NPI: 1174781132


 *Provider English Spoken: Y*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


NGUYEN, LINH

Provider ID: 417641

Provider Gender: Female

License Number: A144995

NPI: 1619357993

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San Diego


FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC

 352 L ST
CHULA VISTA, CA 91911

 Phone: (619) 515-2325

 After Hours Phone: (619) 515-2325

 Website: www.fhcsd.org
Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

NGUYEN, LINH

Provider ID: 417641

Provider Gender: Female

License Number: A144995

NPI: 1619357993

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC

 352 L ST
CHULA VISTA, CA 91911

 Phone: (619) 515-2325


 After Hours Phone: (619) 515-2325

 Website: www.fhcsd.org
Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

PALOMINO, MARY


Provider ID: 427322

Provider Gender: Female

License Number: A115699

NPI: 1770718975

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

D2. Directorio de atención primaria



Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza


Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


PALOMINO, MARY

Provider ID: 427322
Provider Gender: Female
License Number: A115699
NPI: 1770718975
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA



 678 3RD AVE

CHULA VISTA, CA 91910
 Phone: (619) 662-4100
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662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


PEDROTTY, JOHN

Provider ID: 427322
Provider Gender: Male
License Number: G80234
NPI: 1992861629
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA



 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


FAMILY PRACTICE

PEDROTTY, JOHN

Provider ID: 427322
Provider Gender: Male
License Number: G80234
NPI: 1992861629
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


PEREZ, PERLITA

Provider ID: 206355
Provider Gender: Female

D2. Directorio de atención primaria

License Number: A119689

NPI: 1174810972

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org


Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


PEREZ, PERLITA


Provider ID: 206355

Provider Gender: Female

License Number: A119689

NPI: 1174810972

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

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 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


PIEROS, JANELLE


Provider ID: 427322

Provider Gender: Female

License Number: 20A13225

NPI: 1386935914

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Faroese, Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
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 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

PIEROS, JANELLE

Provider ID: 427322

Provider Gender: Female

License Number: 20A13225

NPI: 1386935914

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Faroese, Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

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662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

PINA, RAQUEL

D2. Directorio de atención primaria

Provider ID: 206355

Provider Gender: Female

License Number: A177698

NPI: 1255893368

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

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Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PINA, RAQUEL

Provider ID: 206355

Provider Gender: Female

License Number: A177698

NPI: 1255893368

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

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 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PISINGER, PATRICIA

Provider ID: 427322

Provider Gender: Female

License Number: A69264

NPI: 1861428302

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE
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 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PISINGER, PATRICIA

Provider ID: 427322

Provider Gender: Female

License Number: A69264

NPI: 1861428302

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RAJ, ASHA

Provider ID: 417641

Provider Gender: Female

D2. Directorio de atención primaria

License Number: 20A15683

NPI: 1003293507

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC

352 L ST

CHULA VISTA, CA 91911

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

RAJ, ASHA

Provider ID: 417641

Provider Gender: Female

License Number: 20A15683

NPI: 1003293507

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC

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Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

ROSENBLATT, EUGENE

Provider ID: 427322

Provider Gender: Male

License Number: 20A9060

NPI: 1427123991

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ROSENBLATT, EUGENE

Provider ID: 427322

Provider Gender: Male

License Number: 20A9060

NPI: 1427123991

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

678 3RD AVE

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Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SERPAS, SHAILA

Provider ID: 427322

Provider Gender: Female

License Number: G74728

NPI: 1124039136

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

D2. Directorio de atención primaria

VISTA MED CTR, SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


SERPAS, SHAILA

Provider ID: 427322

Provider Gender: Female

License Number: G74728

NPI: 1124039136

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR, SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA


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 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

SHAHTAJI, ALAN

Provider ID: 427322

Provider Gender: Male

License Number: 20A11087

NPI: 1972751089

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA


VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SHAHTAJI, ALAN

Provider ID: 427322

Provider Gender: Male

License Number: 20A11087

NPI: 1972751089

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA


VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SWARTZ, JOHN



Provider ID: 427322

Provider Gender: Male

License Number: G72486

NPI: 1396754131



D2. Directorio de atención primaria

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org /clinics/chula- vista- medic al- plaza*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

SWARTZ, JOHN




Provider ID: 427322
Provider Gender: Male
License Number: G72486
NPI: 1396754131
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS




MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org /clinics/chula- vista- medic al- plaza*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

TALAVERA, GREGORY

Provider ID: 427322
Provider Gender: Male
License Number: A40061
NPI: 1740337161
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH CHULA VISTA
 678 3RD AVE
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org /clinics/chula- vista- medic al- plaza*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

TALAVERA, GREGORY

Provider ID: 427322
Provider Gender: Male
License Number: A40061
NPI: 1740337161
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH CHULA VISTA
 678 3RD AVE
CHULA VISTA, CA 91910
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org /clinics/chula- vista- medic al- plaza*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

D2. Directorio de atención primaria

FAMILY PRACTICE

TEE, ALEXANDRA

Provider ID: 427322

Provider Gender: Female

License Number: A164392

NPI: 1881198406



 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

TEE, ALEXANDRA

Provider ID: 427322

Provider Gender: Female

License Number: A164392

NPI: 1881198406

 Provider English Spoken: Y
Cultural Competency: N



Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


TOLEDO-NADER, CAROLL

Provider ID: 427322

Provider Gender: Male

License Number: A41486

NPI: 1427126648

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE


CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TOLEDO-NADER, CAROLL

Provider ID: 427322

Provider Gender: Male

License Number: A41486

NPI: 1427126648

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish



Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

D2. Directorio de atención primaria



<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p><u>FAMILY PRACTICE</u></p> <p>TREJO, RAUL</p> <p>Provider ID: 427322</p> <p>Provider Gender: Male</p> <p>License Number: A77936</p> <p>NPI: 1174534184</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA</p> <p>Board Certified Specialty: No</p> <p>IHP of Southern Cal-PHP</p> <p>SAN YSIDRO HEALTH CHULA VISTA</p> <p> 678 3RD AVE CHULA VISTA, CA 91910</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p> Website: www.syhealth.org/clinics/chula-vista-medical-plaza</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p><u>FAMILY PRACTICE</u></p> <p>TREJO, RAUL</p> <p>Provider ID: 427322</p> <p>Provider Gender: Male</p> <p>License Number: A77936</p>	<p>NPI: 1174534184</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA</p> <p>Board Certified Specialty: No</p> <p>IHP of Southern Cal-PHP</p> <p>SAN YSIDRO HEALTH CHULA VISTA</p> <p> 678 3RD AVE CHULA VISTA, CA 91910</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p> Website: www.syhealth.org/clinics/chula-vista-medical-plaza</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p><u>FAMILY PRACTICE</u></p> <p>VELASQUEZ, SHARON</p> <p>Provider ID: 427322</p> <p>Provider Gender: Female</p> <p>License Number: A71304</p> <p>NPI: 1972732584</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA</p> <p>Board Certified Specialty: No</p>	<p>IHP of Southern Cal-PHP</p> <p>SAN YSIDRO HEALTH CHULA VISTA</p> <p> 678 3RD AVE CHULA VISTA, CA 91910</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p> Website: www.syhealth.org/clinics/chula-vista-medical-plaza</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p><u>FAMILY PRACTICE</u></p> <p>VELASQUEZ, SHARON</p> <p>Provider ID: 427322</p> <p>Provider Gender: Female</p> <p>License Number: A71304</p> <p>NPI: 1972732584</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA</p> <p>Board Certified Specialty: No</p> <p>IHP of Southern Cal-PHP</p> <p>SAN YSIDRO HEALTH CHULA VISTA</p> <p> 678 3RD AVE CHULA VISTA, CA 91910</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p> Website: www.syhealth.org/clinics/chula-vista-medical-plaza</p>
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D2. Directorio de atención primaria

al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


FAMILY PRACTICE

WHITLEY, NICHOLAS

Provider ID: 427322
Provider Gender: Male
License Number: A118250
NPI: 1629394721
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish



Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [www.syhealth.org/clinics/chula- vista- medic al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


FAMILY PRACTICE

WHITLEY, NICHOLAS

Provider ID: 427322
Provider Gender: Male
License Number: A118250
NPI: 1629394721
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
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662-4100
 Website: [www.syhealth.org/clinics/chula- vista- medic al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE




YOON, RYAN

Provider ID: 427322
Provider Gender: Male
License Number: A114600
NPI: 1942435144
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS



MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA
 678 3RD AVE
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 Phone: (619) 662-4100
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662-4100
 Website: [www.syhealth.org/clinics/chula- vista- medic al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

YOON, RYAN


Provider ID: 427322
Provider Gender: Male
License Number: A114600
NPI: 1942435144
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
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 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)

D2. Directorio de atención primaria

662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


FQHC

CHULA VISTA FAMILY HLTH CTR,

Provider ID: 206355
NPI: 1346480837
 Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego
CHULA VISTA FAMILY HLTH CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
Fax: (619) 397-1161

 After Hours Phone: (619) 515-2500


 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM


FQHC

CHULA VISTA FAMILY HLTH

CTR,


Provider ID: 206355

NPI: 1346480837

 Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego


CHULA VISTA FAMILY HLTH CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

Fax: (619) 397-1161

 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM


FQHC

FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC,

Provider ID: 417641


NPI: 1083959464

 Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego


FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC

 352 L ST
CHULA VISTA, CA 91911

 Phone: (619) 515-2325

Fax: (619) 420-0660

 After Hours Phone: (619) 515-2325

 Website: www.fhcsd.org
Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM


FQHC

FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC,

Provider ID: 417641


NPI: 1083959464

 Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC

 352 L ST
CHULA VISTA, CA 91911

 Phone: (619) 515-2325

Fax: (619) 420-0660

 After Hours Phone: (619) 515-2325

 Website: www.fhcsd.org
Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC


SAN YSIDRO HEALTH CHULA

D2. Directorio de atención primaria


VISTA,

Provider ID: 427322


NPI: 1326486861


 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 425-6941

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

FQHC


SAN YSIDRO HEALTH CHULA VISTA,

Provider ID: 427322

NPI: 1326486861

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA


 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 425-6941

 After Hours Phone: (619)

662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

FQHC


SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS,

Provider ID: 664445

NPI: 1184135873


 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SOUTH
BAY PEDIATRICS

 280 E ST
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 426-2170


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Hours: M-F 8:00AM-5:00PM

FQHC


SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS,

Provider ID: 664445

NPI: 1184135873


 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SOUTH
BAY PEDIATRICS

 280 E ST
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 426-2170


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

GENERAL DENTISTRY


PHAM, QUYNH

Provider ID: 427322


Provider Gender: Female


License Number: DDS102880


NPI: 1366917353

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

GENERAL DENTISTRY

PHAM, QUYNH

Provider ID: 427322

Provider Gender: Female

License Number: DDS102880


NPI: 1366917353


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

GENERAL PRACTICE


SAMI, REMAN

Provider ID: 427322

Provider Gender: Female

License Number: 20A19457

NPI: 1295362242

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

GENERAL PRACTICE



SAMI, REMAN

Provider ID: 427322

Provider Gender: Female

License Number: 20A19457

NPI: 1295362242

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

HEMATOLOGY / ONCOLOGY


QUIROZ, ELISA


Provider ID: 427322

Provider Gender: Female

License Number: A162816

NPI: 1932558301

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

HEMATOLOGY / ONCOLOGY

QUIROZ, ELISA

Provider ID: 427322
Provider Gender: Female
License Number: A162816
NPI: 1932558301


Provider English Spoken: Y
 Provider Language(s) Spoken: Portuguese, Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH CHULA VISTA

 *678 3RD AVE CHULA VISTA, CA 91910*
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org /clinics/chula- vista- medic al- plaza*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

CHEN, TSUH-YIN

Provider ID: 427322
Provider Gender: Female
License Number: C55563
NPI: 1093803520

Provider English Spoken: Y
 Provider Language(s) Spoken: Portuguese, Spanish

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH CHULA VISTA

 *678 3RD AVE CHULA VISTA, CA 91910*
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org /clinics/chula- vista- medic al- plaza*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

CHEN, TSUH-YIN

Provider ID: 427322
Provider Gender: Female
License Number: C55563
NPI: 1093803520

Provider English Spoken: Y
 Provider Language(s)

Spoken: Portuguese, Spanish

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH CHULA VISTA

 *678 3RD AVE CHULA VISTA, CA 91910*
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org /clinics/chula- vista- medic al- plaza*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

HAMMETT, ERIN

Provider ID: 427322
Provider Gender: Female
License Number: 20A14025
NPI: 1467884098

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SANTA BARBARA COTTAGE HOSP, GOLETA VALLEY COTTAGE HOSP

D2. Directorio de atención primaria

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE


HAMMETT, ERIN

Provider ID: 427322
Provider Gender: Female
License Number: 20A14025
NPI: 1467884098
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SANTA
BARBARA COTTAGE HOSP,
GOLETA VALLEY COTTAGE
HOSP
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza




Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

KAKAIYA, ROSHNI


Provider ID: 427322
Provider Gender: Female
License Number: 20A19485
NPI: 1073179529
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM


INTERNAL MEDICINE

KAKAIYA, ROSHNI

Provider ID: 427322
Provider Gender: Female
License Number: 20A19485
NPI: 1073179529
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

KIM, JIUN

D2. Directorio de atención primaria

Provider ID: 427322

Provider Gender: Female

License Number: C182935

NPI: 1598020752

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

KIM, JIUN

Provider ID: 427322

Provider Gender: Female

License Number: C182935

NPI: 1598020752

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

UWEDJOJEVWE, LETICIA

Provider ID: 380242

Provider Gender: Female

NPI: 1891882221

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Imperial Health Holdings

Medical Group-SD

LETICIA M UWEDJOJEVWE

340 4TH AVE STE 10
CHULA VISTA, CA 91910

Phone: (619) 934-2215

Fax: (619) 500-5955

After Hours Phone: (619)
934-2215

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:00PM

F 8:00AM-4:00PM

INTERNAL MEDICINE

VELAZQUEZ CAMARENA, MARIA

Provider ID: 427322

Provider Gender: Female

License Number: A56153

NPI: 1518965714

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

VELAZQUEZ CAMARENA, MARIA

Provider ID: 427322

Provider Gender: Female

License Number: A56153

D2. Directorio de atención primaria

NPI: 1518965714

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

WEN, AKI YEN CHANG

Provider ID: 427322

Provider Gender: Male

License Number: 20A12555

NPI: 1205126505

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

WEN, AKI YEN CHANG

Provider ID: 427322

Provider Gender: Male

License Number: 20A12555

NPI: 1205126505

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206355

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

251 LANDIS AVE

CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206355

Provider Gender: Female

License Number: 20A14919


NPI: 1619397031

Provider English Spoken: Y

D2. Directorio de atención primaria

 *Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
CHULA VISTA FAMILY HLTH
CTR*

 251 LANDIS AVE
CHULA VISTA, CA 91910
 *Phone: (619) 515-2500*
 *After Hours Phone: (619)
515-2500*

 *Website: www.fhcsd.org*
Email:

*MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


BUECHNER, CHARLENE

Provider ID: 206355

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


*Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL*

*CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS*

*Board Certified Specialty: No
Family Health Centers of San
Diego*

*CHULA VISTA FAMILY HLTH
CTR*

 251 LANDIS AVE
CHULA VISTA, CA 91910
 *Phone: (619) 515-2500*
 *After Hours Phone: (619)
515-2500*

 *Website: www.fhcsd.org*
Email:

*MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

OBSTETRICS / GYNECOLOGY


BUECHNER, CHARLENE

Provider ID: 206355

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


*Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS*


Board Certified Specialty: No


*Family Health Centers of San
Diego*

*CHULA VISTA FAMILY HLTH
CTR*

 251 LANDIS AVE
CHULA VISTA, CA 91910

 *Phone: (619) 515-2500*

 *After Hours Phone: (619)
515-2500*

 *Website: www.fhcsd.org*
Email:

*MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes*

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206355

Provider Gender: Male

License Number: A113001

NPI: 1225231582

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N

*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR*

*Board Certified Specialty: No
Family Health Centers of San
Diego*


*CHULA VISTA FAMILY HLTH
CTR*

 251 LANDIS AVE
CHULA VISTA, CA 91910

 *Phone: (619) 515-2500*

D2. Directorio de atención primaria

 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206355

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,


GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR


Board Certified Specialty: No

Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 206355

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 206355

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500


 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 206355

Provider Gender: Male

License Number: A108228

NPI: 1629277322

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

D2. Directorio de atención primaria

Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 206355

Provider Gender: Male

License Number: A108228

NPI: 1629277322

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

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After Hours Phone: (619) 515-2500

Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 206355

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San Diego

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After Hours Phone: (619) 515-2500

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Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 206355

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San Diego

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After Hours Phone: (619) 515-2500

Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206355

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

D2. Directorio de atención primaria

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500
 Website: www.fhcsd.org

Email:


MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


HANLEY, LAUREN

Provider ID: 206355

Provider Gender: Female

License Number: C174771

NPI: 1053392035

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No
Family Health Centers of San
Diego

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 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


LIPSCHITZ, LISA

Provider ID: 206355

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,


GROSSMONT HOSPITAL

Board Certified Specialty: No

Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
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 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206355

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS


MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

Family Health Centers of San
Diego

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 Website: www.fhcsd.org

Email:


MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N



D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


LOEFFLER, ALLISON


Provider ID: 206355
Provider Gender: Female
License Number: A116680
NPI: 1700073962

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego


CHULA VISTA FAMILY HLTH
CTR

 *251 LANDIS AVE*
CHULA VISTA, CA 91910
 *Phone: (619) 515-2500*
 *After Hours Phone: (619)*
515-2500

 *Website: www.fhcsd.org*
Email:

MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None



American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON



Provider ID: 206355
Provider Gender: Female
License Number: A116680
NPI: 1700073962


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
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Email:

MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None



American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY



MENDEZ, DIEGO


Provider ID: 427322
Provider Gender: Male
License Number: A47906
NPI: 1437181922

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: MERCY
GENERAL HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, BAKERSFIELD
MEMORIAL HOSP, SHARP
MEMORIAL HOSPITAL,
Adventist Health Bakersfield,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, KERN
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 *678 3RD AVE*
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*
 *After Hours Phone: (619)*
662-4100

 *Website: www.syhealth.org*
/clinics/chula- vista- medic
al- plaza

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

Provider ID: 427322
Provider Gender: Male
License Number: A47906
NPI: 1437181922

D2. Directorio de atención primaria

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: MERCY GENERAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, Adventist Health Bakersfield, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER
Board Certified Specialty: No IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 206355
Provider Gender: Male
License Number: A154298
NPI: 1710316450

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No Family Health Centers of San Diego
CHULA VISTA FAMILY HLTH CTR

251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
Email: MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 206355
Provider Gender: Male
License Number: A154298
NPI: 1710316450
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No Family Health Centers of San Diego
CHULA VISTA FAMILY HLTH CTR
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 Website: www.fhcsd.org
Email: MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 206355
Provider Gender: Female
License Number: A164859
NPI: 1952751711
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No Family Health Centers of San Diego
CHULA VISTA FAMILY HLTH

D2. Directorio de atención primaria

CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500
 Website: www.fhcsd.org

Email:


MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 206355

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y


Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI

Provider ID: 427322

Provider Gender: Male

License Number: G59670

NPI: 1902993660

Provider English Spoken: Y




Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: [www.syhealth.org
/clinics/chula- vista- medic
al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI

Provider ID: 427322

Provider Gender: Male

License Number: G59670

NPI: 1902993660

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SHARP


CHULA VISTA MED CTR,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

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 Website: [www.syhealth.org
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al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SHORT, ABIADE



Provider ID: 427322

Provider Gender: Male

License Number: A114893

NPI: 1750559589


D2. Directorio de atención primaria

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
*Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL*

*Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA*

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 *After Hours Phone: (619)
662-4100*
 *Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza*



Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

SHORT, ABIADÉ

Provider ID: 427322
Provider Gender: Male
License Number: A114893
NPI: 1750559589


 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: PARADISE

*VALLEY HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL*

*Board Certified Specialty: No
IHP of Southern Cal-PHP
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VISTA*

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/clinics/chula- vista- medic
al- plaza*


Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206355
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198

 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: Sharp
Grossmont Hospital*
*Board Certified Specialty: No
Family Health Centers of San
Diego*

*CHULA VISTA FAMILY HLTH
CTR*


 251 LANDIS AVE

CHULA VISTA, CA 91910
 *Phone: (619) 515-2500*
 *After Hours Phone: (619)
515-2500*
 *Website: www.fhcsd.org*
*Email:
MARTHAO@FHCS.D.ORG*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206355
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198

 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: Sharp
Grossmont Hospital*
*Board Certified Specialty: No
Family Health Centers of San
Diego*
*CHULA VISTA FAMILY HLTH
CTR*

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Email:

MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
*American Sign Language (ASL):
N*

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY


TRUJILLO, JENNIFER

Provider ID: 427322

Provider Gender: Female

License Number: 20A8204

NPI: 1053407593

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR

Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH CHULA VISTA

 *678 3RD AVE CHULA VISTA, CA 91910*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org /clinics/chula- vista- medic al- plaza*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY


TRUJILLO, JENNIFER

Provider ID: 427322

Provider Gender: Female

License Number: 20A8204

NPI: 1053407593

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR

Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH CHULA VISTA

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 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org /clinics/chula- vista- medic al- plaza*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY


ZIEG, ALAN


Provider ID: 206355

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N


Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL,


SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA


Board Certified Specialty: No Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

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 *After Hours Phone: (619) 515-2500*

 *Website: www.fhcsd.org*

Email: MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206355

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL

D2. Directorio de atención primaria

CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org

Email:


MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY


MANI, NASRIN


Provider ID: 427322

Provider Gender: Female

License Number: A40473

NPI: 1023061314

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Faroese,
Farsi, Persian, Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR, SHARP CHULA
VISTA MED CTR, GROSSMONT
HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY


MANI, NASRIN


Provider ID: 427322

Provider Gender: Female

License Number: A40473

NPI: 1023061314

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic, Faroese,
Farsi, Persian, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR, SHARP CHULA
VISTA MED CTR, GROSSMONT
HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100


 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY


PAPASTERGIU, GEORGIOS


Provider ID: 427322

Provider Gender: Male

License Number: A127706

NPI: 1790054393

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic, Farsi,
French, Greek, Italian,
Spanish


Cultural Competency: N


Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

D2. Directorio de atención primaria

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY


PAPASTERGIU, GEORGIOS


Provider ID: 427322

Provider Gender: Male

License Number: A127706

NPI: 1790054393

 Provider English Spoken: Y


 Provider Language(s) Spoken: Arabic, Farsi, French, Greek, Italian, Spanish


Cultural Competency: N


Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY


PONS, MAURICIO

Provider ID: 427322

Provider Gender: Male

License Number: A87650

NPI: 1376723759

 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

PONS, MAURICIO

Provider ID: 427322

Provider Gender: Male

License Number: A87650

NPI: 1376723759

 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

SKAF, AYHAM


Provider ID: 427322

Provider Gender: Male

License Number: A120584

NPI: 1285888628

 Provider English Spoken: Y

 Provider Language(s) Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: EL CENTRO

D2. Directorio de atención primaria

REGIONAL MEDICAL CENTER,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OPHTHALMOLOGY

SKAF, AYHAM

Provider ID: 427322

Provider Gender: Male

License Number: A120584

NPI: 1285888628

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

AKASHI, MARC

Provider ID: 163322

Provider Gender: Male

NPI: 1205002417

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SHARP CHULA VISTA MED
CTR, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network
MARC K AKASHI

769 MEDICAL CENTER CT
STE 300
CHULA VISTA, CA 91911

Phone: (619) 482-3090
Fax: (619) 482-7350

After Hours Phone: (619)
482-3090

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ATIENZA, PAMELA

Provider ID: 106987

Provider Gender: Female

NPI: 1417916107

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

Rady Childrens Health Network

PAMELA V ATIENZA

890 EASTLAKE PKWY STE
200

CHULA VISTA, CA 91914
Phone: (619) 656-6817

Fax: (619) 656-6908

After Hours Phone: (619)
506-1218

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

BARBADILLO, FERDINAND


Provider ID: 70456

Provider Gender: Male

D2. Directorio de atención primaria

NPI: 1982662193

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR


Board Certified Specialty: No

Rady Childrens Health Network

FERDINAND F BARBADILLO


 890 EASTLAKE PKWY STE
200

CHULA VISTA, CA 91914

 Phone: (619) 656-6817

Fax: (619) 656-6908

 After Hours Phone: (619)
656-6817


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

BROUDY, ABRAHAM

Provider ID: 109328

Provider Gender: Male

NPI: 1528039526

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

VISTA, RADY CHILDRENS
HOSPITAL SAN DIEGO, SHARP


CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network


ABRAHAM E BROUDY

 2440 FENTON ST STE 100
CHULA VISTA, CA 91914

 Phone: (619) 656-3040

Fax: (619) 656-3045

 After Hours Phone: (619)
656-3040

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM


PEDIATRICS


CAPETANAKIS, ELENI

Provider ID: 89610

Provider Gender: Female

NPI: 1346211554

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Greek, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SHARP MEMORIAL

HOSPITAL, SCRIPPS MERCY


HOSPITAL, SHARP CHULA


VISTA MED CTR

Board Certified Specialty: Yes


Rady Childrens Health Network


ELENI I CAPETANAKIS

 865 3RD AVE STE 101
CHULA VISTA, CA 91911

 Phone: (619) 426-7910

Fax: (619) 426-2337

 After Hours Phone: (619)
426-7910

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM


PEDIATRICS

CORDOBA, MIGUEL

Provider ID: 88187

Provider Gender: Male

NPI: 1053382176

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,

SHARP CHULA VISTA MED

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO,

SCRIPPS MERCY HOSPITAL


CHULA VISTA, SCRIPPS MERCY


HOSPITAL

Board Certified Specialty: No


Rady Childrens Health Network


MIGUEL A CORDOBA

 865 3RD AVE STE 101
CHULA VISTA, CA 91911

 Phone: (619) 426-7910

Fax: (619) 426-2337

 After Hours Phone: (619)
426-7910


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

D2. Directorio de atención primaria

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS


DONG, TAMMY

Provider ID: 427322

Provider Gender: Female

License Number: A66903

NPI: 1386655413

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS



DONG, TAMMY

Provider ID: 427322

Provider Gender: Female

License Number: A66903

NPI: 1386655413


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

DORINGO, ELAINIE

Provider ID: 267100

Provider Gender: Female

NPI: 1013005636

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ALVARADO
HOSPITAL LLC, RADY

CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT


HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,

SHARP CHULA VISTA MED
CTR, UCSD LA JOLLA JOHN

SALLY THORNTON, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network
ELAINIE D DORINGO

 865 3RD AVE STE 101
CHULA VISTA, CA 91911

 Phone: (619) 426-7910

Fax: (619) 426-2337


 After Hours Phone: (619)
426-7910

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

FLETCHER, EMILY

Provider ID: 232312

Provider Gender: Female

NPI: 1780935940

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,

MERCY HOSPITAL

BAKERSFIELD, RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY

HOSPITAL CHULA VISTA,


SCRIPPS MERCY HOSPITAL,
UCSF BENIOFF CHILDREN'S

HOSPITAL OAKLAND

Board Certified Specialty: No
Rady Childrens Health Network

EMILY E FLETCHER

 2440 FENTON ST STE 100
CHULA VISTA, CA 91914

 Phone: (619) 656-3040

D2. Directorio de atención primaria

Fax: (619) 656-3045

☎ After Hours Phone: (619) 656-3040

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

FLORES, ERNEST

Provider ID: 658652

Provider Gender: Male

NPI: 1043848807

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Rady Childrens Health Network
ERNEST A FLORES

📍 865 3RD AVE STE 101
CHULA VISTA, CA 91911

☎ Phone: (619) 426-7910

Fax: (619) 426-2337

☎ After Hours Phone: (619) 426-7910

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

FRESNO, BLANCA

Provider ID: 102434

Provider Gender: Female

NPI: 1346258787

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

Rady Childrens Health Network
BLANCA I FRESNO

📍 1741 EASTLAKE PKWY STE
107

CHULA VISTA, CA 91915

☎ Phone: (619) 482-1700

Fax: (619) 475-4578

☎ After Hours Phone: (619) 482-1700

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GARCIA, CARLOS

Provider ID: 64734

Provider Gender: Male

NPI: 1417959370

☐ Provider English Spoken: Y
☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
Rady Childrens Health Network

CARLOS M GARCIA

📍 1392 E PALOMAR ST STE
501

CHULA VISTA, CA 91913

☎ Phone: (619) 271-4059

Fax: (619) 271-7451

☎ After Hours Phone: (619) 271-4059

🌐 Website: N/A

Email:

HERITAGEPARKPEDIATRICS@YAHOO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

PEDIATRICS

GARCIA, RAFAEL

Provider ID: 360408

Provider Gender: Male

NPI: 1053414086

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO

Board Certified Specialty: No

Rady Childrens Health Network
RAFAEL A GARCIA

📍 752 MEDICAL CENTER CT

D2. Directorio de atención primaria


STE 210
CHULA VISTA, CA 91911
 Phone: (619) 656-0206
Fax: (619) 656-8936
 After Hours Phone: (619)
656-0206

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GHAHREMANI, SIMIN

Provider ID: 634787

Provider Gender: Female

NPI: 1508904657

Provider English Spoken: Y

Provider Language(s)
Spoken: Faroese, Farsi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR, SCRIPPS MERCY

HOSPITAL


Board Certified Specialty: No

Rady Childrens Health Network


SIMIN MOOSAVI


GHAHREMANI

 280 E ST
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 662-4196

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Provider ID: 664445

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GHAHREMANI, SIMIN

Provider ID: 664445

Provider Gender: Female

License Number: C51110

NPI: 1508904657

Provider English Spoken: Y

Provider Language(s)
Spoken: Faroese, Farsi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR, SCRIPPS MERCY

HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH

BAY PEDIATRICS

 280 E ST
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GHAHREMANI, SIMIN

Provider Gender: Female

License Number: C51110

NPI: 1508904657

Provider English Spoken: Y

Provider Language(s)
Spoken: Faroese, Farsi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR, SCRIPPS MERCY

HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH

BAY PEDIATRICS

 280 E ST
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

HOLLICK, NATALIE

Provider ID: 473802

Provider Gender: Female

NPI: 1558716845

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: Yes

Rady Childrens Health Network

NATALIE V HOLLICK

D2. Directorio de atención primaria

865 3RD AVE STE 101
CHULA VISTA, CA 91911
Phone: (619) 426-7910
Fax: (619) 426-2337
After Hours Phone: (619)
426-7910
Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ISAIAS, AGNELA

Provider ID: 664445

Provider Gender: Female

License Number: A82912

NPI: 1790772572

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC,
SHARP CORONADO HOSP
AND HEALTHCARE CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SOUTH
BAY PEDIATRICS

280 E ST
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 426-2170

After Hours Phone: (619)
662-4100

Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

ISAIAS, AGNELA

Provider ID: 664445

Provider Gender: Female

License Number: A82912

NPI: 1790772572

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC,
SHARP CORONADO HOSP
AND HEALTHCARE CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SOUTH
BAY PEDIATRICS

280 E ST
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 426-2170

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

JACOBS-KLEISLI, MILAGROS

Provider ID: 467596

Provider Gender: Female
NPI: 1811221641

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:

GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO, HUNTINGTON
MEMORIAL HOSPITAL, USC
Arcadia Hospital

Board Certified Specialty: No
Rady Childrens Health Network
MILAGROS J JACOBS-KLEISLI

769 MEDICAL CENTER CT
STE 300

CHULA VISTA, CA 91911

Phone: (619) 482-3090

Fax: (619) 482-7350

After Hours Phone: (619)
482-3090

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

KORSAND, SID

Provider ID: 664445

Provider Gender: Male

License Number: A49591

NPI: 1588634513

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Persian,

D2. Directorio de atención primaria

Turkish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SOUTH
BAY PEDIATRICS
📍 280 E ST
CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619)
662-4100
🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

KORSAND, SID

Provider ID: 634788
Provider Gender: Male
NPI: 1588634513
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Farsi, Persian,
Turkish
Cultural Competency: N
Board Certified Specialty: No
Rady Childrens Health Network
SID S KORSAND
📍 280 E ST
CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
Fax: (619) 662-4196
🕒 After Hours Phone: (619)
662-4100
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

KORSAND, SID

Provider ID: 664445
Provider Gender: Male
License Number: A49591
NPI: 1588634513
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Farsi, Persian,
Turkish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SOUTH
BAY PEDIATRICS

📍 280 E ST
CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619)
662-4100
🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MCMAHON, SHARON

Provider ID: 648721
Provider Gender: Female
NPI: 1487279246
☐ Provider English Spoken: Y

Cultural Competency: N
Board Certified Specialty: No
Rady Childrens Health Network
SHARON L MCMAHON
📍 865 THIRD AVE STE 101
CHULA VISTA, CA 91911
☎ Phone: (619) 426-7910
Fax: (619) 426-2337
🕒 After Hours Phone: (619)
426-7910
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

MISTRY, CHETAN



Provider ID: 86439
Provider Gender: Male
NPI: 1467505834
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
CHETAN A MISTRY
📍 2440 FENTON ST STE 100
CHULA VISTA, CA 91914
☎ Phone: (619) 656-3040
Fax: (619) 656-3045

D2. Directorio de atención primaria

 After Hours Phone: (619) 656-3040
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM








PEDIATRICS

MOSQUERA, DIANA

Provider ID: 371232
Provider Gender: Female
NPI: 1144238098
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
Rady Childrens Health Network
DIANA I MOSQUERA
 769 MEDICAL CENTER CT STE 300
CHULA VISTA, CA 91911
 Phone: (619) 482-3090
Fax: (619) 482-7350
 After Hours Phone: (619) 482-3090
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM



PEDIATRICS

MOSQUERA, DIANA

Provider ID: 463001
Provider Gender: Female
NPI: 1144238098
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
Rady Childrens Health Network
DIANA I MOSQUERA
 865 3RD AVE STE 101
CHULA VISTA, CA 91911
 Phone: (619) 426-7910
 After Hours Phone: (619) 426-7910
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS





NGUYEN, TRUC

Provider ID: 78518
Provider Gender: Female
NPI: 1881884054
 Provider English Spoken: Y
 Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA

MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, WASHINGTON HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
TRUC H NGUYEN
 2440 FENTON ST STE 100
CHULA VISTA, CA 91914
 Phone: (619) 656-3040
Fax: (619) 656-3045
 After Hours Phone: (619) 656-3040
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

OIRA, VICTORIA

Provider ID: 73140
Provider Gender: Female
NPI: 1134172448
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Board Certified Specialty: No
Rady Childrens Health Network
VICTORIA R OIRA
 890 EASTLAKE PKWY STE 203
CHULA VISTA, CA 91914
 Phone: (619) 656-3020
Fax: (619) 656-3019

D2. Directorio de atención primaria

 After Hours Phone: (619) 370-6661

 Website: N/A


Email:

VICKYODAN@HOTMAIL.COM

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-4:30PM

PEDIATRICS

PIANSAY, MARIACORAZON

Provider ID: 427322

Provider Gender: Female

License Number: A93785

NPI: 1669680351

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,


SCRIPPS MERCY HOSPITAL

CHULA VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100


 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

PIANSAY, MARIACORAZON

Provider ID: 427322

Provider Gender: Female

License Number: A93785

NPI: 1669680351

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,


SCRIPPS MERCY HOSPITAL

CHULA VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

ROWHANI, NAGHMEH

Provider ID: 664445

Provider Gender: Female

License Number: A92037

NPI: 1992876759

Provider English Spoken: Y

Provider Language(s)
Spoken: Persian

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH
BAY PEDIATRICS

 280 E ST

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ROWHANI, NAGHMEH

Provider ID: 664445

Provider Gender: Female

License Number: A92037

NPI: 1992876759

Provider English Spoken: Y

Provider Language(s)
Spoken: Persian

Cultural Competency: N

Board Certified Specialty: No



IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH
BAY PEDIATRICS


 280 E ST

CHULA VISTA, CA 91910

D2. Directorio de atención primaria

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21



American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

SALAZAR, JUANITA


Provider ID: 206355
Provider Gender: Female
License Number: A78355
NPI: 1912938325

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA



Board Certified Specialty: No
Family Health Centers of San
Diego
CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500
 Website: www.fhcsd.org
Email:
MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


PEDIATRICS

SALAZAR, JUANITA

Provider ID: 206355
Provider Gender: Female
License Number: A78355
NPI: 1912938325
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:
MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


SANTIAGO, ROXANE

Provider ID: 269279
Provider Gender: Female
NPI: 1033461801


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP CHULA VISTA
MED CTR, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network
ROXANE M SANTIAGO


 865 3RD AVE STE 101
CHULA VISTA, CA 91911

 Phone: (619) 426-7910
Fax: (619) 426-2337

 After Hours Phone: (619)
426-7910

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM



PEDIATRICS

SHETH, HASMUKH

Provider ID: 427322
Provider Gender: Male
License Number: A45942

D2. Directorio de atención primaria

NPI: 1396812236


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Gujarati, Hindi,
Urdu


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS



SHETH, HASMUKH

Provider ID: 427322

Provider Gender: Male

License Number: A45942

NPI: 1396812236

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Gujarati, Hindi,
Urdu


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA


VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


PEDIATRICS


VALENCIA, MARILES

Provider ID: 104059

Provider Gender: Female

NPI: 1275541625

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PARADISE VALLEY
HOSPITAL, SHARP CHULA
VISTA MED CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network
MARILES F VALENCIA

 1741 EASTLAKE PKWY STE
107

CHULA VISTA, CA 91915

 Phone: (619) 482-1700

 Fax: (619) 475-4578

 After Hours Phone: (619)
482-1700

 Website: N/A

Email:

PEDIATRICSINPARADISE@YAHOO.COM

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

YAO, CATHERINE

Provider ID: 371204

Provider Gender: Female

NPI: 1801166442

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No


Rady Childrens Health Network

CATHERINE S YAO

 769 MEDICAL CENTER CT
STE 300

CHULA VISTA, CA 91911

 Phone: (619) 482-3090

 Fax: (619) 482-7350

 After Hours Phone: (619)
482-3090

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):


D2. Directorio de atención primaria



N

 **Accessibility: CONTACT PROVIDER**
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ZARGAR, SHABNAM

Provider ID: 371075
Provider Gender: Female
NPI: 1417256074
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, DESERT
REGIONAL MED CTR, JOHN F
KENNEDY MEMORIAL HOSP,
RADY CHILDRENS HOSPITAL
SAN DIEGO
Board Certified Specialty: No
Rady Childrens Health Network
SHABNAM ZARGAR

 769 MEDICAL CENTER CT
STE 300
CHULA VISTA, CA 91911
 Phone: (619) 482-3090
Fax: (619) 482-7350

 After Hours Phone: (619)
482-3090


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT


BALDONADO, ANALICIA

Provider ID: 417641

Provider Gender: Female

License Number: PA61683

NPI: 1215477765

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC

 352 L ST
CHULA VISTA, CA 91911
 Phone: (619) 515-2325

 After Hours Phone: (619)
515-2325

 Website: www.fhcsd.org

Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT


BALDONADO, ANALICIA

Provider ID: 417641

Provider Gender: Female

License Number: PA61683

NPI: 1215477765

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC

 352 L ST
CHULA VISTA, CA 91911

 Phone: (619) 515-2325

 After Hours Phone: (619)
515-2325

 Website: www.fhcsd.org

Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

INDA, PRISCILLA


Provider ID: 427322

Provider Gender: Female

License Number: PA54404

NPI: 1679008379

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Russian,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT


INDA, PRISCILLA


Provider ID: 427322

Provider Gender: Female

License Number: PA54404

NPI: 1679008379

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Russian,
Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT


MENDEZ, JESUS

Provider ID: 427322

Provider Gender: Male

License Number: PA13796

NPI: 1023202108


 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

MENDEZ, JESUS

Provider ID: 427322

Provider Gender: Male

License Number: PA13796

NPI: 1023202108


 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


QUICK, ELISABETH

Provider ID: 206355

Provider Gender: Female

License Number: PA21591

NPI: 1790055010

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego


CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCSD.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

PROVIDER

PHYSICIANS ASSISTANT

QUICK, ELISABETH

Provider ID: 206355

Provider Gender: Female

License Number: PA21591

NPI: 1790055010

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

REVELES, DIANA

Provider ID: 417641

Provider Gender: Female

License Number: PA19306

NPI: 1548455405

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO-RICE FAM HC

352 L ST
CHULA VISTA, CA 91911

Phone: (619) 515-2325

After Hours Phone: (619)
515-2325

Website: www.fhcsd.org
Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

REVELES, DIANA

Provider ID: 417641

Provider Gender: Female

License Number: PA19306

NPI: 1548455405

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO-RICE FAM HC

352 L ST
CHULA VISTA, CA 91911

Phone: (619) 515-2325

After Hours Phone: (619)
515-2325

Website: www.fhcsd.org
Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PODIATRIST

MANCHEL, BRUCE

Provider ID: 427322

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND
HEALTHCARE CTR

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medic-al-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PODIATRIST

MANCHEL, BRUCE

D2. Directorio de atención primaria

Provider ID: 427322

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND


HEALTHCARE CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA


VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 206355

Provider Gender: Female

License Number: DPM4819

NPI: 1326282237

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San


Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 206355

Provider Gender: Female

License Number: DPM4819

NPI: 1326282237

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San


Diego


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CTR

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 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

REGISTERED NURSE LICENSED VOCATIONAL NURSE

QUILALANG, SUSAN

Provider ID: 427322

Provider Gender: Female

License Number: NP5579

NPI: 1841200482

Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA


VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

REGISTERED NURSE LICENSED VOCATIONAL NURSE

QUILALANG, SUSAN

Provider ID: 427322

Provider Gender: Female

License Number: RN371480

NPI: 1841200482

Provider English Spoken: Y

Cultural Competency: N

D2. Directorio de atención primaria


Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED NURSE LICENSED VOCATIONAL NURSE

QUILALANG, SUSAN

Provider ID: 427322

Provider Gender: Female

License Number: RN371480


NPI: 1841200482

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
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 Phone: (619) 662-4100
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662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED NURSE LICENSED

VOCATIONAL NURSE


QUILALANG, SUSAN

Provider ID: 427322

Provider Gender: Female

License Number: NP5579

NPI: 1841200482


 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

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VISTA

 678 3RD AVE
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 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST


AMAYA, RICARDO

Provider ID: 206355

Provider Gender: Male

License Number: PT37189

NPI: 1437445566


 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

AMAYA, RICARDO

Provider ID: 206355

Provider Gender: Male

License Number: PT37189


NPI: 1437445566


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

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 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

D2. Directorio de atención primaria

Email:

MARTHAO@FHCSO.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): License Number: PT295173

N

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL

THERAPIST

CUMMINGS, GEORGE

Provider ID: 206355

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCSO.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): License Number: PT294245

N

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL

THERAPIST


CUMMINGS, GEORGE

Provider ID: 206355

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCSO.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL

THERAPIST


GEORGE, JENNIFER


Provider ID: 206355

Provider Gender: Female

License Number: PT294245

NPI: 1215402177

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCSO.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL

THERAPIST

GEORGE, JENNIFER

Provider ID: 206355

Provider Gender: Female

License Number: PT294245

NPI: 1215402177

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego



CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910



 Phone: (619) 515-2500

 After Hours Phone: (619)

D2. Directorio de atención primaria

515-2500
 Website: www.fhcsd.org
Email:
MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM



REGISTERED PHYSICAL THERAPIST

GONZALES, MICHELLE
Provider ID: 206355
Provider Gender: Female
License Number: PT291706
NPI: 1548714652
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500
 Website: www.fhcsd.org
Email:
MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


PROVIDER

REGISTERED PHYSICAL THERAPIST

GONZALES, MICHELLE
Provider ID: 206355
Provider Gender: Female
License Number: PT291706
NPI: 1548714652
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
CHULA VISTA FAMILY HLTH
CTR

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Email:
MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID
Provider ID: 206355
Provider Gender: Male
License Number: PT293536
NPI: 1043736879
 Provider English Spoken: Y

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
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 Website: www.fhcsd.org
Email:
MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID
Provider ID: 206355
Provider Gender: Male
License Number: PT293536
NPI: 1043736879
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
CHULA VISTA FAMILY HLTH
CTR

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 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500
 Website: www.fhcsd.org

D2. Directorio de atención primaria

Email:

MARTHAO@FHCSO.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL

THERAPIST


RODRIGUEZ, CASSANDRA

Provider ID: 206355

Provider Gender: Female

License Number: PT292823

NPI: 1770025595

 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org


Email:

MARTHAO@FHCSO.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL


THERAPIST

RODRIGUEZ, CASSANDRA

Provider ID: 206355

Provider Gender: Female

License Number: PT292823
NPI: 1770025595

 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCSO.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

RHEUMATOLOGY


REDDY, DANA

Provider ID: 427322

Provider Gender: Female

License Number: A115598

NPI: 1144538778

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL,
SHARP MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL


ENCINITAS


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org /clinics/chula- vista- medic al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

RHEUMATOLOGY

REDDY, DANA


Provider ID: 427322

Provider Gender: Female

License Number: A115598

NPI: 1144538778

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP


CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,

SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL

D2. Directorio de atención primaria

HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA


 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medic-al-plaza



Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


SPEECH PATHOLOGIST


CABADING, DOREEN

Provider ID: 427322
Provider Gender: Female
License Number: SP18192
NPI: 1043507585

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/chula-vista-medic-al-plaza

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM


SPEECH PATHOLOGIST

CABADING, DOREEN

Provider ID: 427322
Provider Gender: Female
License Number: SP18192
NPI: 1043507585

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medic-al-plaza



Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM



EL CAJON

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 569910



Provider Gender: Female
License Number: C52581
NPI: 1053300251
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Cambodian, Hindi,
Spanish, Telugu
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 569910
Provider Gender: Female
License Number: C52581
NPI: 1053300251

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Cambodian, Hindi,
Spanish, Telugu
Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No

D2. Directorio de atención primaria

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

BELEN, NEZER

Provider ID: 418340
Provider Gender: Male
License Number: NP95009292
NPI: 1386120723

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619)
515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

BELEN, NEZER

Provider ID: 418340
Provider Gender: Male
License Number: NP95009292
NPI: 1386120723

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

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DIEGO-EL CAJON

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Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

DRISCOLL, SUSAN

Provider ID: 569910
Provider Gender: Female
License Number: NP95012943
NPI: 1477755684

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

DRISCOLL, SUSAN

Provider ID: 569910
Provider Gender: Female
License Number: NP95012943
NPI: 1477755684

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: www.syhealth.org

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider Gender: Male

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER


GARCIA, JOHNNY

Provider ID: 418340

Provider Gender: Male

License Number: NP95007000

NPI: 1932622156

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org


Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider Gender: Female

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER


GARCIA, JOHNNY

Provider ID: 418340

Provider Gender: Male

License Number: NP95007000

NPI: 1932622156

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

HAMID, WAHIDA


Provider ID: 569910

Provider Gender: Female

License Number: NP95001707

NPI: 1164812293

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Persian, Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

HAMID, WAHIDA


Provider ID: 569910

Provider Gender: Female

License Number: NP95001707

NPI: 1164812293

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Persian, Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org



























Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

PROVIDER	CAJON	 Accessibility: CONTACT PROVIDER
<u>CERTIFIED NURSE PRACTITIONER</u> HARPEL, SHERYL Provider ID: 569910 Provider Gender: Female License Number: NP95009329 NPI: 1780177147  Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH EL CAJON	 875 EL CAJON BLVD EL CAJON, CA 92020  Phone: (619) 662-4100  After Hours Phone: (619) 662-4100  Website: www.syhealth.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:00PM	<u>CERTIFIED NURSE PRACTITIONER</u> JENSEN, ADRIENNE Provider ID: 569910 Provider Gender: Female License Number: NP95023148 NPI: 1184389934  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH EL CAJON
 875 EL CAJON BLVD EL CAJON, CA 92020  Phone: (619) 662-4100  After Hours Phone: (619) 662-4100  Website: www.syhealth.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:00PM	<u>CERTIFIED NURSE PRACTITIONER</u> JENSEN, ADRIENNE Provider ID: 569910 Provider Gender: Female License Number: NP95023148 NPI: 1184389934  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH EL CAJON	 875 EL CAJON BLVD EL CAJON, CA 92020  Phone: (619) 662-4100  After Hours Phone: (619) 662-4100  Website: www.syhealth.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER
<u>CERTIFIED NURSE PRACTITIONER</u> HARPEL, SHERYL Provider ID: 569910 Provider Gender: Female License Number: NP95009329 NPI: 1780177147  Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH EL	 875 EL CAJON BLVD EL CAJON, CA 92020  Phone: (619) 662-4100  After Hours Phone: (619) 662-4100  Website: www.syhealth.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N	<u>CERTIFIED NURSE PRACTITIONER</u> KELLOGG, KRISTEN Provider ID: 418340 Provider Gender: Female License Number: NP95009180 NPI: 1649757741  Provider English Spoken: Y  Provider Language(s)

D2. Directorio de atención primaria

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619) 515-2498

Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

KELLOGG, KRISTEN

Provider ID: 418340

Provider Gender: Female

License Number: NP95009180

NPI: 1649757741

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)

515-2498

Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

LEONARD, BEVERLY

Provider ID: 206354

Provider Gender: Female

License Number: NP10943

NPI: 1285772392

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

CHASE AVENUE FAMILY HEALTH CTRS INC

1111 W CHASE AVE
EL CAJON, CA 92020

Phone: (619) 515-2499

After Hours Phone: (619) 515-2499

Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

LEONARD, BEVERLY

Provider ID: 206354

Provider Gender: Female

License Number: NP10943

NPI: 1285772392

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

CHASE AVENUE FAMILY HEALTH CTRS INC

1111 W CHASE AVE
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Phone: (619) 515-2499

After Hours Phone: (619) 515-2499

Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

LU, TAMMY

Provider ID: 206354

Provider Gender: Female

License Number: NP95007253

NPI: 1457879132

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

D2. Directorio de atención primaria

Family Health Centers of San Diego

CHASE AVENUE FAMILY HEALTH CTRS INC

1111 W CHASE AVE
EL CAJON, CA 92020

Phone: (619) 515-2499

After Hours Phone: (619) 515-2499

Website: www.fhcsd.org
Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

LU, TAMMY

Provider ID: 206354

Provider Gender: Female

License Number: NP95007253

NPI: 1457879132

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

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Website: www.fhcsd.org
Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

MANGENE, CYNTHIA

Provider ID: 206354

Provider Gender: Female

License Number: NP6782

NPI: 1548292626

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

CHASE AVENUE FAMILY HEALTH CTRS INC

1111 W CHASE AVE
EL CAJON, CA 92020

Phone: (619) 515-2499

After Hours Phone: (619) 515-2499

Website: www.fhcsd.org
Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

MANGENE, CYNTHIA

Provider ID: 206354

Provider Gender: Female

License Number: NP6782

NPI: 1548292626

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

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Phone: (619) 515-2499

After Hours Phone: (619) 515-2499

Website: www.fhcsd.org
Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

OCHOA, ERLINDA

Provider ID: 418501

Provider Gender: Female

License Number: NP4430

NPI: 1346437464

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic



LA MAESTRA CHC EL CAJON BROADWAY

1032 BROADWAY
EL CAJON, CA 92021

Phone: (619) 795-5991

After Hours Phone: (619)


D2. Directorio de atención primaria

795-5991
 Website: www.lamaestra.org
g
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER










OCHOA, ERLINDA

Provider ID: 418501
Provider Gender: Female
License Number: NP4430
NPI: 1346437464
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY
 1032 BROADWAY
EL CAJON, CA 92021
 Phone: (619) 795-5991
 After Hours Phone: (619)
795-5991
 Website: www.lamaestra.org
g
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

OCHOA, ERLINDA


Provider ID: 185267
Provider Gender: Female
License Number: NP4430
NPI: 1346437464
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC
 165 S 1ST ST
EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619)
312-0347
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM
CERTIFIED NURSE
PRACTITIONER
OCHOA, ERLINDA
Provider ID: 185267
Provider Gender: Female
License Number: NP4430
NPI: 1346437464
 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC
 165 S 1ST ST
EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619)
312-0347
 Website: www.lamaestra.org
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Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM


CERTIFIED NURSE

PRACTITIONER

ODA, THAGHAR








Provider ID: 418340
Provider Gender: Female
License Number: NP95000205
NPI: 1063835692
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
 525 E MAIN ST

D2. Directorio de atención primaria

EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

Provider ID: 418340
Provider Gender: Female
License Number: RN810863
NPI: 1063835692
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER



CERTIFIED NURSE PRACTITIONER



ODA, THAGHAR

Provider ID: 418340
Provider Gender: Female
License Number: RN810863
NPI: 1063835692
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER






ODA, THAGHAR

Provider ID: 418340
Provider Gender: Female
License Number: NP95000205
NPI: 1063835692
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Amharic, Arabic


Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER


OLVERA, LUISA

Provider ID: 478971
Provider Gender: Female
License Number: NP95001710
NPI: 1598161309
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Board Certified Specialty: No
BORREGO COMMUNITY HEALTH FOUNDTION
CENTRO MEDICO EL CAJON
 133 W MAIN ST STE 100
EL CAJON, CA 92020
 Phone: (619) 401-0404
 After Hours Phone: (619)

D2. Directorio de atención primaria

401-0404
 Website: N/A
Email:
iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: SU-SA 8:00AM-8:00PM



CERTIFIED NURSE PRACTITIONER


OLVERA, LUISA

Provider ID: 478971
Provider Gender: Female
License Number: NP95001710
NPI: 1598161309


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Board Certified Specialty: No
BORREGO COMMUNITY
HEALTH FOUNDTION
CENTRO MEDICO EL CAJON

 133 W MAIN ST STE 100
EL CAJON, CA 92020
 Phone: (619) 401-0404
 After Hours Phone: (619)
401-0404

 Website: N/A
Email:
iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: SU-SA 8:00AM-8:00PM

CERTIFIED NURSE PRACTITIONER


REAL, MARIA

Provider ID: 185267
Provider Gender: Female
License Number: NP17328
NPI: 1548450471


Provider English Spoken: Y
 Provider Language(s)
Spoken: Catalan, German,
Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 165 S 1ST ST
EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org
g

Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE PRACTITIONER

REAL, MARIA


Provider ID: 185267
Provider Gender: Female
License Number: NP17328
NPI: 1548450471

Provider English Spoken: Y
 Provider Language(s)
Spoken: Catalan, German,
Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

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EL CAJON, CA 92019
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312-0347

 Website: www.lamaestra.org
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Email:

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE PRACTITIONER

D2. Directorio de atención primaria

REGEV, SHANEE

Provider ID: 569910

Provider Gender: Female

License Number: NP95022460

NPI: 1477218121


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

REGEV, SHANEE

Provider ID: 569910

Provider Gender: Female

License Number: NP95022460

NPI: 1477218121


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

REID, EMILY

Provider ID: 185267

Provider Gender: Female

License Number: NP95002766


NPI: 1083081467


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org
g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

REID, EMILY

Provider ID: 185267

Provider Gender: Female

License Number: NP95002766

NPI: 1083081467


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

La Maestra Family Clinic

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Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

SMITH, SHARON

Provider ID: 418340

Provider Gender: Female

License Number: RN428876

NPI: 1780603597

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

D2. Directorio de atención primaria

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SMITH, SHARON

Provider ID: 418340

Provider Gender: Female

License Number: NP15444

NPI: 1780603597

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SMITH, SHARON

Provider ID: 418340

Provider Gender: Female

License Number: NP15444

NPI: 1780603597

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SMITH, SHARON

Provider ID: 418340

Provider Gender: Female

License Number: RN428876

NPI: 1780603597

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SWAN, MELANIE

Provider ID: 206354

Provider Gender: Female

License Number: NP95000818

NPI: 1871934414

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish




Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

CHASE AVENUE FAMILY

D2. Directorio de atención primaria

HEALTH CTRS INC

 1111 W CHASE AVE
EL CAJON, CA 92020
 Phone: (619) 515-2499
 After Hours Phone: (619)
515-2499

 Website: www.fhcsd.org


Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

SWAN, MELANIE

Provider ID: 206354

Provider Gender: Female

License Number: NP95000818

NPI: 1871934414

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San


Diego

CHASE AVENUE FAMILY

HEALTH CTRS INC

 1111 W CHASE AVE
EL CAJON, CA 92020

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515-2499

 Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

VERDUZCO GONZALEZ,

AURORA

Provider ID: 185267

Provider Gender: Female

License Number: NP95001961

NPI: 1932452323

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

VERDUZCO GONZALEZ, AURORA

Provider ID: 185267

Provider Gender: Female

License Number: NP95001961

NPI: 1932452323

Provider English Spoken: Y

Provider Language(s)

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Cultural Competency: N


Board Certified Specialty: No


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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

VILLANUEVA DE GUTIE, BERENICE

Provider ID: 185267

Provider Gender: Female

License Number: NP95002188


NPI: 1952795536


Provider English Spoken: Y

D2. Directorio de atención primaria

Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
**LA MAESTRA FAMILY CLINIC
INC**

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER


**VILLANUEVA DE GUTIE,
BERENICE**

Provider ID: 185267

Provider Gender: Female

License Number: NP95002188

NPI: 1952795536

 *Provider English Spoken: Y*


Cultural Competency: N


Board Certified Specialty: No

La Maestra Family Clinic

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 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER


WILLIAMS, TAKISHA


Provider ID: 418340

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


*Family Health Centers of San
Diego*

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHA


Provider ID: 185267

Provider Gender: Female

License Number: NP95001840

NPI: 1063884864

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

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Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHA



Provider ID: 185267

Provider Gender: Female


License Number: NP95001840

NPI: 1063884864

D2. Directorio de atención primaria

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
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Min/Max Age: 0\None
American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM






CERTIFIED NURSE

PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 418340
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
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FAMILY HLTH CTR SAN


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Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER






CERTIFIED REGISTERED

NURSE MIDWIFE

CORRY, ANDREA

Provider ID: 418340
Provider Gender: Female
License Number: NM1721
NPI: 1255489571

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020
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515-2498
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Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT


PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE



CORRY, ANDREA

Provider ID: 418340
Provider Gender: Female
License Number: NM1721
NPI: 1255489571

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

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DIEGO-EL CAJON



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Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

HOURIHAN, KEITH

Provider ID: 418501
Provider Gender: Male
License Number: DC29314
NPI: 1306916994

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

D2. Directorio de atención primaria

La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY

1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5983
After Hours Phone: (619)
795-5983
Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CHIROPRACTOR

HOURIHAN, KEITH

Provider ID: 418501

Provider Gender: Male

License Number: DC29314

NPI: 1306916994

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA CHC EL CAJON
BROADWAY

1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5983
After Hours Phone: (619)
795-5983
Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CHIROPRACTOR

SOSA, DAVID

Provider ID: 206354

Provider Gender: Male

License Number: DC33150

NPI: 1013308675

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

1111 W CHASE AVE
EL CAJON, CA 92020
Phone: (619) 515-2499
After Hours Phone: (619)
515-2499

Website: www.fhcsd.org
Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

SOSA, DAVID

Provider ID: 418340

Provider Gender: Male

License Number: DC33150

NPI: 1013308675

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

525 E MAIN ST
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Phone: (619) 515-2498
After Hours Phone: (619)
515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

SOSA, DAVID

Provider ID: 206354

Provider Gender: Male

License Number: DC33150

NPI: 1013308675

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

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HEALTH CTRS INC

1111 W CHASE AVE
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Phone: (619) 515-2499
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515-2499

Website: www.fhcsd.org
Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*

CHIROPRACTOR

SOSA, DAVID

Provider ID: 418340

Provider Gender: Male

License Number: DC33150


NPI: 1013308675


 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *525 E MAIN ST
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 *After Hours Phone: (619) 515-2498*


 *Website: www.fhcsd.org*
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CHIROPRACTOR


UY, ASHLEY


Provider ID: 418340

Provider Gender: Female

License Number: DC33869

NPI: 1174059760

 *Provider English Spoken: Y*

 *Provider Language(s)*


Spoken: Chinese


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *525 E MAIN ST
EL CAJON, CA 92020*

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 *Website: www.fhcsd.org*
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CHIROPRACTOR


UY, ASHLEY

Provider ID: 418340

Provider Gender: Female

License Number: DC33869

NPI: 1174059760

 *Provider English Spoken: Y*

 *Provider Language(s)*


Spoken: Chinese


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

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 *Phone: (619) 515-2498*

 *After Hours Phone: (619) 515-2498*

 *Website: www.fhcsd.org*
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

ENDOCRINOLOGY

METABOLISM DIABETES

ISLAM, JULIE


Provider ID: 418340

Provider Gender: Female

License Number: A149552

NPI: 1750780516

 *Provider English Spoken: Y*


 *Provider Language(s)*
Spoken: Bengali, Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *525 E MAIN ST
EL CAJON, CA 92020*

 *Phone: (616) 515-2498*

 *After Hours Phone: (616) 515-2498*

 *Website: www.fhcsd.org*
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

ENDOCRINOLOGY

METABOLISM DIABETES

ISLAM, JULIE

D2. Directorio de atención primaria

Provider ID: 418340

Provider Gender: Female

License Number: A149552

NPI: 1750780516

Provider English Spoken: Y

Provider Language(s)

Spoken: Bengali, Spanish

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST

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 Phone: (616) 515-2498

 After Hours Phone: (616)

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 Website: www.fhcsd.org


Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 418340

Provider Gender: Female

License Number: A146838

NPI: 1720474141

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST

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 Phone: (619) 515-2498

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515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 418340

Provider Gender: Female

License Number: A146838

NPI: 1720474141

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

AL ANI, NAJWAN

Provider ID: 418340

Provider Gender: Female

License Number: A144974

NPI: 1275948473

Provider English Spoken: Y

Provider Language(s)

Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)

515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

AL ANI, NAJWAN

Provider ID: 418340

D2. Directorio de atención primaria

Provider Gender: Female

License Number: A144974

NPI: 1275948473

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

📍 525 E MAIN ST

EL CAJON, CA 92020

☎ Phone: (619) 515-2498

🕒 After Hours Phone: (619)
515-2498

🌐 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

ALGHAMDI, ASMA

Provider ID: 569910

Provider Gender: Female

License Number: A167529

NPI: 1316310840

☐ Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL

CAJON

📍 875 EL CAJON BLVD

EL CAJON, CA 92020



Phone: (619) 662-4100



After Hours Phone: (619)
662-4100



Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ALGHAMDI, ASMA

Provider ID: 569910

Provider Gender: Female

License Number: A167529

NPI: 1316310840

☐ Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

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🌐 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BAGINGITO, AUSTIN

Provider ID: 418340

Provider Gender: Male

License Number: A163977

NPI: 1942705637

☐ Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

📍 525 E MAIN ST

EL CAJON, CA 92020

☎ Phone: (619) 515-2498

🕒 After Hours Phone: (619)
515-2498

🌐 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

BAGINGITO, AUSTIN

Provider ID: 418340

Provider Gender: Male

License Number: A163977

NPI: 1942705637

☐ Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

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EL CAJON, CA 92020

☎ Phone: (619) 515-2498

🕒 After Hours Phone: (619)
515-2498

D2. Directorio de atención primaria

 Website: www.fhcsd.org


Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): License Number: A148499

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE


BROWN, BRANDON

Provider ID: 418340

Provider Gender: Male

License Number: A148499

NPI: 1013399559

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org


Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

FAMILY PRACTICE


BROWN, BRANDON

Provider ID: 418340

Provider Gender: Male

License Number: A148499

NPI: 1013399559

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SAN

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

FAMILY PRACTICE


BRUHN, JOSHUA

Provider ID: 418340

Provider Gender: Male

License Number: A186694

NPI: 1447888284

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San


Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

FAMILY PRACTICE

BRUHN, JOSHUA

Provider ID: 418340

Provider Gender: Male

License Number: A186694

NPI: 1447888284

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SAN

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 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

D2. Directorio de atención primaria

American Sign Language (ASL): NPI: 1629339593

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

FAMILY PRACTICE


CORMAN, DANIEL

Provider ID: 418340

Provider Gender: Male

License Number: 20A13060

NPI: 1629339593

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST

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 Phone: (619) 515-2498

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 Website: www.fhcsd.org


Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


FAMILY PRACTICE

CORMAN, DANIEL

Provider ID: 418340

Provider Gender: Male

License Number: 20A13060

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SAN


DIEGO-EL CAJON

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


DOMINGUEZ, DENNIS

Provider ID: 569910

Provider Gender: Male

License Number: G43179

NPI: 1225063811

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH EL

CAJON

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

DOMINGUEZ, DENNIS

Provider ID: 569910

Provider Gender: Male

License Number: G43179

NPI: 1225063811

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


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CAJON

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


GHAFARI, DAUOD


Provider ID: 478971

Provider Gender: Male

License Number: A98486

NPI: 1053417691

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Farsi, Persian,
Spanish*

Cultural Competency: N


Board Certified Specialty: No


BORREGO COMMUNITY

HEALTH FOUNDTION

CENTRO MEDICO EL CAJON

 *133 W MAIN ST STE 100
EL CAJON, CA 92020*

 *Phone: (619) 401-0404*

 *After Hours Phone: (619)
401-0404*

 *Website: N/A*

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


GHAFARI, DAUOD


Provider ID: 478971

Provider Gender: Male

License Number: A98486

NPI: 1053417691

 *Provider English Spoken: Y*

 *Provider Language(s)*

*Spoken: Farsi, Persian,
Spanish*

Cultural Competency: N


Board Certified Specialty: No


BORREGO COMMUNITY

HEALTH FOUNDTION

CENTRO MEDICO EL CAJON

 *133 W MAIN ST STE 100
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 *Phone: (619) 401-0404*

 *After Hours Phone: (619)
401-0404*

 *Website: N/A*


Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*


FAMILY PRACTICE


GHAFARI, DAUOD

Provider ID: 676088

Provider Gender: Male

NPI: 1053417691

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Farsi, Persian,
Spanish*


Cultural Competency: N

Board Certified Specialty: No

Community Care IPA LLC

DAUOD M GHAFARI

 *855 E MADISON AVE
EL CAJON, CA 92020*

 *Phone: (619) 440-2751*

Fax: (360) 462-2746

 *After Hours Phone: (619)
440-2751*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

GORDON, CHRISTOPHER

Provider ID: 418340

Provider Gender: Male

License Number: A83390

NPI: 1477711521

 *Provider English Spoken: Y*

Cultural Competency: N


Board Certified Specialty: No


*Family Health Centers of San
Diego*

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 *525 E MAIN ST
EL CAJON, CA 92020*

 *Phone: (619) 515-2498*

 *After Hours Phone: (619)
515-2498*

 *Website: www.fhcsd.org*

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

GORDON, CHRISTOPHER

Provider ID: 418340

Provider Gender: Male

License Number: A83390

D2. Directorio de atención primaria

NPI: 1477711521

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

📍 525 E MAIN ST
EL CAJON, CA 92020

☎ Phone: (619) 515-2498

🕒 After Hours Phone: (619) 515-2498

🌐 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

HASTANAN, CAROL

Provider ID: 206354

Provider Gender: Female

License Number: A110192

NPI: 1861648461

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

CHASE AVENUE FAMILY HEALTH CTRS INC

📍 1111 W CHASE AVE
EL CAJON, CA 92020

☎ Phone: (619) 515-2499

🕒 After Hours Phone: (619) 515-2499

🌐 Website: www.fhcsd.org

Email: jaquelinca@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

HASTANAN, CAROL

Provider ID: 206354

Provider Gender: Female

License Number: A110192

NPI: 1861648461

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

CHASE AVENUE FAMILY HEALTH CTRS INC

📍 1111 W CHASE AVE
EL CAJON, CA 92020

☎ Phone: (619) 515-2499

🕒 After Hours Phone: (619) 515-2499

🌐 Website: www.fhcsd.org
Email: jaquelinca@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

HODGKIN, EDWARD

Provider ID: 418340

Provider Gender: Male

License Number: A177445

NPI: 1922619766

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

📍 525 E MAIN ST
EL CAJON, CA 92020

☎ Phone: (619) 515-2498

🕒 After Hours Phone: (619) 515-2498

🌐 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

FAMILY PRACTICE

HODGKIN, EDWARD

Provider ID: 418340

Provider Gender: Male

License Number: A177445

NPI: 1922619766

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

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EL CAJON, CA 92020

☎ Phone: (619) 515-2498

🕒 After Hours Phone: (619) 515-2498

D2. Directorio de atención primaria

515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

FAMILY PRACTICE

KASAWA, JOHN

Provider ID: 569910

Provider Gender: Male

License Number: A79338

NPI: 1134230329

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH EL

CAJON

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

KASAWA, JOHN

Provider ID: 569910

Provider Gender: Male

License Number: A79338

NPI: 1134230329

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


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 Phone: (619) 662-4100

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 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MANDOYAN, AUSTIN

Provider ID: 418340

Provider Gender: Female

License Number: A161682

NPI: 1841726148

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Board Certified Specialty: No


Family Health Centers of San


Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:00AM-5:00PM

FAMILY PRACTICE

MANDOYAN, AUSTIN

Provider ID: 418340

Provider Gender: Female

License Number: A161682

NPI: 1841726148

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

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 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:00AM-5:00PM

FAMILY PRACTICE

NASSIR, BASSAM

Provider ID: 569910

Provider Gender: Male

License Number: A101888

NPI: 1386848166

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL
CAJON

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EL CAJON, CA 92020

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

NASSIR, BASSAM

Provider ID: 569910

Provider Gender: Male

License Number: A101888

NPI: 1386848166

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

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 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

NIAZI, HARRIS

Provider ID: 418340

Provider Gender: Male

License Number: A146111

NPI: 1174905871

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

FAMILY PRACTICE

NIAZI, HARRIS

Provider ID: 418340

Provider Gender: Male

License Number: A146111

NPI: 1174905871

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

FAMILY PRACTICE


PUTRUS, RAMIZ

Provider ID: 185267

Provider Gender: Male

License Number: A68184

NPI: 1144300534

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


PUTRUS, RAMIZ


Provider ID: 185267

Provider Gender: Male

License Number: A68184

NPI: 1144300534

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Arabic

Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

 165 S 1ST ST
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 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


PUTRUS, RAMIZ

Provider ID: 664824

Provider Gender: Male

License Number: A68184

NPI: 1144300534

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic


Cultural Competency: N


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA CHC-REA AVE

 181 REA AVE
EL CAJON, CA 92020

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PUTRUS, RAMIZ

Provider ID: 664824

Provider Gender: Male

License Number: A68184

NPI: 1144300534

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic


Cultural Competency: N


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA CHC-REA AVE

 181 REA AVE
EL CAJON, CA 92020

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RODRIGUEZ, LOUIE



Provider ID: 418340

Provider Gender: Male

License Number: A176144

NPI: 1558823625


D2. Directorio de atención primaria


 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

*FAMILY HLTH CTR SAN
DIEGO-EL CAJON*

 525 E MAIN ST
EL CAJON, CA 92020

 *Phone: (619) 515-2498*

 *After Hours Phone: (619)
515-2498*

 *Website: www.fhcsd.org*
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

RODRIGUEZ, LOUIE

Provider ID: 418340

Provider Gender: Male

License Number: A176144

NPI: 1558823625

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

*FAMILY HLTH CTR SAN
DIEGO-EL CAJON*

 525 E MAIN ST
EL CAJON, CA 92020

 *Phone: (619) 515-2498*

 *After Hours Phone: (619)
515-2498*

 *Website: www.fhcsd.org*

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:30AM-5:30PM


FAMILY PRACTICE

RONQUILLO, KAREN AN

Provider ID: 658684

Provider Gender: Female

NPI: 1275160012

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N

Board Certified Specialty: No

Community Care IPA LLC


KAREN AN C RONQUILLO

 855 E MADISON AVE
EL CAJON, CA 92020

 *Phone: (619) 440-2751*

Fax: (360) 462-2746

 *After Hours Phone: (619)
440-2751*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

SALEM, RAMSEY

Provider ID: 569910

Provider Gender: Male

License Number: A158364

NPI: 1245401298

 *Provider English Spoken: Y*


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

*SAN YSIDRO HEALTH EL
CAJON*

 875 EL CAJON BLVD
EL CAJON, CA 92020

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

 *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE

SALEM, RAMSEY

Provider ID: 569910

Provider Gender: Male

License Number: A158364

NPI: 1245401298

 *Provider English Spoken: Y*


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

*SAN YSIDRO HEALTH EL
CAJON*

 875 EL CAJON BLVD
EL CAJON, CA 92020

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

 *Website: www.syhealth.org*

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


SCHUMAKER, EDWARD


Provider ID: 418501

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


La Maestra Family Clinic


LA MAESTRA CHC EL CAJON

BROADWAY

 1032 BROADWAY

EL CAJON, CA 92021

 Phone: (619) 795-5991

 After Hours Phone: (619)
795-5991

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE


SCHUMAKER, EDWARD


Provider ID: 418501

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


La Maestra Family Clinic


LA MAESTRA CHC EL CAJON

BROADWAY

 1032 BROADWAY

EL CAJON, CA 92021

 Phone: (619) 795-5991

 After Hours Phone: (619)
795-5991

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE


SCHUMAKER, EDWARD

Provider ID: 185267

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC


 165 S 1ST ST

EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)

312-0347

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


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Provider ID: 185267

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Cultural Competency: N

Board Certified Specialty: No


La Maestra Family Clinic


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 Website: www.lamaestra.org

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

FQHC

CENTRO MEDICO EL CAJON,

Provider ID: 478971


NPI: 1154480069

 Provider English Spoken: Y
Cultural Competency: N


BORREGO COMMUNITY
HEALTH FOUNDTION


CENTRO MEDICO EL CAJON

 133 W MAIN ST STE 100
EL CAJON, CA 92020

 Phone: (619) 873-8940

Fax: (619) 401-0522

 After Hours Phone: (619)
873-8940

 Website: N/A

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: SU 8:00AM-8:00PM

M-F 8:00AM-8:00PM

FQHC

CENTRO MEDICO EL CAJON,

Provider ID: 478971


NPI: 1154480069

 Provider English Spoken: Y
Cultural Competency: N

BORREGO COMMUNITY
HEALTH FOUNDTION

CENTRO MEDICO EL CAJON

 133 W MAIN ST STE 100
EL CAJON, CA 92020

 Phone: (619) 873-8940

Fax: (619) 401-0522

 After Hours Phone: (619)

873-8940

 Website: N/A

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: SU 8:00AM-8:00PM

M-F 8:00AM-8:00PM

FQHC

CHASE AVENUE FAMILY

HEALTH CTRS INC,

Provider ID: 206354

NPI: 1104861681


 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San
Diego

CHASE AVENUE FAMILY

HEALTH CTRS INC

 1111 W CHASE AVE
EL CAJON, CA 92020

 Phone: (619) 515-2499

Fax: (619) 593-7164

 After Hours Phone: (619)
515-2499

 Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FQHC

CHASE AVENUE FAMILY

HEALTH CTRS INC,

Provider ID: 206354

NPI: 1104861681


 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San
Diego


CHASE AVENUE FAMILY

HEALTH CTRS INC

 1111 W CHASE AVE
EL CAJON, CA 92020

 Phone: (619) 515-2499

Fax: (619) 593-7164

 After Hours Phone: (619)
515-2499

 Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FQHC

FAMILY HLTH CTR SAN

DIEGO-EL CAJON,

Provider ID: 418340

NPI: 1932561198


 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON


 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

Fax: (619) 269-0191

 After Hours Phone: (619)
515-2498

D2. Directorio de atención primaria


 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

FQHC

FAMILY HLTH CTR SAN

DIEGO-EL CAJON,

Provider ID: 418340

NPI: 1932561198


 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

Fax: (619) 269-0191

 After Hours Phone: (619)
515-2498


 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM


FQHC

LA MAESTRA CHC EL CAJON

BROADWAY,

Provider ID: 418501

NPI: 1134590086


 Provider English Spoken: Y

Cultural Competency: N

La Maestra Family Clinic

LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5991

Fax: (619) 795-5992

 After Hours Phone: (619)
795-5991

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM


FQHC

LA MAESTRA CHC EL CAJON

BROADWAY,

Provider ID: 418501

NPI: 1134590086


 Provider English Spoken: Y

Cultural Competency: N

La Maestra Family Clinic

LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5991

Fax: (619) 795-5992

 After Hours Phone: (619)
795-5991

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

LA MAESTRA CHC-REA AVE,

Provider ID: 664824

NPI: 1609849074


 Provider English Spoken: Y

Cultural Competency: N

La Maestra Family Clinic


LA MAESTRA CHC-REA AVE

 181 REA AVE
EL CAJON, CA 92020

 Phone: (619) 312-0347

Fax: (619) 510-4649

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

LA MAESTRA CHC-REA AVE,

Provider ID: 664824

NPI: 1609849074

 Provider English Spoken: Y

Cultural Competency: N

La Maestra Family Clinic

LA MAESTRA CHC-REA AVE

 181 REA AVE

D2. Directorio de atención primaria

EL CAJON, CA 92020
Phone: (619) 312-0347
Fax: (619) 510-4649
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC **LA MAESTRA FAMILY CLINIC INC,**

Provider ID: 185267
NPI: 1336353721
Provider English Spoken: Y
Cultural Competency: N
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
Fax: (619) 749-5480
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:00AM-5:00PM
TH-F 8:00AM-5:00PM

FQHC
SAN YSIDRO HEALTH EL CAJON,
Provider ID: 569910
NPI: 1568845741
Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL CAJON
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 785-3356
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

TH-F 8:00AM-5:00PM

FQHC **LA MAESTRA FAMILY CLINIC INC,**

Provider ID: 185267
NPI: 1336353721
Provider English Spoken: Y
Cultural Competency: N
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
Fax: (619) 749-5480
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-TU 8:00AM-5:00PM
TH-F 8:00AM-5:00PM

FQHC **SAN YSIDRO HEALTH EL CAJON,**

Provider ID: 569910
NPI: 1568845741
Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL CAJON

875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 785-3356
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC **SAN YSIDRO HEALTH EL CAJON,**

Provider ID: 569910
NPI: 1568845741
Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL CAJON

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Phone: (619) 662-4100
Fax: (619) 785-3356
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

HEPATOLOGY **GISH, ROBERT**

D2. Directorio de atención primaria

Provider ID: 185267

Provider Gender: Male

License Number: G45632

NPI: 1548281322

Provider English Spoken: Y

Provider Language(s)
Spoken: Dutch, French,
Spanish, Vietnamese

Cultural Competency: N

Hospital Affiliation: LOMA

LINDA UNIVERSITY COMM
MED CTR

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

HEPATOLOGY

GISH, ROBERT

Provider ID: 185267

Provider Gender: Male

License Number: G45632

NPI: 1548281322

Provider English Spoken: Y

Provider Language(s)
Spoken: Dutch, French,
Spanish, Vietnamese

Cultural Competency: N

Hospital Affiliation: LOMA

LINDA UNIVERSITY COMM
MED CTR

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

INTERNAL MEDICINE

AL-TAMEEMI, AHMED

Provider ID: 478971

Provider Gender: Male

License Number: A151547

NPI: 1134513211

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

CENTRO MEDICO EL CAJON

133 W MAIN ST STE 100
EL CAJON, CA 92020

Phone: (619) 401-0404

After Hours Phone: (619)
401-0404

Website: N/A

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

AL-TAMEEMI, AHMED

Provider ID: 478971

Provider Gender: Male

License Number: A151547

NPI: 1134513211

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

CENTRO MEDICO EL CAJON

133 W MAIN ST STE 100
EL CAJON, CA 92020

Phone: (619) 401-0404

After Hours Phone: (619)
401-0404

Website: N/A

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

D2. Directorio de atención primaria

INTERNAL MEDICINE

ALWASH, MUSTAFA

Provider ID: 418340

Provider Gender: Male

License Number: A160516

NPI: 1679936439

Provider English Spoken: Y

Provider Language(s)

Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SHARP MEMORIAL HOSPITAL

Board Certified Specialty: No

Family Health Centers of San


Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

ALWASH, MUSTAFA

Provider ID: 418340

Provider Gender: Male

License Number: A160516

NPI: 1679936439

Provider English Spoken: Y

Provider Language(s)

Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SHARP MEMORIAL HOSPITAL

Board Certified Specialty: No

Family Health Centers of San


Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

AWDISHO, ALAN

Provider ID: 569910

Provider Gender: Male

License Number: 20A18702

NPI: 1164795498

Provider English Spoken: Y

Provider Language(s)

Spoken: Assyrian, Syriac

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL

CAJON

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

AWDISHO, ALAN

Provider ID: 569910

Provider Gender: Male

License Number: 20A18702

NPI: 1164795498

Provider English Spoken: Y

Provider Language(s)

Spoken: Assyrian, Syriac

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH EL

CAJON

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

D2. Directorio de atención primaria

INTERNAL MEDICINE

CARPENTER III, ROBERT

Provider ID: 569910

Provider Gender: Male

License Number: 20A10964

NPI: 1356343040

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL

CAJON

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100


 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

CARPENTER III, ROBERT

Provider ID: 569910

Provider Gender: Male

License Number: 20A10964

NPI: 1356343040

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH EL

CAJON

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

DUONG, MAI

Provider ID: 418340

Provider Gender: Female

License Number: A127798

NPI: 1629339304

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San


Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)

515-2498

 Website: www.fhcsd.org


Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

DUONG, MAI

Provider ID: 418340

Provider Gender: Female

License Number: A127798

NPI: 1629339304

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San


Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)

515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

GORGES, RANDA

Provider ID: 418340

Provider Gender: Female

License Number: A138815

NPI: 1285079509

Provider English Spoken: Y

Provider Language(s)


Spoken: Arabic


D2. Directorio de atención primaria


Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619) 515-2498


 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE


GORGES, RANDA

Provider ID: 418340

Provider Gender: Female

License Number: A138815

NPI: 1285079509

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Arabic*


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE


JABRI, ZAIN

Provider ID: 418501

Provider Gender: Male

License Number: A160760

NPI: 1891159620

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Arabic*


Cultural Competency: N

Hospital Affiliation: ST AGNES MEDICAL CENTER, CITY OF HOPE NATIONAL MED CTR, JOHN F KENNEDY MEMORIAL HOSP, SUTTER MEDICAL CENTER SACRAMENTO, PIONEERS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5991

 After Hours Phone: (619)

795-5991

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE


JABRI, ZAIN

Provider ID: 418501

Provider Gender: Male

License Number: A160760

NPI: 1891159620

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Arabic*


Cultural Competency: N

Hospital Affiliation: ST AGNES MEDICAL CENTER, CITY OF HOPE NATIONAL MED CTR, JOHN F KENNEDY MEMORIAL HOSP, SUTTER MEDICAL CENTER SACRAMENTO, PIONEERS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL CHULA VISTA



Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5991


 After Hours Phone: (619)

D2. Directorio de atención primaria

795-5991
 Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

MANSY, TAMARA


Provider ID: 569910
Provider Gender: Female
License Number: A164238
NPI: 1396277737
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL CAJON




 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

MANSY, TAMARA



Provider ID: 569910
Provider Gender: Female
License Number: A164238

NPI: 1396277737
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL CAJON


 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

MAY, LOUIS








Provider ID: 569910
Provider Gender: Male
License Number: A138568
NPI: 1720497514
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: EISENHOWER MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

MAY, LOUIS

Provider ID: 569910
Provider Gender: Male
License Number: A138568
NPI: 1720497514
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: EISENHOWER MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL CAJON
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER



INTERNAL MEDICINE

MICHAEL, RAMI

Provider ID: 569910
Provider Gender: Male
License Number: A144513

D2. Directorio de atención primaria




NPI: 1467871673


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE



MICHAEL, RAMI

Provider ID: 569910

Provider Gender: Male

License Number: A144513

NPI: 1467871673




 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE



NADI, FAHIMA

Provider ID: 418340

Provider Gender: Female

License Number: A175325

NPI: 1770072290


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Pashto, Persian,
Urdu

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE



NADI, FAHIMA

Provider ID: 418340

Provider Gender: Female

License Number: A175325



NPI: 1770072290


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Pashto, Persian,
Urdu


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
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 Phone: (619) 515-2498
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515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

NARAYAN, ARCHANA


Provider ID: 569910


Provider Gender: Female

License Number: A101773

D2. Directorio de atención primaria

NPI: 1003053950

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Kannada

Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE


NARAYAN, ARCHANA


Provider ID: 569910

Provider Gender: Female

License Number: A101773

NPI: 1003053950

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Kannada

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE


PARIKH, MILIND


Provider ID: 418340

Provider Gender: Male

License Number: 20A13745

NPI: 1194161406

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Gujarati, Hindi,
Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp

Grossmont Hospital, Adventist
Health and Rideout

Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SAN


DIEGO-EL CAJON

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

PARIKH, MILIND


Provider ID: 418340

Provider Gender: Male

License Number: 20A13745

NPI: 1194161406

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Gujarati, Hindi,
Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital, Adventist
Health and Rideout

Board Certified Specialty: No
Family Health Centers of San


Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

D2. Directorio de atención primaria

PETITT, JOHN

Provider ID: 478971

Provider Gender: Male

License Number: G52812

NPI: 1497992432

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


BORREGO COMMUNITY

HEALTH FOUNDTION

CENTRO MEDICO EL CAJON

 133 W MAIN ST STE 100
EL CAJON, CA 92020

 Phone: (619) 401-0404

 After Hours Phone: (619)
401-0404

 Website: N/A

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

PETITT, JOHN

Provider ID: 478971

Provider Gender: Male

License Number: G52812

NPI: 1497992432

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


BORREGO COMMUNITY

HEALTH FOUNDTION

CENTRO MEDICO EL CAJON

 133 W MAIN ST STE 100
EL CAJON, CA 92020

 Phone: (619) 401-0404

 After Hours Phone: (619)
401-0404

 Website: N/A

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

REDDY, ARJUN

Provider ID: 428134

Provider Gender: Male

NPI: 1730132457

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL

Board Certified Specialty: No


Community Care IPA LLC

ARJUN N REDDY

 5442 SYCUAN RD
EL CAJON, CA 92019

 Phone: (619) 445-0707

Fax: (619) 445-0988

 After Hours Phone: (619)
445-0707

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-4:00PM

INTERNAL MEDICINE

ROUEL, WADI

Provider ID: 185267

Provider Gender: Male

License Number: C55979

NPI: 1740254713

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Assyrian,
Spanish, Syriac

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, GROSSMONT


HOSPITAL


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 269-1262

 After Hours Phone: (619)
269-1262

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

TH-F 8:00AM-5:00PM

D2. Directorio de atención primaria

INTERNAL MEDICINE


ROUEL, WADI


Provider ID: 185267

Provider Gender: Male

License Number: C55979

NPI: 1740254713

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic, Assyrian,
Spanish, Syriac


Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 269-1262

 After Hours Phone: (619)
269-1262

 Website: www.lamaestra.org


Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

TH-F 8:00AM-5:00PM


INTERNAL MEDICINE


ROUEL, LINDA

Provider ID: 308485

Provider Gender: Female

NPI: 1326128950

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Assyrian,
Mandarin, Syriac


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No
Imperial Health Holdings
Medical Group-SD

LINDA Y ROUEL

 860 JAMACHA RD STE 107
EL CAJON, CA 92019

 Phone: (619) 456-9920

Fax: (619) 456-9340

 After Hours Phone: (619)
456-9920

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-7:00PM

INTERNAL MEDICINE


ROUEL, WADI


Provider ID: 418501

Provider Gender: Male

License Number: C55979

NPI: 1740254713


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic, Assyrian,
Spanish, Syriac


Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5983

 After Hours Phone: (619)
795-5983

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

ROUEL, WADI


Provider ID: 418501

Provider Gender: Male

License Number: C55979

NPI: 1740254713

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Assyrian,
Spanish, Syriac

Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL


Board Certified Specialty: No

D2. Directorio de atención primaria

La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5983

 After Hours Phone: (619)
795-5983

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE


SHEIKH-MOHAMED, HALA


Provider ID: 569910

Provider Gender: Female

License Number: A159247

NPI: 1972946770

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Hindi, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL

CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

SHEIKH-MOHAMED, HALA

Provider ID: 569910

Provider Gender: Female

License Number: A159247

NPI: 1972946770

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Hindi, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL

CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE


TCHAKMAKJIAN, LEVON

Provider ID: 569910

Provider Gender: Male

License Number: C144411

NPI: 1790744795

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Armenian, Hebrew

Cultural Competency: N


Hospital Affiliation: NORTH
BAY VACAVALLEY HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL

CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

TCHAKMAKJIAN, LEVON


Provider ID: 569910

Provider Gender: Male

License Number: C144411

NPI: 1790744795

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Armenian, Hebrew

Cultural Competency: N

Hospital Affiliation: NORTH
BAY VACAVALLEY HOSPITAL


Board Certified Specialty: No

IHP of Southern Cal-PHP




SAN YSIDRO HEALTH EL

CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

D2. Directorio de atención primaria

 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

YOON, TAE

Provider ID: 418340
Provider Gender: Male
License Number: C161090
NPI: 1508918178
 Provider English Spoken: Y
 Provider Language(s) Spoken: Korean
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM



INTERNAL MEDICINE

YOON, TAE

Provider ID: 418340
Provider Gender: Male
License Number: C161090
NPI: 1508918178
 Provider English Spoken: Y
 Provider Language(s) Spoken: Korean
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

ZAYED, AHMAD





Provider ID: 478971
Provider Gender: Male
License Number: A169713
NPI: 1720500929
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, Chinese, Mandarin, Persian, Tagalog
Cultural Competency: N
Hospital Affiliation: RIVERSIDE

COMMUNITY HOSP


Board Certified Specialty: No
BORREGO COMMUNITY HEALTH FOUNDTION
CENTRO MEDICO EL CAJON
 133 W MAIN ST STE 100
EL CAJON, CA 92020
 Phone: (619) 401-0404
 After Hours Phone: (619) 401-0404
 Website: N/A
Email: iselaocha@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:00AM-8:00PM


INTERNAL MEDICINE

ZAYED, AHMAD

Provider ID: 478971
Provider Gender: Male
License Number: A169713
NPI: 1720500929
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, Chinese, Mandarin, Persian, Tagalog
Cultural Competency: N
Hospital Affiliation: RIVERSIDE
COMMUNITY HOSP
Board Certified Specialty: No
BORREGO COMMUNITY HEALTH FOUNDTION
CENTRO MEDICO EL CAJON
 133 W MAIN ST STE 100
EL CAJON, CA 92020
 Phone: (619) 401-0404

D2. Directorio de atención primaria

 After Hours Phone: (619) 401-0404

 Website: N/A

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: SU-SA 8:00AM-8:00PM

INTERVENTIONAL

CARDIOLOGY


KAFRI, HASSAN


Provider ID: 569910

Provider Gender: Male

License Number: A96002

NPI: 1730258401

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, French,
German, Russian, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, GROSSMONT

HOSPITAL, SHARP MEMORIAL

HOSPITAL, SHARP CHULA

VISTA MED CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL

CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERVENTIONAL

CARDIOLOGY


KAFRI, HASSAN


Provider ID: 569910

Provider Gender: Male

License Number: A96002

NPI: 1730258401

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, French,
German, Russian, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, GROSSMONT

HOSPITAL, SHARP MEMORIAL

HOSPITAL, SHARP CHULA

VISTA MED CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH EL

CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI


Provider ID: 418340

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619) 515-2498


 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI


Provider ID: 418340

Provider Gender: Female

License Number: 20A14919

D2. Directorio de atención primaria

NPI: 1619397031

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org


Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


BUECHNER, CHARLENE


Provider ID: 418340

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


BUECHNER, CHARLENE

Provider ID: 418340

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BULLOCH, EDGAR

Provider ID: 478971

Provider Gender: Male

License Number: A113241

NPI: 1508046376

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

Sharp Grossmont Hospital

Board Certified Specialty: No


BORREGO COMMUNITY


HEALTH FOUNDTION


CENTRO MEDICO EL CAJON

 133 W MAIN ST STE 100

EL CAJON, CA 92020


 Phone: (619) 873-8940

 After Hours Phone: (619)
873-8940

 Website: N/A







Email:


D2. Directorio de atención primaria

iselaocha@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY



BULLOCH, EDGAR

Provider ID: 478971
Provider Gender: Male
License Number: A113241
NPI: 1508046376
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 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
Sharp Grossmont Hospital
Board Certified Specialty: No
BORREGO COMMUNITY
HEALTH FOUNDTION
CENTRO MEDICO EL CAJON
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 Phone: (619) 873-8940
 After Hours Phone: (619)
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 Website: N/A
Email:
iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 418340
Provider Gender: Male
License Number: A113001
NPI: 1225231582
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org


Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N







 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY



CARTER, KHALIL

Provider ID: 418340
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 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL, TRI
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Board Certified Specialty: No
Family Health Centers of San
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 418340
Provider Gender: Female
License Number: A163464
NPI: 1326531401
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital

D2. Directorio de atención primaria

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

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Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San Diego

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Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 418340

Provider Gender: Male

License Number: A108228

NPI: 1629277322

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

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NPI: 1629277322

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Board Certified Specialty: No

Family Health Centers of San Diego

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 418340

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San Diego

D2. Directorio de atención primaria

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 418340

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San
Diego

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 418340

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 418340

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

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Board Certified Specialty: No

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N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

HO, MYLIEN

Provider ID: 478971

Provider Gender: Female

License Number: A48215

NPI: 1851464606

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

D2. Directorio de atención primaria

Hospital Affiliation:

GROSSMONT HOSPITAL


Board Certified Specialty: No


BORREGO COMMUNITY

HEALTH FOUNDTION

CENTRO MEDICO EL CAJON

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EL CAJON, CA 92020

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873-8940

 Website: N/A

Email:


iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

OBSTETRICS / GYNECOLOGY


HO, MYLIEN

Provider ID: 478971

Provider Gender: Female

License Number: A48215

NPI: 1851464606

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Vietnamese*

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL


Board Certified Specialty: No


BORREGO COMMUNITY

HEALTH FOUNDTION


CENTRO MEDICO EL CAJON

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

OBSTETRICS / GYNECOLOGY


KHAN, ALIYA


Provider ID: 418501

Provider Gender: Female

License Number: G50634

NPI: 1285687350

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Hindi, Urdu*

Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA CHC EL CAJON

BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5991

 After Hours Phone: (619)
795-5991

 Website: *www.lamaestra.or*
g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

*Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM*

OBSTETRICS / GYNECOLOGY


KHAN, ALIYA


Provider ID: 418501

Provider Gender: Female

License Number: G50634

NPI: 1285687350

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Hindi, Urdu*

Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA CHC EL CAJON

BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5991

 After Hours Phone: (619)
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 Website: *www.lamaestra.or*
g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

*Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM*

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA


Provider ID: 418340

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SHARP

D2. Directorio de atención primaria

CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619)
515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY **LIPSCHITZ, LISA**

Provider ID: 418340

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San

Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON

525 E MAIN ST
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Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY **LOEFFLER, ALLISON**

Provider ID: 418340

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY **LOEFFLER, ALLISON**

Provider ID: 418340

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

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Website: www.fhcsd.org
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Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\None

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

Provider ID: 569910

Provider Gender: Male

License Number: A47906

NPI: 1437181922

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: MERCY

GENERAL HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, BAKERSFIELD

MEMORIAL HOSP, SHARP

MEMORIAL HOSPITAL,

Adventist Health Bakersfield,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, KERN

MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH EL

CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

Provider ID: 569910

Provider Gender: Male

License Number: A47906

NPI: 1437181922

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: MERCY

GENERAL HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, BAKERSFIELD

MEMORIAL HOSP, SHARP

MEMORIAL HOSPITAL,

Adventist Health Bakersfield,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, KERN

MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

PAPA, RHETT

Provider ID: 478971

Provider Gender: Male

License Number: 20A11733

NPI: 1063642312

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL


Board Certified Specialty: No


BORREGO COMMUNITY

HEALTH FOUNDTION

CENTRO MEDICO EL CAJON

 133 W MAIN ST STE 100
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 After Hours Phone: (619)
873-8940

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Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

PAPA, RHETT

Provider ID: 478971

Provider Gender: Male

D2. Directorio de atención primaria

License Number: 20A11733

NPI: 1063642312

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 418340

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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Accessibility: CONTACT
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Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 418340

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

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American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 418340

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

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American Sign Language (ASL):

D2. Directorio de atención primaria



N

 **Accessibility: CONTACT PROVIDER**
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA


Provider ID: 418340
Provider Gender: Female
License Number: A164859
NPI: 1952751711

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego

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American Sign Language (ASL):


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Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


STABEN, REBECCA

Provider ID: 418340
Provider Gender: Female


License Number: 20A13958
NPI: 1932269198
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San Diego

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 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):


N

 **Accessibility: CONTACT PROVIDER**
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


STABEN, REBECCA

Provider ID: 418340
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):



N

 **Accessibility: CONTACT PROVIDER**
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 418340
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

D2. Directorio de atención primaria


 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 418340

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SAN


DIEGO-EL CAJON

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 418340

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SHARP CORONADO HOSP

AND HEALTHCARE CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA


Board Certified Specialty: No

Family Health Centers of San


Diego


FAMILY HLTH CTR SAN


DIEGO-EL CAJON

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 418340

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SHARP CORONADO HOSP

AND HEALTHCARE CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

Family Health Centers of San


Diego


FAMILY HLTH CTR SAN


DIEGO-EL CAJON

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org


Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY


ALBORZIAN, SHERVIN


Provider ID: 418340

Provider Gender: Male

License Number: A107093

NPI: 1588825129

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Persian,
Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498


 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

OPHTHALMOLOGY


ALBORZIAN, SHERVIN


Provider ID: 418340

Provider Gender: Male

License Number: A107093

NPI: 1588825129

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Persian,
Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

OPHTHALMOLOGY


JARDON, JAVIER

Provider ID: 569910

Provider Gender: Male

License Number: A131365

NPI: 1609171982

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation:

CALIFORNIA HOSP MED CTR
LOS ANGELES, EL CENTRO
REGIONAL MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

OPHTHALMOLOGY

JARDON, JAVIER

Provider ID: 569910

Provider Gender: Male

License Number: A131365

NPI: 1609171982

 Provider English Spoken: Y





 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:
CALIFORNIA HOSP MED CTR
LOS ANGELES, EL CENTRO
REGIONAL MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON







 875 EL CAJON BLVD
EL CAJON, CA 92020

D2. Directorio de atención primaria

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

MANI, NASRIN







Provider ID: 569910
Provider Gender: Female
License Number: A40473
NPI: 1023061314
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Faroese,
Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR, SHARP CHULA
VISTA MED CTR, GROSSMONT
HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER









Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY


MANI, NASRIN






Provider ID: 569910
Provider Gender: Female
License Number: A40473
NPI: 1023061314
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Faroese,
Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR, SHARP CHULA
VISTA MED CTR, GROSSMONT
HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
OPHTHALMOLOGY

PAPASTERGIU, GEORGIOS

Provider ID: 569910
Provider Gender: Male
License Number: A127706
NPI: 1790054393
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Farsi,
French, Greek, Italian,
Spanish
Cultural Competency: N
Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
OPHTHALMOLOGY
PAPASTERGIU, GEORGIOS
Provider ID: 569910
Provider Gender: Male
License Number: A127706
NPI: 1790054393
 Provider English Spoken: Y



D2. Directorio de atención primaria

 *Provider Language(s)*
Spoken: Arabic, Farsi, French, Greek, Italian, Spanish
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP SAN YSIDRO HEALTH EL CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY

PONS, MAURICIO

Provider ID: 569910
Provider Gender: Male
License Number: A87650
NPI: 1376723759
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL




CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL





Board Certified Specialty: No
IHP of Southern Cal-PHP SAN YSIDRO HEALTH EL CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

OPHTHALMOLOGY







PONS, MAURICIO

Provider ID: 569910
Provider Gender: Male
License Number: A87650
NPI: 1376723759
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP SAN YSIDRO HEALTH EL CAJON
 875 EL CAJON BLVD

EL CAJON, CA 92020
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

OPHTHALMOLOGY

SKAF, AYHAM

Provider ID: 569910
Provider Gender: Male
License Number: A120584
NPI: 1285888628
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP SAN YSIDRO HEALTH EL CAJON
 875 EL CAJON BLVD
EL CAJON, CA 92020
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

OPHTHALMOLOGY


SKAF, AYHAM


Provider ID: 569910

Provider Gender: Male

License Number: A120584

NPI: 1285888628

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Arabic, Spanish*


Cultural Competency: N

Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH EL CAJON

 *875 EL CAJON BLVD EL CAJON, CA 92020*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*


 *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS



ADJAN, ROULA

Provider ID: 185267

Provider Gender: Female

License Number: A81682


NPI: 1992847263


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, French, Spanish*


Cultural Competency: N

Board Certified Specialty: No La Maestra Family Clinic LA MAESTRA FAMILY CLINIC INC

 *165 S 1ST ST EL CAJON, CA 92019*

 *Phone: (619) 280-4213*

 *After Hours Phone: (619) 280-4213*

 *Website: www.lamaestra.org*

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS


ADJAN, ROULA


Provider ID: 185267

Provider Gender: Female

License Number: A81682

NPI: 1992847263


 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Arabic, French, Spanish*


Cultural Competency: N

Board Certified Specialty: No La Maestra Family Clinic LA MAESTRA FAMILY CLINIC INC

 *165 S 1ST ST EL CAJON, CA 92019*

 *Phone: (619) 280-4213*

 *After Hours Phone: (619) 280-4213*

 *Website: www.lamaestra.org*

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

ALWAHAB, AREEJ

Provider ID: 678064

Provider Gender: Female

NPI: 1497138002

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Arabic*

Cultural Competency: N

Hospital Affiliation: ST BERNARDINE MED CTR,

KAISER FOUNDATION


HOSPITAL SAN DIEGO

Board Certified Specialty: No

Rady Childrens Health Network

AREEJ K ALWAHAB

 *250 E CHASE AVE STE 110 EL CAJON, CA 92020*

 *Phone: (619) 399-7878*

Fax: (858) 499-5006

 *After Hours Phone: (619) 399-7878*

 *Website: N/A*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CONE, STEPHANIE

Provider ID: 185267
Provider Gender: Female
License Number: A123929
NPI: 1437444858

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No La Maestra Family Clinic LA MAESTRA FAMILY CLINIC INC

 *165 S 1ST ST
EL CAJON, CA 92019*
 *Phone: (619) 312-0347*
 *After Hours Phone: (619) 312-0347*

 *Website: www.lamaestra.org*

Email: aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*



PEDIATRICS

CONE, STEPHANIE

Provider ID: 185267
Provider Gender: Female
License Number: A123929
NPI: 1437444858

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No La Maestra Family Clinic LA MAESTRA FAMILY CLINIC INC

 *165 S 1ST ST
EL CAJON, CA 92019*
 *Phone: (619) 312-0347*
 *After Hours Phone: (619) 312-0347*

 *Website: www.lamaestra.org*

Email: aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


PEDIATRICS



CONE, STEPHANIE


Provider ID: 418501
Provider Gender: Female
License Number: A123929
NPI: 1437444858

Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No La Maestra Family Clinic LA MAESTRA CHC EL CAJON BROADWAY

 *1032 BROADWAY
EL CAJON, CA 92021*

 *Phone: (619) 795-5991*
 *After Hours Phone: (619) 795-5991*

 *Website: www.lamaestra.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

CONE, STEPHANIE

Provider ID: 418501
Provider Gender: Female
License Number: A123929
NPI: 1437444858

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO

D2. Directorio de atención primaria

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY

1032 BROADWAY
EL CAJON, CA 92021

Phone: (619) 795-5991

After Hours Phone: (619)
795-5991

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

**FIGUEROA RODRIGUEZ,
BRENDA**

Provider ID: 478971

Provider Gender: Female

License Number: A114674

NPI: 1134205214

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

CENTRO MEDICO EL CAJON

133 W MAIN ST STE 100
EL CAJON, CA 92020

Phone: (619) 873-8940

After Hours Phone: (619)
873-8940

Website: N/A

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

**FIGUEROA RODRIGUEZ,
BRENDA**

Provider ID: 478971

Provider Gender: Female

License Number: A114674

NPI: 1134205214

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

CENTRO MEDICO EL CAJON

133 W MAIN ST STE 100
EL CAJON, CA 92020

Phone: (619) 873-8940

After Hours Phone: (619)
873-8940

Website: N/A

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

FLEMING, TARA

Provider ID: 418340

Provider Gender: Female

License Number: A152462

NPI: 1972965242

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

FLEMING, TARA

Provider ID: 418340

Provider Gender: Female

License Number: A152462

NPI: 1972965242

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

D2. Directorio de atención primaria

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619) 515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

HOANG, VY

Provider ID: 546310

Provider Gender: Female

NPI: 1649575135

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, RADY

CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
Rady Childrens Health Network

VY U HOANG

844 JACKMAN ST
EL CAJON, CA 92020

Phone: (619) 442-2560

Fax: (619) 442-7836

After Hours Phone: (619) 442-2560

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

JACKSON, DANA

Provider ID: 418340

Provider Gender: Female

License Number: 20A14119

NPI: 1689060063

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation:

MARINHEALTH AND
MARINHEALTH MEDICAL
CENTER, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619) 515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

PEDIATRICS

JACKSON, DANA

Provider ID: 418340

Provider Gender: Female

License Number: 20A14119

NPI: 1689060063

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation:

MARINHEALTH AND
MARINHEALTH MEDICAL
CENTER, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
Family Health Centers of San

Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

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Phone: (619) 515-2498

After Hours Phone: (619) 515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

PEDIATRICS

D2. Directorio de atención primaria

JONES, SETAREH

Provider ID: 418501

Provider Gender: Female

License Number: A110010


NPI: 1033441316


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5983

 After Hours Phone: (619)
795-5983

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

JONES, SETAREH

Provider ID: 418501

Provider Gender: Female

License Number: A110010

NPI: 1033441316

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5983

 After Hours Phone: (619)
795-5983

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

JONES, SETAREH

Provider ID: 185267

Provider Gender: Female

License Number: A110010


NPI: 1033441316


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

PEDIATRICS

JONES, SETAREH

Provider ID: 185267

Provider Gender: Female

License Number: A110010


NPI: 1033441316


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
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312-0347

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

D2. Directorio de atención primaria

PEDIATRICS

KODSI, ALICIA

Provider ID: 418340

Provider Gender: Female

License Number: A147976

NPI: 1932514353

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

KODSI, ALICIA

Provider ID: 418340

Provider Gender: Female

License Number: A147976

NPI: 1932514353

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

NAGNUR, PRITI

Provider ID: 206354

Provider Gender: Female

License Number: A170055

NPI: 1316289929

Provider English Spoken: Y

Provider Language(s)

Spoken: Hindi, Kannada

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego


CHASE AVENUE FAMILY

HEALTH CTRS INC

 1111 W CHASE AVE

EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619) 515-2499

 Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

NAGNUR, PRITI

Provider ID: 206354

Provider Gender: Female

License Number: A170055

NPI: 1316289929

Provider English Spoken: Y

Provider Language(s)

Spoken: Hindi, Kannada

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego


CHASE AVENUE FAMILY

HEALTH CTRS INC

 1111 W CHASE AVE

EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619) 515-2499

 Website: www.fhcsd.org


Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

NAIK, SHILPA

Provider ID: 546498

Provider Gender: Female

NPI: 1902156904

Provider English Spoken: Y

Provider Language(s)

Spoken: Hindi


D2. Directorio de atención primaria



Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
Rady Childrens Health Network
SHILPA NAIK

 844 JACKMAN ST
EL CAJON, CA 92020
 Phone: (619) 442-2560
Fax: (619) 442-7836
 After Hours Phone: (619) 442-2560
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

NGUYEN, VI



Provider ID: 546509
Provider Gender: Female
NPI: 1053540534
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
Rady Childrens Health Network
VI T NGUYEN



 844 JACKMAN ST
EL CAJON, CA 92020
 Phone: (619) 442-2560


Fax: (619) 442-7836
 After Hours Phone: (619) 442-2560
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

PINTO, ANITA



Provider ID: 546215
Provider Gender: Female
NPI: 1477663722
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Hindi*
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
Rady Childrens Health Network
ANITA PINTO

 844 JACKMAN ST
EL CAJON, CA 92020
 Phone: (619) 442-2560
Fax: (619) 442-7836
 After Hours Phone: (619) 442-2560
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):


N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

RODRIGUEZ, ALDO

Provider ID: 569910
Provider Gender: Male
License Number: A134995
NPI: 1508209651
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Portuguese, Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM


PEDIATRICS


RODRIGUEZ, ALDO

Provider ID: 569910
Provider Gender: Male
License Number: A134995

D2. Directorio de atención primaria

NPI: 1508209651

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Portuguese,
Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020


 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

ALYAS, ALISIA

Provider ID: 418501

Provider Gender: Female

License Number: PA58466


NPI: 1437768017


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5991

 After Hours Phone: (619)
795-5991

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT


ALYAS, ALISIA

Provider ID: 418501

Provider Gender: Female

License Number: PA58466

NPI: 1437768017


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5991

 After Hours Phone: (619)
795-5991

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

ALYAS, ALISIA

Provider ID: 185267

Provider Gender: Female

License Number: PA58466

NPI: 1437768017


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

ALYAS, ALISIA

Provider ID: 185267

Provider Gender: Female

License Number: PA58466

NPI: 1437768017


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 312-0347

D2. Directorio de atención primaria

☎ After Hours Phone: (619) 312-0347

🌐 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

ARMENTA, JORGE

Provider ID: 185267

Provider Gender: Male

License Number: PA13694

NPI: 1346382611

☑ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

📍 165 S 1ST ST
EL CAJON, CA 92019

☎ Phone: (619) 312-0347

☎ After Hours Phone: (619) 312-0347

🌐 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

PHYSICIANS ASSISTANT

ARMENTA, JORGE

Provider ID: 185267

Provider Gender: Male

License Number: PA13694

NPI: 1346382611

☑ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

📍 165 S 1ST ST
EL CAJON, CA 92019

☎ Phone: (619) 312-0347

☎ After Hours Phone: (619) 312-0347

🌐 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 185267

Provider Gender: Female

License Number: PA21625

NPI: 1154609790

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

📍 165 S 1ST ST
EL CAJON, CA 92019

☎ Phone: (619) 312-0347

☎ After Hours Phone: (619) 312-0347

🌐 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 185267

Provider Gender: Female

License Number: PA21625

NPI: 1154609790

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

📍 165 S 1ST ST
EL CAJON, CA 92019

☎ Phone: (619) 312-0347



☎ After Hours Phone: (619)






D2. Directorio de atención primaria

312-0347
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

PHYSICIANS ASSISTANT



MERCER, KELLY





Provider ID: 418501
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021
 Phone: (619) 795-5991
 After Hours Phone: (619)
795-5991
 Website: www.lamaestra.org
g
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT



MERCER, KELLY

Provider ID: 418501
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021
 Phone: (619) 795-5991
 After Hours Phone: (619)
795-5991
 Website: www.lamaestra.org
g
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM


PHYSICIANS ASSISTANT

PATEL, SHREYA

Provider ID: 206354
Provider Gender: Female
License Number: PA18719
NPI: 1447468137
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No



Family Health Centers of San Diego

CHASE AVENUE FAMILY HEALTH CTRS INC

 1111 W CHASE AVE
EL CAJON, CA 92020
 Phone: (619) 515-2499
 After Hours Phone: (619)
515-2499
 Website: www.fhcsd.org
Email: jaquelininc@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

PATEL, SHREYA

Provider ID: 206354
Provider Gender: Female
License Number: PA18719
NPI: 1447468137
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

CHASE AVENUE FAMILY HEALTH CTRS INC

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 Phone: (619) 515-2499
 After Hours Phone: (619)
515-2499
 Website: www.fhcsd.org
Email: jaquelininc@fhcsd.org
Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

ROSENBLATT, SHERILYN

Provider ID: 569910

Provider Gender: Female

License Number: PA22872

NPI: 1114041621


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT


ROSENBLATT, SHERILYN

Provider ID: 569910

Provider Gender: Female

License Number: PA22872

NPI: 1114041621

 Provider English Spoken: Y


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

TURNER, ERIC

Provider ID: 206354

Provider Gender: Male

License Number: PA55067

NPI: 1669756128


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

 1111 W CHASE AVE
EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619)
515-2499

 Website: www.fhcsd.org

Email: jaquelin@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

TURNER, ERIC

Provider ID: 206354

Provider Gender: Male

License Number: PA55067

NPI: 1669756128


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

 1111 W CHASE AVE
EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619)
515-2499


 Website: www.fhcsd.org

Email: jaquelin@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

TURNER, SHEREENA

Provider ID: 418340

Provider Gender: Female

D2. Directorio de atención primaria

License Number: PA20396

NPI: 1992934988

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST

EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

TURNER, SHEREENA

Provider ID: 418340

Provider Gender: Female

License Number: PA20396

NPI: 1992934988

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST

EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

ZAMBRANA, GEORGE

Provider ID: 478971

Provider Gender: Male

License Number: PA16673

NPI: 1104836659

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

CENTRO MEDICO EL CAJON

133 W MAIN ST STE 100

EL CAJON, CA 92020

Phone: (619) 873-8940

After Hours Phone: (619)
873-8940

Website: N/A

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU-SA 8:00AM-8:00PM

PHYSICIANS ASSISTANT

ZAMBRANA, GEORGE

Provider ID: 478971

Provider Gender: Male

License Number: PA16673

NPI: 1104836659

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

CENTRO MEDICO EL CAJON

133 W MAIN ST STE 100

EL CAJON, CA 92020

Phone: (619) 873-8940

After Hours Phone: (619)
873-8940

Website: N/A

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU-SA 8:00AM-8:00PM

PODIATRIST

CHARP, KENNETH

Provider ID: 478971

Provider Gender: Male

License Number: DPM1536

NPI: 1841384203

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

BORREGO COMMUNITY

D2. Directorio de atención primaria

HEALTH FOUNDTION
CENTRO MEDICO EL CAJON
133 W MAIN ST STE 100
EL CAJON, CA 92020
Phone: (619) 873-8940
After Hours Phone: (619)
873-8940
Website: N/A
Email:
iselaocha@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

PODIATRIST

CHARP, KENNETH

Provider ID: 478971
Provider Gender: Male
License Number: DPM1536
NPI: 1841384203
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
BORREGO COMMUNITY
HEALTH FOUNDTION
CENTRO MEDICO EL CAJON
133 W MAIN ST STE 100
EL CAJON, CA 92020
Phone: (619) 873-8940
After Hours Phone: (619)
873-8940
Website: N/A
Email:
iselaocha@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

PODIATRIST

JUAREZ, LETICIA

Provider ID: 418340
Provider Gender: Female
License Number: DPM5661
NPI: 1508393778
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2400
After Hours Phone: (619)
515-2400
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

PODIATRIST

JUAREZ, LETICIA

Provider ID: 418340
Provider Gender: Female
License Number: DPM5661
NPI: 1508393778
Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2400
After Hours Phone: (619)
515-2400
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

PODIATRIST

LE, DIANA

Provider ID: 418340
Provider Gender: Female
License Number: DPM5734
NPI: 1184112864
Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
525 E MAIN ST

D2. Directorio de atención primaria

EL CAJON, CA 92020
☎ Phone: (619) 515-2498
🕒 After Hours Phone: (619) 515-2498
🌐 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

PODIATRIST

LE, DIANA

Provider ID: 418340
Provider Gender: Female
License Number: DPM5734
NPI: 1184112864
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
📍 525 E MAIN ST
EL CAJON, CA 92020
☎ Phone: (619) 515-2498
🕒 After Hours Phone: (619) 515-2498
🌐 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE

Provider ID: 418340
Provider Gender: Male
License Number: PT295173
NPI: 1497236384
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
📍 525 E MAIN ST
EL CAJON, CA 92020
☎ Phone: (619) 515-2498
🕒 After Hours Phone: (619) 515-2498
🌐 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

DASCENZO, EMILY

Provider ID: 569910
Provider Gender: Female
License Number: PT40025
NPI: 1952982761
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON
📍 875 EL CAJON BLVD
EL CAJON, CA 92020

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE

Provider ID: 418340

Provider Gender: Male
License Number: PT295173
NPI: 1497236384
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
📍 525 E MAIN ST
EL CAJON, CA 92020
☎ Phone: (619) 515-2498
🕒 After Hours Phone: (619) 515-2498
🌐 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

DASCENZO, EMILY


Provider ID: 569910
Provider Gender: Female
License Number: PT40025
NPI: 1952982761
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON
📍 875 EL CAJON BLVD
EL CAJON, CA 92020

D2. Directorio de atención primaria

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST


DASCENZO, EMILY

Provider ID: 569910
Provider Gender: Female
License Number: PT40025
NPI: 1952982761
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST


GUTIERREZ, JUSTINE

Provider ID: 418340
Provider Gender: Female
License Number: PT292482
NPI: 1851834873
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-EL CAJON




 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST

GUTIERREZ, JUSTINE


Provider ID: 418340
Provider Gender: Female
License Number: PT292482
NPI: 1851834873
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST

KUIOKA, TROY

Provider ID: 569910
Provider Gender: Male
License Number: PT42665
NPI: 1912640053
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

D2. Directorio de atención primaria

REGISTERED PHYSICAL THERAPIST

KUIOKA, TROY

Provider ID: 569910

Provider Gender: Male

License Number: PT42665


NPI: 1912640053


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020


 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

Provider ID: 418340

Provider Gender: Male

License Number: PT293536


NPI: 1043736879


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

Provider ID: 418340

Provider Gender: Male

License Number: PT293536


NPI: 1043736879


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

ENCINITAS

PEDIATRICS

BRION, SONJA

Provider ID: 386639

Provider Gender: Female

NPI: 1306817317

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS
HOSPITAL SAN DIEGO,


SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network
SONJA K BRION

 499 N EL CAMINO REAL
STE B100

ENCINITAS, CA 92024

 Phone: (760) 436-4511

Fax: (760) 436-5106

 After Hours Phone: (760)
436-4511

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CLEMENTINO, NANCY

D2. Directorio de atención primaria

Provider ID: 386643
Provider Gender: Female
NPI: 1619948619
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
Rady Childrens Health Network
NANCY A CLEMENTINO
📍 499 N EL CAMINO REAL STE B100 ENCINITAS, CA 92024
☎ Phone: (760) 436-4511
Fax: (760) 436-5106
📞 After Hours Phone: (760) 436-4511
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MENDENHALL, ANNA

Provider ID: 386635
Provider Gender: Female
NPI: 1639140650
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
ANNA K MENDENHALL
📍 499 N EL CAMINO REAL STE B100 ENCINITAS, CA 92024
☎ Phone: (760) 436-4511
Fax: (760) 436-5106
📞 After Hours Phone: (760) 436-4511
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

TERRY, AMANDA

Provider ID: 386739
Provider Gender: Female
NPI: 1861770885
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Board Certified Specialty: No


Rady Childrens Health Network
AMANDA R TERRY
📍 499 N EL CAMINO REAL STE B100 ENCINITAS, CA 92024
☎ Phone: (760) 436-4511
Fax: (760) 436-5106
📞 After Hours Phone: (760) 436-4511
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS


TOLBA, KAMEI

Provider ID: 386624
Provider Gender: Male
NPI: 1144221763
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
KAMEI B TOLBA
📍 499 N EL CAMINO REAL STE B100 ENCINITAS, CA 92024
☎ Phone: (760) 436-4511
Fax: (760) 436-5106
📞 After Hours Phone: (760) 436-4511

D2. Directorio de atención primaria

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM




ESCONDIDO


CERTIFIED NURSE PRACTITIONER

CARNEY, AMY


Provider ID: 206271
Provider Gender: Female
License Number: NP8169
NPI: 1164445227

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM




TH-F 8:00AM-5:00PM


CERTIFIED NURSE PRACTITIONER


CARNEY, AMY

Provider ID: 206271
Provider Gender: Female
License Number: NP8169
NPI: 1164445227

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM




CERTIFIED NURSE PRACTITIONER



HACINAS, REYNALDO

Provider ID: 419344
Provider Gender: Male
License Number: NP95003024

NPI: 1215304860

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
BORREGO COMMUNITY
HEALTH FOUNDTION
CENTRO MEDICO
ESCONDIDO


 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
 Phone: (760) 767-5051
 After Hours Phone: (760)
767-5051




 Website: N
Email:
iselaochoa@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER



HACINAS, REYNALDO

Provider ID: 419344
Provider Gender: Male
License Number: NP95003024
NPI: 1215304860

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
BORREGO COMMUNITY
HEALTH FOUNDTION
CENTRO MEDICO
ESCONDIDO


 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
 Phone: (760) 767-5051
 After Hours Phone: (760)






D2. Directorio de atención primaria

767-5051
 Website: N
Email:
iselaocha@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


KAHL, NICHOLAS






Provider ID: 588941
Provider Gender: Male
License Number: NP95006360
NPI: 1821306598
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


KAHL, NICHOLAS



Provider ID: 588941
Provider Gender: Male
License Number: NP95006360
NPI: 1821306598
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE




 704 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

MITCHELL, CATHY


Provider ID: 424775
Provider Gender: Female
License Number: NP4799
NPI: 1356365365
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL






 426 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 690-5900

 After Hours Phone: (760)
690-5900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

MITCHELL, CATHY

Provider ID: 424775
Provider Gender: Female
License Number: NP4799
NPI: 1356365365
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL

 426 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 690-5900
 After Hours Phone: (760)
690-5900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

D2. Directorio de atención primaria

TODD, MIKAYLA

Provider ID: 588941

Provider Gender: Female

License Number: NP95005999

NPI: 1316478092

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


ESCONDIDO FAMILY


MEDICINE

 704 E GRAND AVE

ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

TODD, MIKAYLA

Provider ID: 588941

Provider Gender: Female

License Number: NP95005999

NPI: 1316478092

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


ESCONDIDO FAMILY

MEDICINE

 704 E GRAND AVE

ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

ROBINSON, DEAN

Provider ID: 206270

Provider Gender: Male

License Number: DC12036

NPI: 1851320337

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

ROBINSON, DEAN

Provider ID: 206270

Provider Gender: Male

License Number: DC12036

NPI: 1851320337

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

ZECHA, RONALD

Provider ID: 206270

Provider Gender: Male

License Number: DC28605

NPI: 1427252121

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE ESCONDIDO



 460 N ELM ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8100



 After Hours Phone: (760)




D2. Directorio de atención primaria



520-8100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

CHIROPRACTOR

ZECHA, RONALD

Provider ID: 206270
Provider Gender: Male
License Number: DC28605
NPI: 1427252121
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO



 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM


FAMILY PRACTICE

ARRIETA, NOEMI

Provider ID: 588941
Provider Gender: Female
License Number: 20A11153
NPI: 1912223496

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100



 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


FAMILY PRACTICE



ARRIETA, NOEMI

Provider ID: 588941
Provider Gender: Female
License Number: 20A11153
NPI: 1912223496

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE




 704 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100



 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

AVILA, MICHAEL

Provider ID: 206270
Provider Gender: Male
License Number: A159727
NPI: 1962936450
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100


 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT





D2. Directorio de atención primaria


PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

AVILA, MICHAEL


Provider ID: 206270
Provider Gender: Male
License Number: A159727
NPI: 1962936450
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025
 *Phone: (760) 520-8100*
 *After Hours Phone: (760) 520-8100*
 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N



 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

CASTANER, ZALYA


Provider ID: 206271
Provider Gender: Female
License Number: A139490
NPI: 1487072179
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER



Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY


 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 *Phone: (760) 737-6900*
 *After Hours Phone: (760) 737-6900*
 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE

CASTANER, ZALYA


Provider ID: 206270
Provider Gender: Female
License Number: A139490
NPI: 1487072179
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO






 460 N ELM ST
ESCONDIDO, CA 92025
 *Phone: (760) 520-8100*
 *After Hours Phone: (760) 520-8100*
 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

CASTANER, ZALYA

Provider ID: 206271
Provider Gender: Female
License Number: A139490
NPI: 1487072179
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 *Phone: (760) 737-6900*
 *After Hours Phone: (760) 737-6900*
 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE

CASTANER, ZALYA

Provider ID: 206270
Provider Gender: Female
License Number: A139490

D2. Directorio de atención primaria

NPI: 1487072179

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER


Board Certified Specialty: No
IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100


 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

COBIAN, VANESSA

Provider ID: 206271

Provider Gender: Female

License Number: A145349

NPI: 1134513039

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE VALLEY

PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900

 After Hours Phone: (760)
737-6900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE

COBIAN, VANESSA

Provider ID: 206271

Provider Gender: Female

License Number: A145349

NPI: 1134513039

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


NEIGHBORHOOD


HEALTHCARE VALLEY

PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900

 After Hours Phone: (760)
737-6900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE


COX, VICTORIA

Provider ID: 588941

Provider Gender: Female

License Number: C171064

NPI: 1093087819

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


ESCONDIDO FAMILY

MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


COX, VICTORIA

Provider ID: 588941

Provider Gender: Female

License Number: C171064

NPI: 1093087819

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


ESCONDIDO FAMILY

MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


FERRAILOLO, NATALIE


Provider ID: 206270

Provider Gender: Female

License Number: A152372

NPI: 1306290143

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760) 520-8100


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

FAMILY PRACTICE


FERRAILOLO, NATALIE


Provider ID: 206270

Provider Gender: Female

License Number: A152372

NPI: 1306290143

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760) 520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

FAMILY PRACTICE


HAMILTON, LISA MARIE

Provider ID: 652372

Provider Gender: Female

License Number: 20A14772

NPI: 1235576059

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San


Diego


ESCONDIDO FAMILY HEALTH

CENTER

 128 N BROADWAY

ESCONDIDO, CA 92025

 Phone: (760) 546-2858

 After Hours Phone: (760)

546-2858

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

HAMILTON, LISA MARIE

Provider ID: 652372

Provider Gender: Female

License Number: 20A14772

NPI: 1235576059

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

ESCONDIDO FAMILY HEALTH CENTER

 128 N BROADWAY

ESCONDIDO, CA 92025

 Phone: (760) 546-2858

 After Hours Phone: (760) 546-2858

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KAUR, JATINDER



Provider ID: 206270

Provider Gender: Female

License Number: A120771

NPI: 1912141391

D2. Directorio de atención primaria


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Punjabi,
Urdu


Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE



KAUR, JATINDER

Provider ID: 206270

Provider Gender: Female

License Number: A120771

NPI: 1912141391


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Punjabi,
Urdu

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE


LAI, AMARA

Provider ID: 206271

Provider Gender: Female

License Number: A120348

NPI: 1790912855

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER


Board Certified Specialty: No
IHP of Southern Cal-PHP


NEIGHBORHOOD


HEALTHCARE VALLEY

PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900

 After Hours Phone: (760)
737-6900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

W 9:00AM-5:00PM

TH-F 8:00AM-5:00PM

FAMILY PRACTICE

LAI, AMARA

Provider ID: 206271

Provider Gender: Female

License Number: A120348

NPI: 1790912855

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER


Board Certified Specialty: No
IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE VALLEY

PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900

 After Hours Phone: (760)
737-6900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

W 9:00AM-5:00PM

TH-F 8:00AM-5:00PM

FAMILY PRACTICE

MATSHE, ZENZIWE

Provider ID: 665448

Provider Gender: Female


D2. Directorio de atención primaria

NPI: 1285256073

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Community Care IPA LLC
ZENZIWE MATSHE

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100
Fax: (760) 466-1373


 After Hours Phone: (760)
520-8100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


MCHENRY, KATHRYN

Provider ID: 206270

Provider Gender: Female

License Number: 20A14292

NPI: 1326458373

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE


MCHENRY, KATHRYN

Provider ID: 206270

Provider Gender: Female

License Number: 20A14292

NPI: 1326458373

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

NAKAMURA, MELANIE

Provider ID: 206270

Provider Gender: Female

License Number: A107557


NPI: 1104022672


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

NAKAMURA, MELANIE

Provider ID: 206270

Provider Gender: Female

License Number: A107557


NPI: 1104022672


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): IHP of Southern Cal-PHP

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

PATEL, JITENBHAI

Provider ID: 206270

Provider Gender: Male

License Number: A94128

NPI: 1902921406

Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NEIGHBORHOOD

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PATEL, JITENBHAI

Provider ID: 206271

Provider Gender: Male

License Number: A94128

NPI: 1902921406

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE VALLEY

PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900

 After Hours Phone: (760)
737-6900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PATEL, JITENBHAI

Provider ID: 206271

Provider Gender: Male

License Number: A94128

NPI: 1902921406

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD


HEALTHCARE VALLEY

PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900

 After Hours Phone: (760)
737-6900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PATEL, JITENBHAI

Provider ID: 206270

Provider Gender: Male

License Number: A94128

NPI: 1902921406

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

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HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RAO, USHA

Provider ID: 588941

Provider Gender: Female

License Number: A148750

NPI: 1184019911

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

D2. Directorio de atención primaria

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

704 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RAO, USHA

Provider ID: 588941

Provider Gender: Female

License Number: A148750

NPI: 1184019911

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

ESCONDIDO FAMILY

MEDICINE

704 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RASHCOVSKY SCHIFF, KARIN

Provider ID: 206270

Provider Gender: Female

License Number: A82173

NPI: 1699706333

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

460 N ELM ST
ESCONDIDO, CA 92025

Phone: (760) 520-8100

After Hours Phone: (760)
520-8100

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RASHCOVSKY SCHIFF, KARIN

Provider ID: 206270

Provider Gender: Female

License Number: A82173

NPI: 1699706333

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

460 N ELM ST
ESCONDIDO, CA 92025

Phone: (760) 520-8100

After Hours Phone: (760)
520-8100

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RODARTE, GABRIEL

Provider ID: 206266

Provider Gender: Male

License Number: A87906

NPI: 1184649212

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE PEDS AND



PRENATAL

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8340

After Hours Phone: (760)




D2. Directorio de atención primaria



520-8340
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

RODARTE, GABRIEL

Provider ID: 206266
Provider Gender: Male
License Number: A87906
NPI: 1184649212
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE PEDS AND
PRENATAL




 425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8340
 After Hours Phone: (760)
520-8340



 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

SANDHU, BASANT

Provider ID: 206271
Provider Gender: Male
License Number: A140398
NPI: 1265795744
 Provider English Spoken: Y
 Provider Language(s)
Spoken: German, Hindi,
Punjabi, Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY






 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE

SANDHU, BASANT

Provider ID: 206271
Provider Gender: Male
License Number: A140398
NPI: 1265795744
 Provider English Spoken: Y
 Provider Language(s)
Spoken: German, Hindi,
Punjabi, Spanish
Cultural Competency: N
Board Certified Specialty: No

IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY
 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM





FAMILY PRACTICE

SCHULTZ, JAMES

Provider ID: 206271
Provider Gender: Male
License Number: G61829
NPI: 1356376164
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Greek,
Spanish
Cultural Competency: N

Hospital Affiliation:
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
PALOMAR MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

D2. Directorio de atención primaria


 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900
 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SCHULTZ, JAMES

Provider ID: 206271

Provider Gender: Male

License Number: G61829

NPI: 1356376164




Provider English Spoken: Y


Provider Language(s)
Spoken: Farsi, Greek,
Spanish

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
PALOMAR MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SCHULTZ, JAMES

Provider ID: 206270

Provider Gender: Male

License Number: G61829

NPI: 1356376164

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Greek,
Spanish

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
PALOMAR MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SCHULTZ, JAMES

Provider ID: 206270

Provider Gender: Male

License Number: G61829

NPI: 1356376164




Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Greek,
Spanish

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
PALOMAR MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TANTOD, KULIN

Provider ID: 206270

Provider Gender: Male

License Number: A109655

NPI: 1902058928

Provider English Spoken: Y

Provider Language(s)

D2. Directorio de atención primaria

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO

460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

TANTOD, KULIN

Provider ID: 206270
Provider Gender: Male
License Number: A109655
NPI: 1902058928
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

THOMPSON, CHERYL

Provider ID: 206270
Provider Gender: Female
License Number: A102687
NPI: 1548429863
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO

460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

THOMPSON, CHERYL

Provider ID: 206270
Provider Gender: Female
License Number: A102687
NPI: 1548429863

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FQHC

CENTRO MEDICO ESCONDIDO,

Provider ID: 419344
NPI: 1023349883
Provider English Spoken: Y
Cultural Competency: N
BORREGO COMMUNITY
HEALTH FOUNDTION
CENTRO MEDICO
ESCONDIDO
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
Phone: (760) 871-0606
Fax: (858) 634-6918
After Hours Phone: (760) 871-0606
Website: N
Email:
iselaocha@borregohealth.org

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1417640491

N

 Accessibility: CONTACT PROVIDER

Hours: SU 8:00AM-0:00PM

M-F 8:00AM-8:00PM


SA 8:00AM-0:00PM

FQHC

CENTRO MEDICO ESCONDIDO,

Provider ID: 419344

NPI: 1023349883

 Provider English Spoken: Y

Cultural Competency: N

BORREGO COMMUNITY


HEALTH FOUNDTION

CENTRO MEDICO

ESCONDIDO

 1121 E WASHINGTON AVE

ESCONDIDO, CA 92025

 Phone: (760) 871-0606

Fax: (858) 634-6918

 After Hours Phone: (760) 871-0606

 Website: N

Email:


iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: SU 8:00AM-0:00PM

M-F 8:00AM-8:00PM

SA 8:00AM-0:00PM


FQHC

ESCONDIDO FAMILY HEALTH

CENTER,

Provider ID: 652372

NPI: 1417640491

 Provider English Spoken: Y

Cultural Competency: N

Family Health Centers of San


Diego


ESCONDIDO FAMILY HEALTH

CENTER

 128 N BROADWAY

ESCONDIDO, CA 92025

 Phone: (619) 515-2474

 After Hours Phone: (619) 515-2474

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


FQHC

ESCONDIDO FAMILY HEALTH

CENTER,

Provider ID: 652372

NPI: 1417640491

 Provider English Spoken: Y

Cultural Competency: N

Family Health Centers of San


Diego


ESCONDIDO FAMILY HEALTH

CENTER

 128 N BROADWAY

ESCONDIDO, CA 92025

 Phone: (619) 515-2474

 After Hours Phone: (619) 515-2474

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


FQHC

NEIGHBORHOOD

HEALTHCARE ESCONDIDO,

Provider ID: 206270

NPI: 1598703647

 Provider English Spoken: Y

Cultural Competency: N


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8100

Fax: (360) 466-2745

 After Hours Phone: (760) 520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD

HEALTHCARE ESCONDIDO,

Provider ID: 206270

NPI: 1598703647

 Provider English Spoken: Y

Cultural Competency: N

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST

D2. Directorio de atención primaria

ESCONDIDO, CA 92025
☎ Phone: (760) 520-8100
Fax: (360) 466-2745
🕒 After Hours Phone: (760) 520-8100
🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL,
Provider ID: 424775
NPI: 1437335353
☑ Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL
📍 426 N DATE ST
ESCONDIDO, CA 92025
☎ Phone: (760) 690-5900
Fax: (360) 462-2747
🕒 After Hours Phone: (760) 690-5900
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL,
Provider ID: 424775
NPI: 1437335353
☑ Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL
📍 426 N DATE ST
ESCONDIDO, CA 92025
☎ Phone: (760) 690-5900
Fax: (360) 462-2747
🕒 After Hours Phone: (760) 690-5900
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL,
Provider ID: 206266
NPI: 1265618185
☑ Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL
📍 425 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8340
Fax: (360) 462-2752
🕒 After Hours Phone: (760) 520-8340
🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL,
Provider ID: 206266
NPI: 1265618185
☑ Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL
📍 425 N DATE ST
ESCONDIDO, CA 92025
☎ Phone: (760) 520-8340
Fax: (360) 462-2752
🕒 After Hours Phone: (760) 520-8340
🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

D2. Directorio de atención primaria

NEIGHBORHOOD

HEALTHCARE VALLEY PARKWAY,

Provider ID: 206271

NPI: 1720264641


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE VALLEY PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900
Fax: (360) 462-2748

 After Hours Phone: (760)
737-6900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

W 9:00AM-5:00PM

TH-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD

HEALTHCARE VALLEY PARKWAY,

Provider ID: 206271

NPI: 1720264641


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE VALLEY PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900
Fax: (360) 462-2748

 After Hours Phone: (760)
737-6900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

W 9:00AM-5:00PM

TH-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH ESCONDIDO FAMILY

MEDICINE,

Provider ID: 588941

NPI: 1801438239

 Provider English Spoken: Y
Cultural Competency: N


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

ESCONDIDO FAMILY

MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100
Fax: (760) 745-7847

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

FQHC

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE,

Provider ID: 588941

NPI: 1801438239


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

ESCONDIDO FAMILY MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100
Fax: (760) 745-7847

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

AGUERO, AMETHYST

Provider ID: 652372

Provider Gender: Female

License Number: 20A19473

NPI: 1568021913

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

D2. Directorio de atención primaria

ESCONDIDO FAMILY HEALTH CENTER

128 N BROADWAY
ESCONDIDO, CA 92025
Phone: (760) 546-2858
After Hours Phone: (760) 546-2858
Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

AGUERO, AMETHYST

Provider ID: 652372
Provider Gender: Female
License Number: 20A19473
NPI: 1568021913

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

ESCONDIDO FAMILY HEALTH CENTER

128 N BROADWAY
ESCONDIDO, CA 92025
Phone: (760) 546-2858
After Hours Phone: (760) 546-2858
Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

CARRERA, JORGE

Provider ID: 588941
Provider Gender: Male
License Number: G58033
NPI: 1184728586

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

CARRERA, JORGE

Provider ID: 588941
Provider Gender: Male
License Number: G58033
NPI: 1184728586

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

CHEN, MARGARET

Provider ID: 206270
Provider Gender: Female
License Number: A61751
NPI: 1659305084

Provider English Spoken: Y
Provider Language(s)
Spoken: Greek, Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO



460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100

D2. Directorio de atención primaria

 After Hours Phone: (760) 520-8100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

INTERNAL MEDICINE

CHEN, MARGARET





Provider ID: 206270
Provider Gender: Female
License Number: A61751
NPI: 1659305084
 Provider English Spoken: Y
 Provider Language(s) Spoken: Greek, Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760) 520-8100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

INTERNAL MEDICINE


CHEN, MARGARET

Provider ID: 235296
Provider Gender: Female
NPI: 1659305084
 Provider English Spoken: Y
 Provider Language(s) Spoken: Greek, Spanish
Cultural Competency: N
Board Certified Specialty: No
Community Care IPA LLC
MARGARET K CHEN





 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
Fax: (360) 462-2745
 After Hours Phone: (760) 520-8100
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

INTERNAL MEDICINE

VETTICADEN, SANTOSH

Provider ID: 206270
Provider Gender: Male
License Number: C53062
NPI: 1679102461
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO

 460 N ELM ST

ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760) 520-8100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

INTERNAL MEDICINE

VETTICADEN, SANTOSH

Provider ID: 206270
Provider Gender: Male
License Number: C53062
NPI: 1679102461
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760) 520-8100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

D2. Directorio de atención primaria

PEDIATRICS

AGUILAR, EDITA

Provider ID: 206266

Provider Gender: Female

License Number: A56054

NPI: 1467407411

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


NEIGHBORHOOD


HEALTHCARE PEDS AND

PRENATAL

 425 N DATE ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8340

 After Hours Phone: (760)
520-8340


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

AGUILAR, EDITA

Provider ID: 424775

Provider Gender: Female

License Number: A56054

NPI: 1467407411

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


NEIGHBORHOOD


HEALTHCARE PEDIATRICS

AND PRENATAL

 426 N DATE ST

ESCONDIDO, CA 92025

 Phone: (760) 690-5900

 After Hours Phone: (760)
690-5900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

AGUILAR, EDITA

Provider ID: 206266

Provider Gender: Female

License Number: A56054

NPI: 1467407411

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


NEIGHBORHOOD


HEALTHCARE PEDS AND

PRENATAL

 425 N DATE ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8340

 After Hours Phone: (760)
520-8340

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

AGUILAR, EDITA

Provider ID: 424775

Provider Gender: Female

License Number: A56054

NPI: 1467407411

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


NEIGHBORHOOD


HEALTHCARE PEDIATRICS

AND PRENATAL

 426 N DATE ST

ESCONDIDO, CA 92025

 Phone: (760) 690-5900

 After Hours Phone: (760)
690-5900


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

ALDANA, NANCY

Provider ID: 424775

Provider Gender: Female

License Number: A62467

NPI: 1558371963

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish






Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, RADY

D2. Directorio de atención primaria






CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL

 426 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8340
 After Hours Phone: (760)
520-8340
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS





ALDANA, NANCY


Provider ID: 424775
Provider Gender: Female
License Number: A62467
NPI: 1558371963
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE PEDIATRICS

AND PRENATAL
 426 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8340
 After Hours Phone: (760)
520-8340
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS






CHOW, BYRON

Provider ID: 206270
Provider Gender: Male
License Number: A78116
NPI: 1619907607
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

CHOW, BYRON


Provider ID: 206270
Provider Gender: Male
License Number: A78116
NPI: 1619907607
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER



PEDIATRICS


COHEN, CARA


Provider ID: 661879
Provider Gender: Female
NPI: 1215021274
 Provider English Spoken: Y

D2. Directorio de atención primaria


 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Board Certified Specialty: No
Rady Childrens Health Network
CARA E COHEN

 625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025
 *Phone: (760) 746-2641*
Fax: (760) 740-2178

 *After Hours Phone: (760) 746-2641*

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19


American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM


PEDIATRICS


COULLAHAN, JESSICA

Provider ID: 661887
Provider Gender: Female
NPI: 1750579108


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Board Certified Specialty: No
Rady Childrens Health Network

JESSICA M COULLAHAN
 625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025
 *Phone: (760) 746-2641*
Fax: (760) 740-2178

 *After Hours Phone: (760) 746-2641*

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19



American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 8:30AM-0:00PM





PEDIATRICS


CURET, ZULMA

Provider ID: 206270
Provider Gender: Female
License Number: A119661
NPI: 1841561107

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
IHP of Southern Cal-PHP NEIGHBORHOOD HEALTHCARE ESCONDIDO



 460 N ELM ST
ESCONDIDO, CA 92025
 *Phone: (760) 520-8100*
 *After Hours Phone: (760) 520-8100*
 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*






PEDIATRICS

CURET, ZULMA

Provider ID: 206270
Provider Gender: Female
License Number: A119661
NPI: 1841561107

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP NEIGHBORHOOD HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025
 *Phone: (760) 520-8100*
 *After Hours Phone: (760) 520-8100*
 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*


PEDIATRICS


DOSHI, NEELIMA

Provider ID: 424775
Provider Gender: Female
License Number: A67626

D2. Directorio de atención primaria

NPI: 1417921578

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE PEDIATRICS
AND PRENATAL

 426 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 690-5900

 After Hours Phone: (760)
690-5900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


DOSHI, NEELIMA


Provider ID: 424775

Provider Gender: Female

License Number: A67626

NPI: 1417921578

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE PEDIATRICS
AND PRENATAL

 426 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 690-5900

 After Hours Phone: (760)
690-5900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


PEDIATRICS


DOSHI, NEELIMA

Provider ID: 640252

Provider Gender: Female

NPI: 1417921578

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

Community Care IPA LLC

NEELIMA G DOSHI

 426 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8340

Fax: (360) 462-2752

 After Hours Phone: (760)
520-8340

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

IBRAHIM, MAGED

Provider ID: 419344

Provider Gender: Male

License Number: C141296

NPI: 1306852934

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: POMONA
VALLEY HOSP MED CTR, SAN

ANTONIO COMM HOSP

Board Certified Specialty: No


BORREGO COMMUNITY


HEALTH FOUNDTION

CENTRO MEDICO

ESCONDIDO

 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

 Phone: (760) 871-0606

 After Hours Phone: (760)
871-0606

 Website: N

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: SU 8:00AM-0:00PM

M-F 8:00AM-8:00PM

SA 8:00AM-0:00PM

PEDIATRICS

IBRAHIM, MAGED

D2. Directorio de atención primaria

Provider ID: 419344

Provider Gender: Male

License Number: C141296

NPI: 1306852934

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: POMONA
VALLEY HOSP MED CTR, SAN
ANTONIO COMM HOSP

Board Certified Specialty: No
BORREGO COMMUNITY
HEALTH FOUNDTION
CENTRO MEDICO
ESCONDIDO

1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

Phone: (760) 871-0606

After Hours Phone: (760)
871-0606

Website: N

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 8:00AM-0:00PM

M-F 8:00AM-8:00PM

SA 8:00AM-0:00PM

PEDIATRICS

MALEKSHAMRAN, KEYVAN

Provider ID: 419344

Provider Gender: Male

License Number: A94845

NPI: 1952466112

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Persian,
Spanish

Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL,
DESERT REGIONAL MED CTR

Board Certified Specialty: No
BORREGO COMMUNITY
HEALTH FOUNDTION
CENTRO MEDICO
ESCONDIDO

1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

Phone: (760) 871-0606

After Hours Phone: (760)
871-0606

Website: N

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

MALEKSHAMRAN, KEYVAN

Provider ID: 419344

Provider Gender: Male

License Number: A94845

NPI: 1952466112

Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Persian,
Spanish

Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL,
DESERT REGIONAL MED CTR

Board Certified Specialty: No
BORREGO COMMUNITY
HEALTH FOUNDTION
CENTRO MEDICO
ESCONDIDO

1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

Phone: (760) 871-0606

After Hours Phone: (760)
871-0606

Website: N

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SONG, JOYCE

Provider ID: 661892

Provider Gender: Female

NPI: 1417510694

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Rady Childrens Health Network
JOYCE Y SONG

625 CITRACADO PKWY STE
100

ESCONDIDO, CA 92025

Phone: (760) 746-2641

Fax: (760) 740-2178

After Hours Phone: (760)
746-2641

Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

D2. Directorio de atención primaria



N






 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

STRAZICICH, KARLA

Provider ID: 206270
Provider Gender: Female
License Number: A45413
NPI: 1134154958

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No IHP of Southern Cal-PHP NEIGHBORHOOD HEALTHCARE ESCONDIDO


 460 N ELM ST
ESCONDIDO, CA 92025
 *Phone: (760) 520-8100*
 *After Hours Phone: (760) 520-8100*
 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*





PEDIATRICS

STRAZICICH, KARLA

Provider ID: 206270
Provider Gender: Female
License Number: A45413
NPI: 1134154958

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No IHP of Southern Cal-PHP NEIGHBORHOOD HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025
 *Phone: (760) 520-8100*
 *After Hours Phone: (760) 520-8100*
 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*



PEDIATRICS

TELLECHEA-SANCHEZ,



SELMIRA

Provider ID: 424775
Provider Gender: Female
License Number: G83438
NPI: 1730288747

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

 426 N DATE ST
ESCONDIDO, CA 92025
 *Phone: (760) 690-5900*

 *After Hours Phone: (760) 690-5900*



 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*






PEDIATRICS

TELLECHEA-SANCHEZ,

SELMIRA

Provider ID: 424775
Provider Gender: Female
License Number: G83438
NPI: 1730288747

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

 426 N DATE ST
ESCONDIDO, CA 92025
 *Phone: (760) 690-5900*
 *After Hours Phone: (760) 690-5900*
 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

THIRUNAGARI, HARRSHA

D2. Directorio de atención primaria

Provider ID: 419344
 Provider Gender: Female
 License Number: A64928
 NPI: 1447472212
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Hindi, Spanish,
 Telugu
 Cultural Competency: N
 Hospital Affiliation: EL CENTRO
 REGIONAL MEDICAL CENTER,
 RIVERSIDE COMMUNITY
 HOSP, Parkview Community
 Hospital Medical Center
 Board Certified Specialty: No
 BORREGO COMMUNITY
 HEALTH FOUNDTION
 CENTRO MEDICO
 ESCONDIDO
 1121 E WASHINGTON AVE
 ESCONDIDO, CA 92025
 Phone: (760) 871-0606
 After Hours Phone: (760)
 871-0606
 Website: N
 Email:
 iselaochoa@borregohealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: SU 8:00AM-0:00PM
 M-F 8:00AM-8:00PM
 SA 8:00AM-0:00PM

PEDIATRICS

THIRUNAGARI, HARRSHA
 Provider ID: 419344
 Provider Gender: Female

License Number: A64928
 NPI: 1447472212
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Hindi, Spanish,
 Telugu
 Cultural Competency: N
 Hospital Affiliation: EL CENTRO
 REGIONAL MEDICAL CENTER,
 RIVERSIDE COMMUNITY
 HOSP, Parkview Community
 Hospital Medical Center
 Board Certified Specialty: No
 BORREGO COMMUNITY
 HEALTH FOUNDTION
 CENTRO MEDICO
 ESCONDIDO
 1121 E WASHINGTON AVE
 ESCONDIDO, CA 92025
 Phone: (760) 871-0606
 After Hours Phone: (760)
 871-0606
 Website: N
 Email:
 iselaochoa@borregohealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: SU 8:00AM-0:00PM
 M-F 8:00AM-8:00PM
 SA 8:00AM-0:00PM

PEDIATRICS

ZAND, FARIBA

Provider ID: 87737
 Provider Gender: Female
 NPI: 1356373674
 Provider English Spoken: Y

Provider Language(s)
 Spoken: Farsi, Persian,
 Spanish
 Cultural Competency: N
 Hospital Affiliation: MERCY
 GENERAL HOSPITAL, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, SCRIPPS MERCY
 HOSPITAL, SCRIPPS MERCY
 HOSPITAL CHULA VISTA, UCSD
 MEDICAL CTR
 Board Certified Specialty: No
 Rady Childrens Health Network
 FARIBA ZAND
 240 W MISSION AVE STE A
 ESCONDIDO, CA 92025
 Phone: (760) 747-5400
 Fax: (760) 747-2286
 After Hours Phone: (760)
 747-5400
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM



PHYSICIANS ASSISTANT

BAISLEY, SHAWN

Provider ID: 588941
 Provider Gender: Male
 License Number: PA52347
 NPI: 1376936120
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 IHP of Southern Cal-PHP
 SAN YSIDRO HEALTH
 ESCONDIDO FAMILY

D2. Directorio de atención primaria

MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT


BAISLEY, SHAWN

Provider ID: 588941

Provider Gender: Male

License Number: PA52347

NPI: 1376936120

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 588941

Provider Gender: Female

License Number: PA20490

NPI: 1619100237

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE


 704 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 588941

Provider Gender: Female




License Number: PA20490

NPI: 1619100237

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619)

662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PODIATRIST

NEGRON, RICARDO


Provider ID: 206271

Provider Gender: Male

License Number: DPM5260

NPI: 1932548393

 Provider English Spoken: Y



 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: Providence
St Joseph Hospital

Board Certified Specialty: No
IHP of Southern Cal-PHP

NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None






American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PODIATRIST

NEGRON, RICARDO

D2. Directorio de atención primaria

Provider ID: 206271
Provider Gender: Male
License Number: DPM5260
NPI: 1932548393
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Providence
St Joseph Hospital
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY
 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER






FALLBROOK

CERTIFIED NURSE

PRACTITIONER

EVERETT, ELIZABETH




Provider ID: 624122
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Sign Language
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760)
723-6200
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

EVERETT, ELIZABETH




Provider ID: 624122
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Sign Language
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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Medi-Cal Open Panel: Yes



Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:00AM-4:00PM
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CERTIFIED NURSE

PRACTITIONER

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License Number: NP95025094
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 Provider English Spoken: Y
 Provider Language(s)
Spoken: Sign Language
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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 Accessibility: CONTACT
PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

CERTIFIED NURSE

D2. Directorio de atención primaria

PRACTITIONER

EVERETT, ELIZABETH

Provider ID: 624122

Provider Gender: Female

License Number: NP95025094

NPI: 1942952767

Provider English Spoken: Y

Provider Language(s)
Spoken: Sign Language


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

EVERETT, ELIZABETH

Provider ID: 624122

Provider Gender: Female

License Number: NP95025094

NPI: 1942952767

Provider English Spoken: Y

Provider Language(s)
Spoken: Sign Language


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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Cultural Competency: N


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Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 624122

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR


Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

D2. Directorio de atención primaria

KELLEHER, BRIDGET

Provider ID: 624122

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

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 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

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Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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CERTIFIED NURSE

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KELLEHER, BRIDGET

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Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

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Cultural Competency: N


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Board Certified Specialty: No
IHP of Southern Cal-PHP

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CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET


Provider ID: 624122

Provider Gender: Female

License Number: NP95003447

D2. Directorio de atención primaria

NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


RACKHAM, KELLY

Provider ID: 624122

Provider Gender: Male

License Number: NP95015717

NPI: 1801497284

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)

723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER


RACKHAM, KELLY

Provider ID: 624122

Provider Gender: Male

License Number: NP95015717

NPI: 1801497284

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

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Medi-Cal Open Panel: Yes

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W-TH 8:00AM-5:00PM

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Board Certified Specialty: No
IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes

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American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

RACKHAM, KELLY

Provider ID: 624122


Provider Gender: Male

License Number: NP95015717

NPI: 1801497284


 Provider English Spoken: Y

D2. Directorio de atención primaria

 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028
 *Phone: (760) 723-6200*
 *After Hours Phone: (760)
723-6200*
 *Website: www.vistacommunityclinic.org*



Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
*American Sign Language (ASL):
N*




 *Accessibility: CONTACT
PROVIDER*
*Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM*


CERTIFIED NURSE PRACTITIONER

RACKHAM, KELLY


Provider ID: 624122
Provider Gender: Male
License Number: NP95015717
NPI: 1801497284

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028
 *Phone: (760) 723-6200*
 *After Hours Phone: (760)
723-6200*

 *Website: www.vistacommunityclinic.org* *W-TH 8:00AM-5:00PM*



Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
*American Sign Language (ASL):
N*





 *Accessibility: CONTACT
PROVIDER*
*Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM*

CERTIFIED NURSE PRACTITIONER


RACKHAM, KELLY

Provider ID: 624122
Provider Gender: Male
License Number: NP95015717
NPI: 1801497284

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028
 *Phone: (760) 723-6200*
 *After Hours Phone: (760)
723-6200*
 *Website: www.vistacommunityclinic.org*


Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*
*Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM*


FQHC


FALLBROOK FAMILY HLTH CTR,


Provider ID: 183910
NPI: 1982756086

 *Provider English Spoken: Y*
Cultural Competency: N
IHP of Southern Cal-PHP
**FALLBROOK FAMILY HLTH
CTR**


 1328 S MISSION RD
FALLBROOK, CA 92028

 *Phone: (760) 451-4720*
Fax: (760) 451-4700

 *After Hours Phone: (760)
451-4720*

 *Website: N/A*
Email: a.escobeclo@chsica.org


Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*
*Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM*

FQHC

FALLBROOK FAMILY HLTH CTR,

Provider ID: 183910
NPI: 1982756086

 *Provider English Spoken: Y*
Cultural Competency: N
IHP of Southern Cal-PHP
**FALLBROOK FAMILY HLTH
CTR**

 1328 S MISSION RD
FALLBROOK, CA 92028

D2. Directorio de atención primaria



 Phone: (760) 451-4720
 Fax: (760) 451-4700
 After Hours Phone: (760) 451-4720
 Website: N/A
Email: a.escobedo@chsica.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

FQHC




VISTA COMMUNITY CLINIC,


Provider ID: 624122
NPI: 1649662719
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 624122
NPI: 1316501562
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM






FQHC


VISTA COMMUNITY CLINIC,
Provider ID: 624122
NPI: 1851300123
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

FQHC



VISTA COMMUNITY CLINIC,
Provider ID: 624122
NPI: 1316501562

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 321 E ALVARADO ST
FALLBROOK, CA 92028
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 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
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 Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
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FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 624122
NPI: 1649662719

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 321 E ALVARADO ST

D2. Directorio de atención primaria

FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
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FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 624122
NPI: 1851300123
Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
321 E ALVARADO ST
FALLBROOK, CA 92028
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Medi-Cal Open Panel: Yes
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American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

PEDIATRICS

DELRE, AMANDA
Provider ID: 238960
Provider Gender: Female
NPI: 1548499957
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
Rady Childrens Health Network
AMANDA M DELRE
1107 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-0070
Fax: (760) 451-1499
After Hours Phone: (760) 451-0070
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ROBINSON, DAISY
Provider ID: 230579
Provider Gender: Female
NPI: 1659389740
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
Rady Childrens Health Network

DAISY A ROBINSON
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
Fax: (760) 414-3892
After Hours Phone: (760) 723-6200
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-4:00PM

PEDIATRICS

VU, WENDY

Provider ID: 183910
Provider Gender: Female
License Number: A169529
NPI: 1508148370
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
FALLBROOK FAMILY HLTH CTR
1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4770
After Hours Phone: (760) 451-4770
Website: N/A
Email: a.escobeclo@chsica.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-7:30PM

D2. Directorio de atención primaria

SA 8:00AM-5:00PM

PEDIATRICS


VU, WENDY

Provider ID: 183910

Provider Gender: Female

License Number: A169529

NPI: 1508148370

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


FALLBROOK FAMILY HLTH

CTR

 1328 S MISSION RD

FALLBROOK, CA 92028

 Phone: (760) 451-4770

 After Hours Phone: (760)
451-4770

 Website: N/A

Email: a.escobedo@chsica.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-7:30PM

SA 8:00AM-5:00PM

IMPERIAL BEACH

FAMILY PRACTICE

JOHNSON, DANIEL


Provider ID: 179678

Provider Gender: Male

License Number: 20A9393

NPI: 1245311216

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No


IHP of Southern Cal-PHP


IMPERIAL BEACH HEALTH

CENTER

 949 PALM AVE

IMPERIAL BEACH, CA 91932

 Phone: (619) 429-3733

 After Hours Phone: (619)
429-3733

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-9:00PM

F 8:30AM-5:00PM

SA 8:30AM-2:00PM

FAMILY PRACTICE


JOHNSON, DANIEL

Provider ID: 179678

Provider Gender: Male

License Number: 20A9393

NPI: 1245311216

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP

IMPERIAL BEACH HEALTH
CENTER

 949 PALM AVE

IMPERIAL BEACH, CA 91932

 Phone: (619) 429-3733

 After Hours Phone: (619)
429-3733

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-9:00PM

F 8:30AM-5:00PM

SA 8:30AM-2:00PM

FQHC

**IMPERIAL BEACH HEALTH
CENTER,**

Provider ID: 179678

NPI: 1790718351

 Provider English Spoken: Y

Cultural Competency: N


IHP of Southern Cal-PHP

IMPERIAL BEACH HEALTH


CENTER

 949 PALM AVE

IMPERIAL BEACH, CA 91932

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

D2. Directorio de atención primaria

FQHC

IMPERIAL BEACH HEALTH CENTER,

Provider ID: 179678


NPI: 1790718351

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

IMPERIAL BEACH HEALTH CENTER

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

RYAN, DANA

Provider ID: 179678

Provider Gender: Female

License Number: A66830


NPI: 1780609990

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

IMPERIAL BEACH HEALTH CENTER

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 Phone: (619) 429-3733

 After Hours Phone: (619)
429-3733

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

RYAN, DANA

Provider ID: 179678

Provider Gender: Female

License Number: A66830


NPI: 1780609990


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

IMPERIAL BEACH HEALTH CENTER

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 Phone: (619) 429-3733

 After Hours Phone: (619)
429-3733

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

DOKICH, SRETENKA


Provider ID: 179678

Provider Gender: Female

License Number: A51447

NPI: 1154409035

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Serbian, Spanish
Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
IHP of Southern Cal-PHP

IMPERIAL BEACH HEALTH CENTER

 949 PALM AVE
IMPERIAL BEACH, CA 91932


 Phone: (619) 429-3733

 After Hours Phone: (619)
429-3733

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

DOKICH, SRETENKA

Provider ID: 179678

Provider Gender: Female

License Number: A51447

NPI: 1154409035

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Serbian, Spanish
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP

IMPERIAL BEACH HEALTH CENTER

D2. Directorio de atención primaria

949 PALM AVE
IMPERIAL BEACH, CA 91932
Phone: (619) 429-3733
After Hours Phone: (619)
429-3733
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

LA JOLLA

PEDIATRICS

GAINOR, GRETCHEN

Provider ID: 537752
Provider Gender: Female
NPI: 1174504757
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Rady Childrens Health Network
GRETCHEN C GAINOR

7300 GIRARD AVE STE 106
LA JOLLA, CA 92037
Phone: (858) 459-4351
Fax: (858) 459-4399
After Hours Phone: (858)
459-4351
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

GANDHI, SHEETAL

Provider ID: 282029
Provider Gender: Female
NPI: 1700858859
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
SHEETAL N GANDHI

4150 REGENTS PARK ROW
STE 355
LA JOLLA, CA 92037
Phone: (858) 457-2043
Fax: (858) 457-2092
After Hours Phone: (858)
457-2043
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

HUNTER, WENDY

Provider ID: 377597
Provider Gender: Female
NPI: 1053515551
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
Rady Childrens Health Network
WENDY L HUNTER

7300 GIRARD AVE STE 106
LA JOLLA, CA 92037
Phone: (858) 459-4351
Fax: (858) 459-4399
After Hours Phone: (858)
459-4351
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

PARSONS, GENEVIEVE

Provider ID: 24122
Provider Gender: Female
NPI: 1699700914
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
GENEVIEVE N PARSONS
7300 GIRARD AVE STE 106
LA JOLLA, CA 92037
Phone: (858) 459-4351
Fax: (858) 459-4399

D2. Directorio de atención primaria

 After Hours Phone: (858) 459-4351

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ROBERTS, KENDALL

Provider ID: 48933

Provider Gender: Male

NPI: 1265762033

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No

Rady Childrens Health Network
KENDALL R ROBERTS

 4150 REGENTS PARK ROW STE 355

LA JOLLA, CA 92037

 Phone: (858) 457-2043

Fax: (858) 457-2092


 After Hours Phone: (858) 457-2043

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

TUNG, VIVIAN

Provider ID: 11291

Provider Gender: Female


NPI: 1285665133


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network
VIVIAN V TUNG

 7300 GIRARD AVE STE 106
LA JOLLA, CA 92037

 Phone: (858) 459-4351

Fax: (858) 459-4399

 After Hours Phone: (858) 459-4351

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

LA MESA

CERTIFIED NURSE

PRACTITIONER

WARD, KATHERINE

Provider ID: 613881

Provider Gender: Female

NPI: 1477223576

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

Rady Childrens Health Network

KATHERINE J WARD

 8881 FLETCHER PKWY STE 200

LA MESA, CA 91942

 Phone: (619) 464-6434

Fax: (619) 464-5109

 After Hours Phone: (619) 464-6434

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 11:30AM-3:30PM

CERTIFIED NURSE

PRACTITIONER

WARD, KATHERINE

Provider ID: 613887

Provider Gender: Female

NPI: 1477223576


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

Rady Childrens Health Network
KATHERINE J WARD

 8881 FLETCHER PKWY STE 205

LA MESA, CA 91942

 Phone: (619) 464-6434

Fax: (619) 464-5109

 After Hours Phone: (619) 464-6434

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT

D2. Directorio de atención primaria

PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 11:30AM-3:30PM

CERTIFIED NURSE **PRACTITIONER**


WARD, KATHERINE


Provider ID: 480827
Provider Gender: Female
License Number: NP95017921
NPI: 1477223576

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

BORREGO COMMUNITY
HEALTH FOUNDTION
LA MESA PEDIATRICS

 8881 FLETCHER PKWY STE 200
LA MESA, CA 91942
 *Phone: (616) 464-6434*
 *After Hours Phone: (616) 464-6434*

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


CERTIFIED NURSE **PRACTITIONER**



WARD, KATHERINE


Provider ID: 480827
Provider Gender: Female
License Number: NP95017921
NPI: 1477223576

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

BORREGO COMMUNITY
HEALTH FOUNDTION
LA MESA PEDIATRICS

 8881 FLETCHER PKWY STE 200
LA MESA, CA 91942

 *Phone: (616) 464-6434*
 *After Hours Phone: (616) 464-6434*

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

PATEL, HEMANSHU

Provider ID: 664660
Provider Gender: Male
NPI: 1255777439


Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: VICTOR VALLEY COMMUNITY HOSP,

BARSTOW COMMUNITY HOSPITAL, DESERT VALLEY HOSPITAL, Providence St Mary Medical Center, VICTOR VALLEY GLOBAL MED CTR

Board Certified Specialty: No
Community Care IPA LLC
HEMANSHU R PATEL

 7339 EL CAJON BLVD STE 1
LA MESA, CA 91942
 *Phone: (619) 698-0606*
Fax: (619) 332-5149

 *After Hours Phone: (619) 698-0606*

 *Website: N/A*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 9:00AM-5:30PM

FQHC

LA MESA PEDIATRICS,


Provider ID: 480827

NPI: 1033759311


Provider English Spoken: Y
Cultural Competency: N

BORREGO COMMUNITY
HEALTH FOUNDTION
LA MESA PEDIATRICS


 8881 FLETCHER PKWY STE 200

LA MESA, CA 91942
 *Phone: (619) 464-6434*
Fax: (619) 464-5109

 *After Hours Phone: (619) 464-6434*

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

FQHC

LA MESA PEDIATRICS,

Provider ID: 480827

NPI: 1033759311

Provider English Spoken: Y
Cultural Competency: N

BORREGO COMMUNITY
HEALTH FOUNDTION

D2. Directorio de atención primaria

LA MESA PEDIATRICS

8881 FLETCHER PKWY STE 200

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619) 464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

BULLOCH, EDGAR

Provider ID: 480827

Provider Gender: Male

License Number: A113241

NPI: 1508046376

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

Sharp Grossmont Hospital

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

LA MESA PEDIATRICS

8881 FLETCHER PKWY STE 200

LA MESA, CA 91942

Phone: (619) 464-6434

After Hours Phone: (619) 464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BULLOCH, EDGAR

Provider ID: 480827

Provider Gender: Male

License Number: A113241

NPI: 1508046376

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

Sharp Grossmont Hospital

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

LA MESA PEDIATRICS

8881 FLETCHER PKWY STE 200

LA MESA, CA 91942

Phone: (619) 464-6434

After Hours Phone: (619) 464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

PAPA, RHETT

Provider ID: 480827

Provider Gender: Male

License Number: 20A11733

NPI: 1063642312

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

LA MESA PEDIATRICS

8881 FLETCHER PKWY STE 200

LA MESA, CA 91942

Phone: (619) 464-6434

After Hours Phone: (619) 464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

PAPA, RHETT

Provider ID: 480827

Provider Gender: Male

License Number: 20A11733

NPI: 1063642312

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

D2. Directorio de atención primaria

LA MESA PEDIATRICS

8881 FLETCHER PKWY STE 200

LA MESA, CA 91942

Phone: (619) 464-6434

After Hours Phone: (619) 464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

PEDIATRICS

ALSHEIKH, HUDA

Provider ID: 451191

Provider Gender: Female

NPI: 1487746855

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

Rady Childrens Health Network

HUDA Y ALSHEIKH

8881 FLETCHER PKWY STE 205

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619) 464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TU 7:30AM-6:00PM

W-F 7:30AM-6:30PM

SA 8:30AM-5:00PM

PEDIATRICS

ALSHEIKH, HUDA

Provider ID: 435468

Provider Gender: Female

NPI: 1487746855

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: Yes

Rady Childrens Health Network

HUDA Y ALSHEIKH

8881 FLETCHER PKWY STE 200

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619) 464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TU 7:30AM-6:00PM

W-F 7:30AM-6:30PM

SA 8:30AM-5:00PM

PEDIATRICS

ALSHEIKH, HUDA

Provider ID: 480827

Provider Gender: Female

License Number: C133872

NPI: 1487746855

Provider English Spoken: Y

Provider Language(s)

Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

LA MESA PEDIATRICS

8881 FLETCHER PKWY STE 200

LA MESA, CA 91942

Phone: (619) 464-6434

After Hours Phone: (619) 464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

PEDIATRICS

ALSHEIKH, HUDA

Provider ID: 480827

Provider Gender: Female

License Number: C133872

NPI: 1487746855

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

LA MESA PEDIATRICS

8881 FLETCHER PKWY STE 200

LA MESA, CA 91942

Phone: (619) 464-6434

After Hours Phone: (619) 464-6434

Website: N/A


Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\21

American Sign Language (ASL): Provider Gender: Female

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

CLAY, CORRIE

Provider ID: 536652

Provider Gender: Female

NPI: 1437207750


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS

Board Certified Specialty: No
Rady Childrens Health Network
CORRIE T CLAY

 8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

 Phone: (619) 464-6434

Fax: (619) 464-5109

 After Hours Phone: (619)
464-6434


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 11:30AM-3:30PM

PEDIATRICS

EMPIE, KRISTEN

Provider ID: 648987

Provider Gender: Female


NPI: 1093343105

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Rady Childrens Health Network
KRISTEN L EMPIE

 8881 FLETCHER PKWY STE
205

LA MESA, CA 91942

 Phone: (619) 464-6434

Fax: (619) 464-5109

 After Hours Phone: (619)
464-6434

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 11:30AM-3:30PM

PEDIATRICS

EMPIE, KRISTEN

Provider ID: 648986

Provider Gender: Female


NPI: 1093343105

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Rady Childrens Health Network
KRISTEN L EMPIE

 8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

 Phone: (619) 464-6434

Fax: (619) 464-5109

 After Hours Phone: (619)

464-6434

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 11:30AM-3:30PM

PEDIATRICS

GIANFORTUNE, RACHEL

Provider ID: 433091

Provider Gender: Female

NPI: 1912193301

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network
RACHEL M GIANFORTUNE

 8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

 Phone: (619) 464-6434

Fax: (619) 464-5109

 After Hours Phone: (619)
464-6434

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT

D2. Directorio de atención primaria

PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GIANFORTUNE, RACHEL

Provider ID: 450501

Provider Gender: Female

NPI: 1912193301

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: RADY

*CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL*

*Board Certified Specialty: No
Rady Childrens Health Network
RACHEL M GIANFORTUNE*

*8881 FLETCHER PKWY STE
205*

LA MESA, CA 91942

Phone: (619) 464-6434

*After Hours Phone: (619)
464-6434*

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

*Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

IMUS, PAUL

Provider ID: 239590

Provider Gender: Male

NPI: 1104116680

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

*CHILDRENS HOSPITAL SAN
DIEGO, SHARP MARY BIRCH
HOSP FOR WOMEN AND
NEWBORNS, GROSSMONT
HOSPITAL*

*Board Certified Specialty: No
Rady Childrens Health Network
PAUL M IMUS*

*8881 FLETCHER PKWY STE
200*

LA MESA, CA 91942

Phone: (619) 401-0404

Fax: (619) 401-0522

*After Hours Phone: (619)
401-0404*

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

*Accessibility: CONTACT
PROVIDER*

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

MOFFATT, KYRRA

Provider ID: 275099

Provider Gender: Female

NPI: 1194922419

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: RADY

*CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS*

Board Certified Specialty: No

*Rady Childrens Health Network
KYRRA MOFFATT*

*8881 FLETCHER PKWY STE
200*

LA MESA, CA 91942

Phone: (619) 401-0404

Fax: (619) 401-0522

*After Hours Phone: (619)
401-0404*

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

*Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MOLINOS, NICOLE

Provider ID: 538098

Provider Gender: Female

NPI: 1538685524

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Board Certified Specialty: Yes

*Rady Childrens Health Network
NICOLE P MOLINOS*

*6942 UNIVERSITY AVE STE
A*

LA MESA, CA 91942

Phone: (619) 698-2184

Fax: (619) 698-2084

*After Hours Phone: (619)
698-2184*

Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):



D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 9:00AM-5:00PM


PEDIATRICS

RONQUILLO, RINA

Provider ID: 377359
Provider Gender: Female
NPI: 1407047749
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish, Tagalog*
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
RINA R RONQUILLO



 8881 FLETCHER PKWY STE 200
LA MESA, CA 91942
 *Phone: (619) 464-6434*
Fax: (619) 464-5109
 *After Hours Phone: (619) 464-6434*
 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):


N



 *Accessibility: CONTACT PROVIDER*
Hours: M-F 9:00AM-5:00PM

PEDIATRICS


SHORT, RICHARD

Provider ID: 60736
Provider Gender: Male
NPI: 1568552727
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified Specialty: Yes
Rady Childrens Health Network
RICHARD L SHORT

 8881 FLETCHER PKWY STE 200
LA MESA, CA 91942
 *Phone: (619) 464-6434*
Fax: (619) 464-5109

 *After Hours Phone: (619) 464-6434*
 *Website: N/A*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-6:00PM
SA 11:30AM-3:30PM


LAKESIDE

CHIROPRACTOR


PAGE, BIANCA

Provider ID: 353843
Provider Gender: Female
License Number: DC33688

NPI: 1649787607

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD HEALTHCARE LAKESIDE


 10039 VINE ST
LAKESIDE, CA 92040
 *Phone: (858) 218-3000*
 *After Hours Phone: (858) 218-3000*
 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

PAGE, BIANCA


Provider ID: 353843
Provider Gender: Female
License Number: DC33688
NPI: 1649787607

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD HEALTHCARE LAKESIDE

 10039 VINE ST
LAKESIDE, CA 92040
 *Phone: (858) 218-3000*
 *After Hours Phone: (858) 218-3000*
 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

D2. Directorio de atención primaria

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


FERRAILOLO, NATALIE

Provider ID: 353843
Provider Gender: Female
License Number: A152372
NPI: 1306290143


Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP NEIGHBORHOOD HEALTHCARE LAKESIDE

 10039 VINE ST
LAKESIDE, CA 92040
 Phone: (858) 218-3000
 After Hours Phone: (858) 218-3000

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM


FAMILY PRACTICE


FERRAILOLO, NATALIE

Provider ID: 353843
Provider Gender: Female
License Number: A152372
NPI: 1306290143


Provider English Spoken: Y

Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP NEIGHBORHOOD HEALTHCARE LAKESIDE

 10039 VINE ST
LAKESIDE, CA 92040
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 After Hours Phone: (858) 218-3000

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM



FAMILY PRACTICE

GUNPAT, JOSHUA


Provider ID: 673860
Provider Gender: Male
NPI: 1114458775

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No


Community Care IPA LLC
JOSHUA V GUNPAT

 10039 VINE ST
LAKESIDE, CA 92040
 Phone: (619) 390-9975
Fax: (360) 462-2744

 After Hours Phone: (619) 390-9975

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM




FAMILY PRACTICE

LIU-BARBARO, DOROTHY

Provider ID: 353843
Provider Gender: Female
License Number: A115342
NPI: 1851602270


Provider English Spoken: Y
 Provider Language(s) Spoken: Chinese, Mandarin, Spanish

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP NEIGHBORHOOD HEALTHCARE LAKESIDE

 10039 VINE ST
LAKESIDE, CA 92040
 Phone: (619) 440-2751
 After Hours Phone: (619) 440-2751

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LIU-BARBARO, DOROTHY

Provider ID: 353843
Provider Gender: Female
License Number: A115342
NPI: 1851602270

Provider English Spoken: Y
 Provider Language(s)

D2. Directorio de atención primaria

Spoken: Chinese, Mandarin, Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE LAKESIDE

10039 VINE ST
LAKESIDE, CA 92040

Phone: (619) 440-2751

After Hours Phone: (619) 440-2751

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD

HEALTHCARE LAKESIDE,

Provider ID: 353843

NPI: 1932384120

Provider English Spoken: Y

Cultural Competency: N

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE LAKESIDE

10039 VINE ST
LAKESIDE, CA 92040

Phone: (858) 218-3000

Fax: (360) 462-2744

After Hours Phone: (858) 218-3000

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD

HEALTHCARE LAKESIDE,

Provider ID: 353843

NPI: 1932384120

Provider English Spoken: Y

Cultural Competency: N

IHP of Southern Cal-PHP

NEIGHBORHOOD

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Fax: (360) 462-2744

After Hours Phone: (858) 218-3000

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

GENERAL PRACTICE

MANNINO, ELIZABETH

Provider ID: 353843

Provider Gender: Female

License Number: A43914

NPI: 1548290463

Provider English Spoken: Y

Provider Language(s)

Spoken: Italian, Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE LAKESIDE

10039 VINE ST
LAKESIDE, CA 92040

Phone: (858) 218-3000

After Hours Phone: (858) 218-3000

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

GENERAL PRACTICE

MANNINO, ELIZABETH

Provider ID: 353843

Provider Gender: Female

License Number: A43914

NPI: 1548290463

Provider English Spoken: Y

Provider Language(s)
Spoken: Italian, Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE LAKESIDE

10039 VINE ST
LAKESIDE, CA 92040

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After Hours Phone: (858) 218-3000

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

MCFARLAND, NATHAN

Provider ID: 353843

Provider Gender: Male

License Number: A75411

NPI: 1265462196


Provider English Spoken: Y


Provider Language(s)
Spoken: Italian, Spanish
Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP
NEIGHBORHOOD

HEALTHCARE LAKESIDE

 10039 VINE ST
LAKESIDE, CA 92040

 Phone: (858) 218-3000


 After Hours Phone: (858)
218-3000

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

MCFARLAND, NATHAN

Provider ID: 353843

Provider Gender: Male

License Number: A75411

NPI: 1265462196

Provider English Spoken: Y


Provider Language(s)
Spoken: Italian, Spanish
Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP
NEIGHBORHOOD

HEALTHCARE LAKESIDE

 10039 VINE ST
LAKESIDE, CA 92040

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

LEMON GROVE

CERTIFIED NURSE

PRACTITIONER

ALLEN, KATHERINE

Provider ID: 419139

Provider Gender: Female

License Number: NP95009933


NPI: 1831557024


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

ALLEN, KATHERINE

Provider ID: 419139

Provider Gender: Female

License Number: NP95009933


NPI: 1831557024


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
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 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

ARVIZU, PALOMA

Provider ID: 419139

Provider Gender: Female

D2. Directorio de atención primaria

License Number: NP95008782

NPI: 1689139396

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

ARVIZU, PALOMA

Provider ID: 419139

Provider Gender: Female

License Number: NP95008782

NPI: 1689139396

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY

HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

SMITH, SHARON

Provider ID: 419139

Provider Gender: Female

License Number: RN428876

NPI: 1780603597

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY

HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

SMITH, SHARON

Provider ID: 419139

Provider Gender: Female

License Number: NP15444

NPI: 1780603597

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

SMITH, SHARON



Provider ID: 419139

Provider Gender: Female

License Number: RN428876

NPI: 1780603597

D2. Directorio de atención primaria


 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N

Board Certified Specialty: No
*Family Health Centers of San
Diego*

*LEMON GROVE FAMILY
HEALTH CENTER*

 *7592 BROADWAY
LEMON GROVE, CA 91945*

 *Phone: (619) 515-2550*

 *After Hours Phone: (619)
515-2550*

 *Website: N/A*


Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

CERTIFIED NURSE

PRACTITIONER


SMITH, SHARON

Provider ID: 419139

Provider Gender: Female

License Number: NP15444

NPI: 1780603597

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N

Board Certified Specialty: No
*Family Health Centers of San
Diego*

*LEMON GROVE FAMILY
HEALTH CENTER*

 *7592 BROADWAY
LEMON GROVE, CA 91945*

 *Phone: (619) 515-2550*

 *After Hours Phone: (619)
515-2550*

 *Website: N/A*

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

CERTIFIED NURSE

PRACTITIONER


TOTH, JESSICA

Provider ID: 419139

Provider Gender: Female

License Number: NP95001050

NPI: 1578993788


 *Provider English Spoken: Y*


Cultural Competency: N

Board Certified Specialty: No
*Family Health Centers of San
Diego*

*LEMON GROVE FAMILY
HEALTH CENTER*

 *7592 BROADWAY
LEMON GROVE, CA 91945*

 *Phone: (619) 515-2550*

 *After Hours Phone: (619)
515-2550*

 *Website: N/A*

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

CERTIFIED NURSE

PRACTITIONER

TOTH, JESSICA

Provider ID: 419139

Provider Gender: Female

License Number: NP95001050

NPI: 1578993788


 *Provider English Spoken: Y*


Cultural Competency: N

Board Certified Specialty: No
*Family Health Centers of San
Diego*

*LEMON GROVE FAMILY
HEALTH CENTER*

 *7592 BROADWAY
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 *Phone: (619) 515-2550*

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515-2550*


 *Website: N/A*

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 419139

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
*Family Health Centers of San
Diego*

D2. Directorio de atención primaria

LEMON GROVE FAMILY
HEALTH CENTER
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619)
515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 419139
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619)
515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

DORN, TIA

Provider ID: 419139
Provider Gender: Female
License Number: C172318
NPI: 1285074740
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619)
515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 9:00AM-5:00PM

FAMILY PRACTICE

DORN, TIA

Provider ID: 419139
Provider Gender: Female
License Number: C172318
NPI: 1285074740
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

Family Health Centers of San
Diego
LEMON GROVE FAMILY
HEALTH CENTER
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
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515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 9:00AM-5:00PM

FAMILY PRACTICE

KIM, YUHEE

Provider ID: 419139
Provider Gender: Female
License Number: A107323
NPI: 1629289400
Provider English Spoken: Y
Provider Language(s)
Spoken: Korean
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619)
515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\None

American Sign Language (ASL): Family Health Centers of San Diego

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KIM, YUHEE

Provider ID: 419139

Provider Gender: Female

License Number: A107323

NPI: 1629289400

Provider English Spoken: Y

Provider Language(s) Spoken: Korean


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619) 515-2550

 Website: N/A


Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FQHC

LEMON GROVE FAMILY HEALTH CENTER,

Provider ID: 419139

NPI: 1427282466


Provider English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

LEMON GROVE FAMILY HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

Fax: (619) 825-9577

 After Hours Phone: (619) 515-2550


 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

FQHC

LEMON GROVE FAMILY HEALTH CENTER,

Provider ID: 419139

NPI: 1427282466


Provider English Spoken: Y

Cultural Competency: N

Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

Fax: (619) 825-9577

 After Hours Phone: (619) 515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

INTERNAL MEDICINE

GALLARES, DANIEL

Provider ID: 419139

Provider Gender: Male

License Number: A165925

NPI: 1245689488


Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619) 515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

GALLARES, DANIEL

Provider ID: 419139

Provider Gender: Male

License Number: A165925

NPI: 1245689488

Provider English Spoken: Y

D2. Directorio de atención primaria

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LEMON GROVE FAMILY HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619) 515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

MAHDAI, SUZAN

Provider ID: 419139

Provider Gender: Female

License Number: A154838

NPI: 1598015679

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619) 515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

INTERNAL MEDICINE

MAHDAI, SUZAN

Provider ID: 419139

Provider Gender: Female

License Number: A154838

NPI: 1598015679

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619) 515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 419139

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 419139

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

D2. Directorio de atención primaria

Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 419139

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

Family Health Centers of San

Diego

LEMON GROVE FAMILY

HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619) 515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 419139

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

Family Health Centers of San

Diego

LEMON GROVE FAMILY

HEALTH CENTER

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After Hours Phone: (619) 515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 419139

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

Family Health Centers of San

Diego

LEMON GROVE FAMILY

HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619) 515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


CARTER, KHALIL

Provider ID: 419139

Provider Gender: Male

License Number: A113001

NPI: 1225231582

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,
GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A


Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA

Provider ID: 419139

Provider Gender: Female

License Number: A163464

NPI: 1326531401

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA


Provider ID: 419139

Provider Gender: Female

License Number: A163464

NPI: 1326531401

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

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LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 419139

Provider Gender: Male

License Number: A108228

NPI: 1629277322


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A


Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 419139

Provider Gender: Male

License Number: A108228


NPI: 1629277322


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550


 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


DORUELO, ASHLEY


Provider ID: 419139

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


DORUELO, ASHLEY


Provider ID: 419139

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego

LEMON GROVE FAMILY

HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


FOLCH TORRES-AGUIAR, BEATRIZ


Provider ID: 419139

Provider Gender: Female

License Number: A148014

NPI: 1457794752

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Yue
Chinese

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,

Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL


CHULA VISTA

Board Certified Specialty: No

Family Health Centers of San Diego


LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

D2. Directorio de atención primaria

 After Hours Phone: (619) 515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


FOLCH TORRES-AGUIAR, BEATRIZ


Provider ID: 419139

Provider Gender: Female

License Number: A148014

NPI: 1457794752

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish, Yue Chinese

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619) 515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


HANLEY, LAUREN

Provider ID: 419139

Provider Gender: Female

License Number: C174771

NPI: 1053392035

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619) 515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 419139

Provider Gender: Female

License Number: C174771

NPI: 1053392035

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY
HEALTH CENTER

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Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA


Provider ID: 419139

Provider Gender: Female

License Number: A72005





NPI: 1649208711


 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

D2. Directorio de atención primaria



Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
LEMON GROVE FAMILY
HEALTH CENTER





 7592 BROADWAY
LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619)
515-2550
 Website: N/A


Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA





Provider ID: 419139
Provider Gender: Female
License Number: A72005
NPI: 1649208711
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No




Family Health Centers of San
Diego
LEMON GROVE FAMILY
HEALTH CENTER
 7592 BROADWAY
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 Phone: (619) 515-2550
 After Hours Phone: (619)
515-2550
 Website: N/A
Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 419139
Provider Gender: Female
License Number: A116680
NPI: 1700073962
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
LEMON GROVE FAMILY
HEALTH CENTER
 7592 BROADWAY
LEMON GROVE, CA 91945
 Phone: (619) 515-2550














 *After Hours Phone: (619)*
515-2550
 *Website: N/A*
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

OBSTETRICS / GYNECOLOGY



LOEFFLER, ALLISON


Provider ID: 419139
Provider Gender: Female
License Number: A116680
NPI: 1700073962
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
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HEALTH CENTER
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 Phone: (619) 515-2550
 After Hours Phone: (619)
515-2550
 Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

D2. Directorio de atención primaria

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p>	<p>Provider ID: 419139</p> <p>Provider Gender: Male</p> <p>License Number: A154298</p> <p>NPI: 1710316450</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p><input type="checkbox"/> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL</p> <p>Board Certified Specialty: No</p> <p>Family Health Centers of San Diego</p> <p>LEMONGROVE FAMILY HEALTH CENTER</p> <p> 7592 BROADWAY LEMON GROVE, CA 91945</p> <p> Phone: (619) 515-2500</p> <p> After Hours Phone: (619) 515-2500</p> <p> Website: N/A</p> <p>Email: valeriade@fhcsd.org</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p>	<p>Spoken: Hindi</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MERCY HOSPITAL</p> <p>Board Certified Specialty: No</p> <p>Family Health Centers of San Diego</p> <p>LEMONGROVE FAMILY HEALTH CENTER</p> <p> 7592 BROADWAY LEMON GROVE, CA 91945</p> <p> Phone: (619) 515-2550</p> <p> After Hours Phone: (619) 515-2550</p> <p> Website: N/A</p> <p>Email: valeriade@fhcsd.org</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p>
<p><u>OBSTETRICS / GYNECOLOGY</u></p> <p>RODRIGUEZ JEREZ, ROBERTO</p> <p>Provider ID: 419139</p> <p>Provider Gender: Male</p> <p>License Number: A154298</p> <p>NPI: 1710316450</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p><input type="checkbox"/> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL</p> <p>Board Certified Specialty: No</p> <p>Family Health Centers of San Diego</p> <p>LEMONGROVE FAMILY HEALTH CENTER</p> <p> 7592 BROADWAY LEMON GROVE, CA 91945</p> <p> Phone: (619) 515-2500</p> <p> After Hours Phone: (619) 515-2500</p> <p> Website: N/A</p> <p>Email: valeriade@fhcsd.org</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p>	<p><u>OBSTETRICS / GYNECOLOGY</u></p> <p>SAPRA, SONIA</p> <p>Provider ID: 419139</p> <p>Provider Gender: Female</p> <p>License Number: A164859</p> <p>NPI: 1952751711</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p><input type="checkbox"/> Provider Language(s) Spoken: Hindi</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MERCY HOSPITAL</p> <p>Board Certified Specialty: No</p> <p>Family Health Centers of San Diego</p> <p>LEMONGROVE FAMILY HEALTH CENTER</p> <p> 7592 BROADWAY LEMON GROVE, CA 91945</p> <p> Phone: (619) 515-2500</p> <p> After Hours Phone: (619) 515-2500</p> <p> Website: N/A</p> <p>Email: valeriade@fhcsd.org</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p>	<p><u>OBSTETRICS / GYNECOLOGY</u></p> <p>SAPRA, SONIA</p> <p>Provider ID: 419139</p> <p>Provider Gender: Female</p> <p>License Number: A164859</p> <p>NPI: 1952751711</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p><input type="checkbox"/> Provider Language(s) Spoken: Hindi</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MERCY HOSPITAL</p> <p>Board Certified Specialty: No</p> <p>Family Health Centers of San Diego</p> <p>LEMONGROVE FAMILY HEALTH CENTER</p>
<p><u>OBSTETRICS / GYNECOLOGY</u></p> <p>RODRIGUEZ JEREZ, ROBERTO</p> <p>Provider ID: 419139</p> <p>Provider Gender: Male</p> <p>License Number: A154298</p> <p>NPI: 1710316450</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p><input type="checkbox"/> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL</p> <p>Board Certified Specialty: No</p> <p>Family Health Centers of San Diego</p> <p>LEMONGROVE FAMILY HEALTH CENTER</p> <p> 7592 BROADWAY LEMON GROVE, CA 91945</p> <p> Phone: (619) 515-2500</p> <p> After Hours Phone: (619) 515-2500</p> <p> Website: N/A</p> <p>Email: valeriade@fhcsd.org</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p>	<p><u>OBSTETRICS / GYNECOLOGY</u></p> <p>SAPRA, SONIA</p> <p>Provider ID: 419139</p> <p>Provider Gender: Female</p> <p>License Number: A164859</p> <p>NPI: 1952751711</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p><input type="checkbox"/> Provider Language(s) Spoken: Hindi</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MERCY HOSPITAL</p> <p>Board Certified Specialty: No</p> <p>Family Health Centers of San Diego</p> <p>LEMONGROVE FAMILY HEALTH CENTER</p> <p> 7592 BROADWAY LEMON GROVE, CA 91945</p> <p> Phone: (619) 515-2500</p> <p> After Hours Phone: (619) 515-2500</p> <p> Website: N/A</p> <p>Email: valeriade@fhcsd.org</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p>	<p><u>OBSTETRICS / GYNECOLOGY</u></p> <p>SAPRA, SONIA</p> <p>Provider ID: 419139</p> <p>Provider Gender: Female</p> <p>License Number: A164859</p> <p>NPI: 1952751711</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p><input type="checkbox"/> Provider Language(s) Spoken: Hindi</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MERCY HOSPITAL</p> <p>Board Certified Specialty: No</p> <p>Family Health Centers of San Diego</p> <p>LEMONGROVE FAMILY HEALTH CENTER</p>

D2. Directorio de atención primaria

 7592 BROADWAY
LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619)
515-2550

 Website: N/A
Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 419139

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Sharp


Grossmont Hospital

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 419139

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Sharp


Grossmont Hospital

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


WINESBURG, JENNIFER

Provider ID: 419139

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL,


DESERT REGIONAL MED CTR


Board Certified Specialty: No

Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 419139

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

D2. Directorio de atención primaria

CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 419139

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 419139

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY

HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

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After Hours Phone: (619)
515-2500

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

JACKSON, DANA

Provider ID: 419139

Provider Gender: Female

License Number: 20A14119

NPI: 1689060063

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation:

MARINHEALTH AND
MARINHEALTH MEDICAL
CENTER, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER


7592 BROADWAY


LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)



D2. Directorio de atención primaria

515-2550
 Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


PEDIATRICS

JACKSON, DANA

Provider ID: 419139
Provider Gender: Female
License Number: 20A14119
NPI: 1689060063
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N
Hospital Affiliation:
MARINHEALTH AND
MARINHEALTH MEDICAL
CENTER, SCRIPPS MERCY
HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
LEMON GROVE FAMILY
HEALTH CENTER



 7592 BROADWAY
LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619)
515-2550

 Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER


PEDIATRICS


SLEIMAN, JOSEPH

Provider ID: 419139
Provider Gender: Male
License Number: A102060
NPI: 1093976748
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, French,
Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619)
515-2550

 Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER




PEDIATRICS



SLEIMAN, JOSEPH

Provider ID: 419139
Provider Gender: Male
License Number: A102060

NPI: 1093976748
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, French,
Spanish


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego


LEMON GROVE FAMILY
HEALTH CENTER
 7592 BROADWAY
LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619)
515-2550

 Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

FLEMING, DAVID

Provider ID: 419139
Provider Gender: Male
License Number: PA12416
NPI: 1932329505
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER
 7592 BROADWAY

D2. Directorio de atención primaria

LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

FLEMING, DAVID

Provider ID: 419139
Provider Gender: Male
License Number: PA12416
NPI: 1932329505
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

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LEMON GROVE, CA 91945
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After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

NATIONAL CITY

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 417102
Provider Gender: Male
License Number: NP22974
NPI: 1356684781
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - NATIONAL C

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 417102
Provider Gender: Male
License Number: NP22974
NPI: 1356684781
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog

Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
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2743 HIGHLAND AVE
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Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM


CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 418302
Provider Gender: Male
License Number: NP22974
NPI: 1356684781
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN GRANGER SCHOOL BASED
2101 GRANGER AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org



D2. Directorio de atención primaria

mahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO



Provider ID: 418302
Provider Gender: Male
License Number: NP22974
NPI: 1356684781


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN


GRANGER SCHOOL BASED

 2101 GRANGER AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426



 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER


DHARKAR-SURBER, SAPNA
Provider ID: 185270
Provider Gender: Female
License Number: NP95013257
NPI: 1538707765


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Marathi, Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308
Fax: (619) 434-7310

 After Hours Phone: (619)
434-7308

 Website: [www.lamaestra.or
g](http://www.lamaestra.or
g)



Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


DHARKAR-SURBER, SAPNA
Provider ID: 185270
Provider Gender: Female
License Number: NP95013257
NPI: 1538707765

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Marathi, Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308
Fax: (619) 434-7310

 After Hours Phone: (619)
434-7308

 Website: [www.lamaestra.or
g](http://www.lamaestra.or
g)

Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

LIM, IMELDA

Provider ID: 418302
Provider Gender: Female
License Number: NP95000203
NPI: 1093130395

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N
Board Certified Specialty: No

D2. Directorio de atención primaria

Operation Samahan

OPERATION SAMAHAN

GRANGER SCHOOL BASED

2101 GRANGER AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

LIM, IMELDA

Provider ID: 418302

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

Operation Samahan

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GRANGER SCHOOL BASED

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NATIONAL CITY, CA 91950

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After Hours Phone: (844)
200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider Gender: Female

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

LIM, IMELDA

Provider ID: 417102

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

Operation Samahan

OPERATION SAMAHAN -

NATIONAL C

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-6:00PM

F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

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Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

Operation Samahan

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NATIONAL C

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NATIONAL CITY, CA 91950

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Hours: M-TH 8:00AM-6:00PM

F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

LUM, YUIN-WAH

Provider ID: 418930

Provider Gender: Female

License Number: NP95010663

NPI: 1942764477

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San

Diego

FAMILY HEALTH CTR SD


NATIONAL CITY

D2. Directorio de atención primaria

 1000 EUCLID AVE
NATIONAL CITY, CA 91950
 Phone: (619) 515-2399
 After Hours Phone: (619)
515-2399
 Website: www.fhcsd.org
Email: lucinaj@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE **PRACTITIONER**

LUM, YUIN-WAH


Provider ID: 418930
Provider Gender: Female
License Number: NP95010663
NPI: 1942764477
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HEALTH CTR SD
NATIONAL CITY

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 Website: www.fhcsd.org
Email: lucinaj@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE





PRACTITIONER

NEVAREZ, IRENE

Provider ID: 185270
Provider Gender: Female
License Number: NP95009891
NPI: 1003166646
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 564-8765
 After Hours Phone: (619)
564-8765
 Website: www.lamaestra.org

Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

NEVAREZ, IRENE

Provider ID: 185270
Provider Gender: Female
License Number: NP95009891

NPI: 1003166646


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: UCSD LA
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Board Certified Specialty: No
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 Website: www.lamaestra.org

Email:
aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


CERTIFIED NURSE

PRACTITIONER

OCHOA, ERLINDA

Provider ID: 185270
Provider Gender: Female
License Number: NP4430
NPI: 1346437464

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No

D2. Directorio de atención primaria

La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC
 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 After Hours Phone: (619)
434-7308
 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER


OCHOA, ERLINDA

Provider ID: 185270

Provider Gender: Female

License Number: NP4430

NPI: 1346437464

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

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 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER


REAL, MARIA


Provider ID: 185270

Provider Gender: Female

License Number: NP17328

NPI: 1548450471

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Catalan, German,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

REAL, MARIA


Provider ID: 185270

Provider Gender: Female

License Number: NP17328

NPI: 1548450471

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Catalan, German,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No


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 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

D2. Directorio de atención primaria

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER

REID, EMILY

Provider ID: 185270

Provider Gender: Female


License Number: NP95002766


NPI: 1083081467

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER

REID, EMILY

Provider ID: 185270

Provider Gender: Female


License Number: NP95002766


NPI: 1083081467

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
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Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER

VERDUZCO GONZALEZ, AURORA

Provider ID: 185270

Provider Gender: Female

License Number: NP95001961


NPI: 1932452323

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)

434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER

VERDUZCO GONZALEZ, AURORA

Provider ID: 185270

Provider Gender: Female

License Number: NP95001961


NPI: 1932452323


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
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 Website: www.lamaestra.org

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):


D2. Directorio de atención primaria





N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER


VILLANUEVA DE GUTIE, BERENICE

Provider ID: 185270
Provider Gender: Female
License Number: NP95002188
NPI: 1952795536

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 *Phone: (619) 434-7308*
 *After Hours Phone: (619) 434-7308*
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Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM





CERTIFIED NURSE PRACTITIONER

VILLANUEVA DE GUTIE, BERENICE


Provider ID: 185270

Provider Gender: Female
License Number: NP95002188
NPI: 1952795536

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
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Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM





CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHA


Provider ID: 185270
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
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 *Website: www.lamaestra.org*



Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM



CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHA

Provider ID: 185270
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
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 *Phone: (619) 434-7308*
 *After Hours Phone: (619) 434-7308*
 *Website: www.lamaestra.org*


Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\None

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

CHIROPRACTOR

HOURIHAN, KEITH

Provider ID: 185270

Provider Gender: Male

License Number: DC29314

NPI: 1306916994

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

La Maestra Family Clinic

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 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619) 434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: TH 8:00AM-2:00PM

CHIROPRACTOR


HOURIHAN, KEITH

Provider ID: 185270

Provider Gender: Male

License Number: DC29314

NPI: 1306916994

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

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 Website: www.lamaestra.org


Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: TH 8:00AM-2:00PM

FAMILY PRACTICE


ALGHAMDI, ASMA

Provider ID: 227418

Provider Gender: Female

License Number: A167529

NPI: 1316310840

 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


PARADISE HILLS

 2400 E 8TH ST STE A

NATIONAL CITY, CA 91950

 Phone: (619) 662-4100


 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

ALGHAMDI, ASMA

Provider ID: 227418

Provider Gender: Female

License Number: A167529

NPI: 1316310840

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


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 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

D2. Directorio de atención primaria

FAMILY PRACTICE

ANDAYA, MIKHAEL

Provider ID: 418930

Provider Gender: Male

License Number: A176878

NPI: 1780189209

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HEALTH CTR SD

NATIONAL CITY

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

 After Hours Phone: (619)
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 Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ANDAYA, MIKHAEL

Provider ID: 418930

Provider Gender: Male

License Number: A176878

NPI: 1780189209

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HEALTH CTR SD

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 Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BAEZ, BEATRICE

Provider ID: 417102

Provider Gender: Female

License Number: A74777

NPI: 1245372507

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN -

NATIONAL C

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: [www.operationsa
mahan.org](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

FAMILY PRACTICE

BAEZ, BEATRICE

Provider ID: 417102

Provider Gender: Female

License Number: A74777

NPI: 1245372507

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Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


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mahan.org](http://www.operationsamahan.org)

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Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

FAMILY PRACTICE

CAMPBELL, BRIANNA


Provider ID: 227418

D2. Directorio de atención primaria

Provider Gender: Female

License Number: A157488

NPI: 1316479892

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: CHULA
VISTA COMM HOSP


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

PARADISE HILLS

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


CAMPBELL, BRIANNA

Provider ID: 227418

Provider Gender: Female

License Number: A157488

NPI: 1316479892

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: CHULA
VISTA COMM HOSP


Board Certified Specialty: No


IHP of Southern Cal-PHP


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 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


CANLAS, AVELINO

Provider ID: 417102

Provider Gender: Male

License Number: A74854

NPI: 1275682528

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN -

NATIONAL C

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

CANLAS, AVELINO

Provider ID: 417102

Provider Gender: Male

License Number: A74854

NPI: 1275682528

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL


Board Certified Specialty: No


Operation Samahan


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NATIONAL C

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

D2. Directorio de atención primaria

CARRIEDO-CENICEROS, MARIA

Provider ID: 227412

Provider Gender: Female

License Number: A78373

NPI: 1295746618

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


NATIONAL CITY

 1136 D AVE

NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinic-s/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA

Provider ID: 227412

Provider Gender: Female

License Number: A78373

NPI: 1295746618

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


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NATIONAL CITY

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NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinic-s/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CEVALLOS, JAMES

Provider ID: 227412

Provider Gender: Male

License Number: A55469

NPI: 1720181829

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

NATIONAL CITY


 1136 D AVE

NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 474-3722

 After Hours Phone: (619) 662-4100


 Website: syhealth.org/clinic-s/national-city-family-clinic-1

[s/national-city-family-clinic-1](http://syhealth.org/clinic-s/national-city-family-clinic-1)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

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Provider ID: 227412

Provider Gender: Male

License Number: A55469

NPI: 1720181829

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No


IHP of Southern Cal-PHP

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 Phone: (619) 662-4100

Fax: (619) 474-3722


 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinic-s/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

FAMILY PRACTICE


DILLON, MAYRA

Provider ID: 227412

Provider Gender: Female

License Number: A112571

NPI: 1629232715

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH


NATIONAL CITY


 1136 D AVE

NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 336-2323

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


DILLON, MAYRA


Provider ID: 227412

Provider Gender: Female

License Number: A112571

NPI: 1629232715

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

NATIONAL CITY


 1136 D AVE

NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 336-2323

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


LANUZA, MARK

Provider ID: 418930

Provider Gender: Male

License Number: 20A18460

NPI: 1992230593

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San


Diego


FAMILY HEALTH CTR SD

NATIONAL CITY

 1000 EUCLID AVE

NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

 After Hours Phone: (619)
515-2399

 Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-3:30PM

TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

FAMILY PRACTICE

LANUZA, MARK

Provider ID: 418930

Provider Gender: Male

License Number: 20A18460

NPI: 1992230593

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San


Diego


FAMILY HEALTH CTR SD

NATIONAL CITY

 1000 EUCLID AVE

NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

 After Hours Phone: (619)
515-2399

 Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*

Hours: M 8:30AM-3:30PM

TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

FAMILY PRACTICE

LAW, KAREN

Provider ID: 227418

Provider Gender: Female

License Number: A138534

NPI: 1205253150

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: CHULA

VISTA COMM HOSP


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

PARADISE HILLS

 *2400 E 8TH ST STE A
NATIONAL CITY, CA 91950*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*


 *Website: syhealth.org/clinic
s/paradise-hills-family-clinic*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

LAW, KAREN

Provider ID: 227418

Provider Gender: Female

License Number: A138534

NPI: 1205253150

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: CHULA

VISTA COMM HOSP


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

PARADISE HILLS

 *2400 E 8TH ST STE A
NATIONAL CITY, CA 91950*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

 *Website: syhealth.org/clinic
s/paradise-hills-family-clinic*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

LEUTE, ERIC

Provider ID: 227418

Provider Gender: Male

License Number: A80832

NPI: 1720171507

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

*MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA*


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

PARADISE HILLS

 *2400 E 8TH ST STE A
NATIONAL CITY, CA 91950*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

 *Website: syhealth.org/clinic
s/paradise-hills-family-clinic*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

LEUTE, ERIC

Provider ID: 227418

Provider Gender: Male

License Number: A80832

NPI: 1720171507

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

*MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL*

CHULA VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

D2. Directorio de atención primaria

PARADISE HILLS

2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1467714436

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MEDINA, ALEXANDER

Provider ID: 361428

Provider Gender: Male

License Number: A133539

NPI: 1467714436

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH
BAY

330 E 8TH ST
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Email:

dinah.pierce@syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1477947364

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MEDINA, ALEXANDER

Provider ID: 361428

Provider Gender: Male

License Number: A133539

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH
BAY

330 E 8TH ST
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Email:

dinah.pierce@syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MOHAMEDI, NADIA

Provider ID: 227418

Provider Gender: Female

License Number: A146819

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PARADISE HILLS

2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

MOHAMEDI, NADIA

Provider ID: 227418

Provider Gender: Female

License Number: A146819

NPI: 1477947364

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH


PARADISE HILLS

2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

D2. Directorio de atención primaria

 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

NAVARRO, VANESSA MARIA

Provider ID: 227418

Provider Gender: Female

License Number: A113624

NPI: 1952563421

Provider English Spoken: Y

Provider Language(s) Spoken: Filipino, Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH


PARADISE HILLS

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 259-2807

 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NAVARRO, VANESSA MARIA

Provider ID: 227418

Provider Gender: Female

License Number: A113624

NPI: 1952563421

Provider English Spoken: Y

Provider Language(s) Spoken: Filipino, Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH


PARADISE HILLS

 2400 E 8TH ST STE A
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 Phone: (619) 662-4100

Fax: (619) 259-2807

 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NIKZAD, JASON

Provider ID: 361428

Provider Gender: Male

License Number: 20A12653

NPI: 1508121674

Provider English Spoken: Y

Provider Language(s) Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH

BAY

 330 E 8TH ST
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: www.syhealth.org
Email:

dinah.pierce@syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NIKZAD, JASON

Provider ID: 361428

Provider Gender: Male

License Number: 20A12653

NPI: 1508121674

Provider English Spoken: Y

Provider Language(s) Spoken: Farsi, Spanish

Cultural Competency: N

D2. Directorio de atención primaria

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SOUTH
BAY

330 E 8TH ST
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Email:

dinah.pierce@syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NOLASCO, JOANNA

Provider ID: 227412

Provider Gender: Female

License Number: A138919

NPI: 1154749315

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

NATIONAL CITY

1136 D AVE
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/national-city-family-clinic-1

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

NOLASCO, JOANNA

Provider ID: 227412

Provider Gender: Female

License Number: A138919

NPI: 1154749315

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

NATIONAL CITY

1136 D AVE
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

OCEGUEDA, JOSHUA

Provider ID: 227412

Provider Gender: Male

License Number: A165184

NPI: 1336643345

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

NATIONAL CITY

1136 D AVE
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

OCEGUEDA, JOSHUA

Provider ID: 227412

Provider Gender: Male

License Number: A165184

NPI: 1336643345

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL





Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

D2. Directorio de atención primaria



NATIONAL CITY

 1136 D AVE
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/national-city-family-clinic-1





Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


RICHARDSON, DANIELLE

Provider ID: 227418
Provider Gender: Female
License Number: A127555
NPI: 1609142892
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French,
Portuguese, Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
PARADISE HILLS



 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/paradise-hills-family-clinic

nic






Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RICHARDSON, DANIELLE



Provider ID: 227418
Provider Gender: Female
License Number: A127555
NPI: 1609142892
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French,
Portuguese, Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
PARADISE HILLS





 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/paradise-hills-family-clinic
nic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


FAMILY PRACTICE

ROBERTS, POMAI

Provider ID: 227412
Provider Gender: Female
License Number: A103218
NPI: 1023278314
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
NATIONAL CITY



 1136 D AVE
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

ROBERTS, POMAI

Provider ID: 227412
Provider Gender: Female
License Number: A103218
NPI: 1023278314
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

D2. Directorio de atención primaria

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
NATIONAL CITY

1136 D AVE
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

SCHUMAKER, EDWARD

Provider ID: 185270

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

After Hours Phone: (619)
434-7308

Website: www.lamaestra.org

g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SCHUMAKER, EDWARD

Provider ID: 185270

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

After Hours Phone: (619)
434-7308

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SNOOK, BRIAN

Provider ID: 227418

Provider Gender: Male

License Number: 20A11518

NPI: 1295977353

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
PARADISE HILLS

2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 259-2806

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SNOOK, BRIAN

Provider ID: 227418

Provider Gender: Male

License Number: 20A11518

NPI: 1295977353

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

D2. Directorio de atención primaria

SAN YSIDRO HEALTH

PARADISE HILLS

2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 259-2806

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

STONES, RACHEL

Provider ID: 185270

Provider Gender: Female

License Number: A167184

NPI: 1720583040

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 280-4213

After Hours Phone: (619)
280-4213

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: TH 8:00AM-2:00PM

FAMILY PRACTICE

STONES, RACHEL

Provider ID: 185270

Provider Gender: Female

License Number: A167184

NPI: 1720583040

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 280-4213

After Hours Phone: (619)
280-4213

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: TH 8:00AM-2:00PM

FAMILY PRACTICE

VELASQUEZ, SHARON

Provider ID: 227418

Provider Gender: Female

License Number: A71304

NPI: 1972732584

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PARADISE HILLS

2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

VELASQUEZ, SHARON

Provider ID: 227418

Provider Gender: Female

License Number: A71304

NPI: 1972732584

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

D2. Directorio de atención primaria

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH

PARADISE HILLS

2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FQHC

**FAMILY HEALTH CTR SD
NATIONAL CITY,**

Provider ID: 418930

NPI: 1417409228

Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San
Diego

FAMILY HEALTH CTR SD
NATIONAL CITY

1000 EUCLID AVE
NATIONAL CITY, CA 91950

Phone: (619) 515-2399

Fax: (619) 269-0053

After Hours Phone: (619)
515-2399

Website: www.fhcsd.org
Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): **FQHC**

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-3:30PM

TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

FQHC

**FAMILY HEALTH CTR SD
NATIONAL CITY,**

Provider ID: 418930

NPI: 1417409228

Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San
Diego

FAMILY HEALTH CTR SD
NATIONAL CITY

1000 EUCLID AVE
NATIONAL CITY, CA 91950

Phone: (619) 515-2399

Fax: (619) 269-0053

After Hours Phone: (619)
515-2399

Website: www.fhcsd.org
Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-3:30PM

TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

**LA MAESTRA FAMILY CLINIC
INC,**

Provider ID: 185270

NPI: 1336353721

Provider English Spoken: Y
Cultural Competency: N

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

Fax: (619) 434-7310

After Hours Phone: (619)
434-7308

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: TH 8:00AM-2:00PM

FQHC

**LA MAESTRA FAMILY CLINIC
INC,**

Provider ID: 185270

NPI: 1336353721





Provider English Spoken: Y
Cultural Competency: N

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC




217 HIGHLAND AVE
NATIONAL CITY, CA 91950

D2. Directorio de atención primaria

 Phone: (619) 434-7308
Fax: (619) 434-7310
 After Hours Phone: (619) 434-7308
 Website: www.lamaestra.org
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: TH 8:00AM-2:00PM

FQHC
OPERATION SAMAHAN - NATIONAL C,
Provider ID: 417102
NPI: 1801907449
 Provider English Spoken: Y
Cultural Competency: N
Operation Samahan
OPERATION SAMAHAN - NATIONAL C
 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
Fax: (619) 474-3919
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM

FQHC
OPERATION SAMAHAN - NATIONAL C,
Provider ID: 417102
NPI: 1801907449
 Provider English Spoken: Y
Cultural Competency: N
Operation Samahan
OPERATION SAMAHAN - NATIONAL C
 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
Fax: (619) 474-3919
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM

FQHC
OPERATION SAMAHAN GRANGER SCHOOL BASED,
Provider ID: 418302
NPI: 1205134517
 Provider English Spoken: Y
Cultural Competency: N
Operation Samahan
OPERATION SAMAHAN GRANGER SCHOOL BASED
 2101 GRANGER AVE
NATIONAL CITY, CA 91950
 Phone: (844) 200-2426

Fax: (619) 434-8999
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
OPERATION SAMAHAN GRANGER SCHOOL BASED,
Provider ID: 418302
NPI: 1205134517
 Provider English Spoken: Y
Cultural Competency: N
Operation Samahan
OPERATION SAMAHAN GRANGER SCHOOL BASED
 2101 GRANGER AVE
NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
Fax: (619) 434-8999
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM


FQHC
SAN YSIDRO HEALTH

D2. Directorio de atención primaria

NATIONAL CITY,

Provider ID: 227412

NPI: 1003869363


 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

NATIONAL CITY


 1136 D AVE

NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 474-3722

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM


FQHC

SAN YSIDRO HEALTH

NATIONAL CITY,


Provider ID: 227412

NPI: 1003869363


 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

NATIONAL CITY

 1136 D AVE

NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 474-3722

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinic

s/national-city-family-clinic-1 NPI: 1598907487

ic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM


FQHC

SAN YSIDRO HEALTH


PARADISE HILLS,

Provider ID: 227418


NPI: 1598907487

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
PARADISE HILLS


 2400 E 8TH ST STE A

NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 259-2807

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH

PARADISE HILLS,

Provider ID: 227418


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
PARADISE HILLS


 2400 E 8TH ST STE A

NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 259-2807

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH SOUTH BAY,

Provider ID: 361428


NPI: 1851757215

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH
BAY

 330 E 8TH ST

NATIONAL CITY, CA 91950

 Phone: (619) 662-4100


Fax: (619) 434-3514

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Email:

dinah.pierce@syhealth.org

D2. Directorio de atención primaria


Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC


SAN YSIDRO HEALTH SOUTH BAY,

Provider ID: 361428

NPI: 1851757215

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SOUTH BAY

 330 E 8TH ST
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 434-3514

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org


Email:

dinah.pierce@syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

HEPATOLOGY


GISH, ROBERT


Provider ID: 185270

Provider Gender: Male

License Number: G45632

NPI: 1548281322

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Dutch, French,
Spanish, Vietnamese


Cultural Competency: N

Hospital Affiliation: LOMA
LINDA UNIVERSITY COMM
MED CTR

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

HEPATOLOGY


GISH, ROBERT

Provider ID: 185270

Provider Gender: Male

License Number: G45632

NPI: 1548281322

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Dutch, French,
Spanish, Vietnamese


Cultural Competency: N


Hospital Affiliation: LOMA
LINDA UNIVERSITY COMM


MED CTR

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

INTERNAL MEDICINE


BRAVERMAN, IRA

Provider ID: 10635

Provider Gender: Male

NPI: 1124039755

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog


Cultural Competency: N


Hospital Affiliation: PARADISE
VALLEY HOSPITAL

Board Certified Specialty: Yes
Imperial Health Holdings

Medical Group-SD


IRA R BRAVERMAN


 610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950

 Phone: (619) 267-8181

Fax: (619) 479-6750

D2. Directorio de atención primaria

 After Hours Phone: (619)
267-8181

 Website: N/A

Email: SIEAB@AOL.COM

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM


INTERNAL MEDICINE

HEKMAT, RAZI

Provider ID: 78388

Provider Gender: Male

NPI: 1871501205

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL


Board Certified Specialty: No

Imperial Health Holdings


Medical Group-SD

RAZI D HEKMAT

 610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950

 Phone: (619) 267-8181

Fax: (619) 479-6750

 After Hours Phone: (619)
267-8181

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

INTERNAL MEDICINE


LAMANTIA, MICHELE

Provider ID: 361428

Provider Gender: Female

License Number: G71855

NPI: 1124176102

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH
BAY

 330 E 8TH ST
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Email:

dinah.pierce@syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE


LAMANTIA, MICHELE

Provider ID: 361428

Provider Gender: Female

License Number: G71855

NPI: 1124176102

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH
BAY

 330 E 8TH ST
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Email:

dinah.pierce@syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE


Provider ID: 227412

Provider Gender: Female

License Number: G71855

NPI: 1124176102

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

NATIONAL CITY

 1136 D AVE
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: syhealth.org/clinic
s/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

D2. Directorio de atención primaria

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 227412

Provider Gender: Female

License Number: G71855

NPI: 1124176102

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

NATIONAL CITY

 1136 D AVE
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

ROUEL, WADI

Provider ID: 185270

Provider Gender: Male

License Number: C55979

NPI: 1740254713

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Assyrian,
Spanish, Syriac

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, GROSSMONT


HOSPITAL


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org

g
Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

INTERNAL MEDICINE

ROUEL, WADI

Provider ID: 185270

Provider Gender: Male

License Number: C55979

NPI: 1740254713

Provider English Spoken: Y

Provider Language(s)

Spoken: Arabic, Assyrian,
Spanish, Syriac

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, GROSSMONT

HOSPITAL


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org

g
Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

NEUROLOGY

CANTU-REYNA, GUILLERMO

Provider ID: 185270

Provider Gender: Male

License Number: A41375

NPI: 1447389101

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

D2. Directorio de atención primaria

INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 798-3977
 After Hours Phone: (619)
798-3977
 Website: www.lamaestra.org

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

NEUROLOGY


CANTU-REYNA, GUILLERMO

Provider ID: 185270

Provider Gender: Male

License Number: A41375

NPI: 1447389101

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP




CHULA VISTA MED CTR

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 798-3977
 After Hours Phone: (619)
798-3977

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


ASLIAN, AZITA


Provider ID: 227418

Provider Gender: Female

License Number: A118227

NPI: 1851667661

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Faroese, Fataleka
Cultural Competency: N

Hospital Affiliation: Hemet

Global Medical Center, Menifee

Global Medical Center,

SCRIPPS MERCY HOSPITAL




CHULA VISTA, SCRIPPS MERCY
HOSPITAL


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PARADISE HILLS

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinic/s/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ASLIAN, AZITA

Provider ID: 227418

Provider Gender: Female

License Number: A118227

NPI: 1851667661

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Faroese, Fataleka

Cultural Competency: N

Hospital Affiliation: Hemet

Global Medical Center, Menifee

Global Medical Center,

SCRIPPS MERCY HOSPITAL





CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PARADISE HILLS

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinic/s/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS








BAILONY, AHMAD

Provider ID: 146949

Provider Gender: Male



NPI: 1790914422



D2. Directorio de atención primaria

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, Spanish*
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL
Board Certified Specialty: Yes
Rady Childrens Health Network
AHMAD L BAILONY
 655 EUCLID AVE STE 205 NATIONAL CITY, CA 91950
 *Phone: (619) 470-1945*
Fax: (619) 475-5048
 *After Hours Phone: (619) 470-1945*
 *Website: N/A*
Email: BAILONYPEDIATRICS@GMAIL.COM
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 9:00AM-5:00PM

PEDIATRICS



BAILONY, MOHAMMED






Provider ID: 30132
Provider Gender: Male
NPI: 1376625913
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic*
Cultural Competency: N
Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: Yes
Rady Childrens Health Network
MOHAMMED T BAILONY
 655 EUCLID AVE STE 205 NATIONAL CITY, CA 91950
 *Phone: (619) 470-1945*
Fax: (619) 475-5048
 *After Hours Phone: (619) 470-1945*
 *Website: N/A*
Email: BAILONY@YAHOO.COM
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 9:00AM-5:00PM

PEDIATRICS






BARBADILLO, TERESITA

Provider ID: 84258
Provider Gender: Female
NPI: 1952416695
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Tagalog*
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network

TERESITA T BARBADILLO
 655 EUCLID AVE STE 201 NATIONAL CITY, CA 91950
 *Phone: (619) 267-8601*
Fax: (619) 267-2242
 *After Hours Phone: (619) 267-8601*
 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 9:00AM-5:00PM

PEDIATRICS

BONSU, BEMA

Provider ID: 227412
Provider Gender: Male
License Number: C55180
NPI: 1932106986
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH NATIONAL CITY
 1136 D AVE NATIONAL CITY, CA 91950
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: syhealth.org/clinics/national-city-family-clinic-1*
Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


BONSU, BEMA

Provider ID: 227412

Provider Gender: Male

License Number: C55180

NPI: 1932106986


 Provider English Spoken: Y


Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Board Certified Specialty: No
IHP of Southern Cal- PHP
SAN YSIDRO HEALTH
NATIONAL CITY

 1136 D AVE
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100


 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


CONE, STEPHANIE

Provider ID: 185270

Provider Gender: Female

License Number: A123929

NPI: 1437444858

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619) 434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


CONE, STEPHANIE


Provider ID: 185270

Provider Gender: Female

License Number: A123929

NPI: 1437444858

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
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 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

DAY, CHRISTOPHER

Provider ID: 418930

Provider Gender: Male

License Number: A163862

NPI: 1184121253

 Provider English Spoken: Y






 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HEALTH CTR SD
NATIONAL CITY

D2. Directorio de atención primaria

 1000 EUCLID AVE
NATIONAL CITY, CA 91950
 Phone: (619) 515-2399
 After Hours Phone: (619)
515-2399
 Website: www.fhcsd.org
Email: lucinaj@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-3:30PM
TU 10:30AM-5:30PM
W 8:30AM-3:30PM
TH 10:30AM-5:30PM
F 8:30AM-3:30PM

PEDIATRICS



DAY, CHRISTOPHER





Provider ID: 418930
Provider Gender: Male
License Number: A163862
NPI: 1184121253
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HEALTH CTR SD
NATIONAL CITY
 1000 EUCLID AVE
NATIONAL CITY, CA 91950
 Phone: (619) 515-2399
 After Hours Phone: (619)
515-2399
 Website: www.fhcsd.org
Email: lucinaj@fhcsd.org
Medi-Cal Open Panel: Yes


Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-3:30PM
TU 10:30AM-5:30PM
W 8:30AM-3:30PM
TH 10:30AM-5:30PM
F 8:30AM-3:30PM

PEDIATRICS

FRESNO, BLANCA



Provider ID: 102433
Provider Gender: Female
NPI: 1346258787
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SHARP
CHULA VISTA MED CTR
Board Certified Specialty: No
Rady Childrens Health Network
BLANCA | FRESNO





 655 EUCLID AVE STE 207
NATIONAL CITY, CA 91950
 Phone: (619) 475-4575
Fax: (619) 475-4578
 After Hours Phone: (619)
475-4575
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19


American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: SU-SA 8:00AM-5:00PM

PEDIATRICS

GARCIA, RAFAEL


Provider ID: 84954
Provider Gender: Male
NPI: 1053414086
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
Rady Childrens Health Network
RAFAEL A GARCIA

 610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 Phone: (619) 527-7700
Fax: (619) 527-3226
 After Hours Phone: (619)
527-7700
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

RANA, DEBORAH

Provider ID: 227418
Provider Gender: Female
License Number: G88347
NPI: 1033191457
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,

D2. Directorio de atención primaria

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, CHULA

VISTA COMM HOSP

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PARADISE HILLS

2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

RANA, DEBORAH

Provider ID: 227418

Provider Gender: Female

License Number: G88347

NPI: 1033191457

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, CHULA

VISTA COMM HOSP

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PARADISE HILLS

2400 E 8TH ST STE A
NATIONAL CITY, CA 91950



Phone: (619) 662-4100



After Hours Phone: (619)
662-4100



Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

UY, CARMELITA

Provider ID: 424443

Provider Gender: Female

NPI: 1154431484

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

Rady Childrens Health Network

CARMELITA UY

2340 E 8TH ST STE E
NATIONAL CITY, CA 91950

Phone: (619) 216-8500

Fax: (619) 216-8511

After Hours Phone: (619)
216-8511

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

VALENCIA, MARILES

Provider ID: 104060

Provider Gender: Female

NPI: 1275541625

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, PARADISE VALLEY

HOSPITAL, SHARP CHULA

VISTA MED CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network

MARILES F VALENCIA

655 EUCLID AVE STE 207
NATIONAL CITY, CA 91950

Phone: (619) 475-4575

Fax: (619) 475-4578

After Hours Phone: (619)
475-4575

Website: N/A

Email:

PEDIATRICSINPARADISE@YAHOO.COM

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU-SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT

ARMENTA, JORGE

D2. Directorio de atención primaria

Provider ID: 185270

Provider Gender: Male


License Number: PA13694


NPI: 1346382611


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

PHYSICIANS ASSISTANT

ARMENTA, JORGE

Provider ID: 185270

Provider Gender: Male


License Number: PA13694


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aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

PHYSICIANS ASSISTANT

BANGS, SASHA

Provider ID: 418930

Provider Gender: Female

License Number: PA55660


NPI: 1720524374


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HEALTH CTR SD
NATIONAL CITY

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

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515-2399

 Website: www.fhcsd.org
Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

BANGS, SASHA

Provider ID: 418930

Provider Gender: Female

License Number: PA55660


NPI: 1720524374


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

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 After Hours Phone: (619)
515-2399

 Website: www.fhcsd.org
Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

MARTINEZ-MURGUIA, IRENE

Provider ID: 185270

Provider Gender: Female

License Number: PA20296

NPI: 1447492889

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

D2. Directorio de atención primaria

INC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

After Hours Phone: (619)
434-7308

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

MARTINEZ-MURGUIA, IRENE

Provider ID: 185270

Provider Gender: Female

License Number: PA20296

NPI: 1447492889

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

217 HIGHLAND AVE
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Phone: (619) 434-7308

After Hours Phone: (619)
434-7308

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1154609790

N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 185270

Provider Gender: Female

License Number: PA21625

NPI: 1154609790

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

After Hours Phone: (619)
434-7308

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 185270

Provider Gender: Female

License Number: PA21625

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

After Hours Phone: (619)
434-7308

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

OCEANSIDE

CERTIFIED NURSE

PRACTITIONER

BAEK, KILHYO

Provider ID: 206341

Provider Gender: Female

License Number: NP95003571

NPI: 1053776914

Provider English Spoken: Y

Provider Language(s)
Spoken: Korean

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

D2. Directorio de atención primaria

VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BAEK, KILHYO

Provider ID: 206341

Provider Gender: Female

License Number: NP95003571

NPI: 1053776914

Provider English Spoken: Y

Provider Language(s)
Spoken: Korean

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BAEK, KILHYO

Provider ID: 206341

Provider Gender: Female

License Number: NP95003571

NPI: 1053776914

Provider English Spoken: Y

Provider Language(s)
Spoken: Korean

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

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OCEANSIDE, CA 92057
Phone: (760) 631-5000
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Hours: M-F 8:00AM-5:00PM
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Provider Gender: Female

License Number: NP95003571

NPI: 1053776914

Provider English Spoken: Y

Provider Language(s)
Spoken: Korean

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

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OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BAEK, KILHYO

Provider ID: 206341

Provider Gender: Female

License Number: NP95003571

NPI: 1053776914

Provider English Spoken: Y

Provider Language(s)
Spoken: Korean



Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC


4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760)

D2. Directorio de atención primaria

631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM






CERTIFIED NURSE **PRACTITIONER**

BAEK, KILHYO
Provider ID: 206341
Provider Gender: Female
License Number: NP95003571
NPI: 1053776914
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Korean
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM






CERTIFIED NURSE **PRACTITIONER**

BINETTE, DONYA
Provider ID: 480247
Provider Gender: Female
License Number: NP95001653
NPI: 1427325166
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 757-5841
 After Hours Phone: (760) 757-5841
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM






CERTIFIED NURSE **PRACTITIONER**

BINETTE, DONYA
Provider ID: 480247
Provider Gender: Female
License Number: NP95001653
NPI: 1427325166
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

IHP of Southern Cal-PHP
TRUECARE
 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 757-5841
 After Hours Phone: (760) 757-5841
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

CERTIFIED NURSE **PRACTITIONER**

BINETTE, DONYA
Provider ID: 480247
Provider Gender: Female
License Number: NP95001653
NPI: 1427325166
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 757-5841
 After Hours Phone: (760) 757-5841
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT

D2. Directorio de atención primaria

PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

BINETTE, DONYA


Provider ID: 480247
Provider Gender: Female
License Number: NP95001653
NPI: 1427325166


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 757-5841


 After Hours Phone: (760)
757-5841

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

BROMAN, GRETCHEN


Provider ID: 402436
Provider Gender: Female
License Number: NP95007885
NPI: 1922421288


Provider English Spoken: Y

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC
HORNE STREET

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 402436

Provider Gender: Female


License Number: NP95007885
NPI: 1922421288


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC
HORNE STREET

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
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CERTIFIED NURSE

PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 402436

Provider Gender: Female


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NPI: 1922421288


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Board Certified Specialty: No
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PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 402436

D2. Directorio de atención primaria


Provider Gender: Female
License Number: NP95007885
NPI: 1922421288


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC
HORNE STREET

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000


 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 206341

Provider Gender: Female

License Number: NP95007885


NPI: 1922421288


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)

631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
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CERTIFIED NURSE

PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 206341

Provider Gender: Female

License Number: NP95007885


NPI: 1922421288


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

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Min/Max Age: 0\None

American Sign Language (ASL):
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PROVIDER

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CERTIFIED NURSE

PRACTITIONER

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Provider ID: 206341

Provider Gender: Female

License Number: NP95007885


NPI: 1922421288


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

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 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057


D2. Directorio de atención primaria

 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM



CERTIFIED NURSE


PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 206341
Provider Gender: Female
License Number: NP95007885
NPI: 1922421288
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC


 4700 N RIVER RD
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 Phone: (760) 631-5000
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 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

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Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE



PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 206341
Provider Gender: Male
License Number: NP95017483
NPI: 1679140644
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD


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Board Certified Specialty: No
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SA 9:00AM-4:00PM

D2. Directorio de atención primaria

CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 206341

Provider Gender: Male

License Number: NP95017483


NPI: 1679140644


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

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Min/Max Age: 0\None

American Sign Language (ASL):
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 Accessibility: CONTACT
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Hours: M-F 8:00AM-5:00PM

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CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 206341

Provider Gender: Male

License Number: NP95017483


NPI: 1679140644


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Board Certified Specialty: No
IHP of Southern Cal-PHP

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Min/Max Age: 0\None

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IHP of Southern Cal-PHP

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Hours: M-F 8:00AM-5:00PM

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CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 206341

Provider Gender: Male

License Number: NP95025871

NPI: 1689094971

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

D2. Directorio de atención primaria

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

CHRISTY, TYLER

Provider ID: 206341

Provider Gender: Male

License Number: NP95025871


NPI: 1689094971


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

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IHP of Southern Cal-PHP

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IHP of Southern Cal-PHP

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 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE **PRACTITIONER**

CHRISTY, TYLER


Provider ID: 206341
Provider Gender: Male
License Number: NP95025871
NPI: 1689094971


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000


 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE **PRACTITIONER**


CORY, ALLISON


Provider ID: 206341
Provider Gender: Female
License Number: NP20497
NPI: 1194027706

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE **PRACTITIONER**

CORY, ALLISON


Provider ID: 206341
Provider Gender: Female
License Number: NP20497
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Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes

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CERTIFIED NURSE **PRACTITIONER**

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Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

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CERTIFIED NURSE **PRACTITIONER**

CORY, ALLISON


Provider ID: 206341
Provider Gender: Female
License Number: NP20497
NPI: 1194027706

Provider English Spoken: Y

D2. Directorio de atención primaria

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

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 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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CERTIFIED NURSE

PRACTITIONER

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Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

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IHP of Southern Cal-PHP

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631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER


EVERETT, ELIZABETH


Provider ID: 206341

Provider Gender: Female

License Number: NP95025094

NPI: 1942952767

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Sign Language*


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
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 After Hours Phone: (760)
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 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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Hours: M-F 8:00AM-5:00PM
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Cultural Competency: N

Board Certified Specialty: No
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VISTA COMMUNITY CLINIC

 4700 N RIVER RD
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 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

D2. Directorio de atención primaria




 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
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CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH

Provider ID: 206341
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Sign Language
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

D2. Directorio de atención primaria



American Sign Language (ASL): *Provider Gender: Female*
N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE




PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 206341
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Chinese, Mandarin*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC


 4700 N RIVER RD
OCEANSIDE, CA 92057
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM



CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI TING




Provider ID: 206341

License Number: NP95006826
NPI: 1619246907

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Chinese, Mandarin*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

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Min/Max Age: 0\None

American Sign Language (ASL): N

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Hours: M-F 8:00AM-5:00PM
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CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI TING



Provider ID: 206341
Provider Gender: Female
License Number: NP95006826
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Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*



Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER




HALGEDAHL, YI TING


Provider ID: 206341
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Chinese, Mandarin*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC


 4700 N RIVER RD
OCEANSIDE, CA 92057
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

D2. Directorio de atención primaria

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER


HALGEDAHL, YI TING

Provider ID: 206341

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Chinese, Mandarin


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

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 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
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CERTIFIED NURSE

PRACTITIONER


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Spoken: Chinese, Mandarin


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

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631-5000

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER


HALGEDAHL, YI TING

Provider ID: 402434

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 402434

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

PIER VIEW WAY

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OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

D2. Directorio de atención primaria

PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 402434

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 402434

Provider Gender: Female

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IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 402436

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

HORNE STREET

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000


 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 402436

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

Provider English Spoken: Y

Provider Language(s)
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Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


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CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI TING




D2. Directorio de atención primaria

Provider ID: 402436
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907

Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

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CERTIFIED NURSE




PRACTITIONER

HARRIS, PAMELA

Provider ID: 206341
Provider Gender: Female
License Number: NP95022679
NPI: 1407545221

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

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CERTIFIED NURSE **PRACTITIONER**


HARRIS, PAMELA


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CERTIFIED NURSE **PRACTITIONER**

HARRIS, PAMELA

Provider ID: 206341
Provider Gender: Female
License Number: NP95022679
NPI: 1407545221

Provider English Spoken: Y
Cultural Competency: N

D2. Directorio de atención primaria

Board Certified Specialty: No
IHP of Southern Cal-PHP
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N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

HOWELL, AMANDA

Provider ID: 206341

Provider Gender: Female

License Number: NP95020894

NPI: 1427797943

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

4700 N RIVER RD

OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

D2. Directorio de atención primaria

N


 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE



PRACTITIONER

HOWELL, AMANDA

Provider ID: 206341
Provider Gender: Female
License Number: NP95020894
NPI: 1427797943

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057


 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE



PRACTITIONER

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Provider ID: 206341
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Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057


 *Phone: (760) 631-5000*
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

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License Number: NP95020894
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VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057


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 *Website: www.vistacommunityclinic.org*

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CERTIFIED NURSE

PRACTITIONER

HOWELL, AMANDA

Provider ID: 206341
Provider Gender: Female
License Number: NP95020894



D2. Directorio de atención primaria

NPI: 1427797943

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

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 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER


KELLEHER, BRIDGET

Provider ID: 402434

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC
PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

W 8:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER


KELLEHER, BRIDGET

Provider ID: 402434

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC
PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

W 8:00AM-7:00PM

TH-F 8:00AM-5:00PM

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CERTIFIED NURSE

PRACTITIONER

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VISTA COMMUNITY CLINIC
PIER VIEW WAY

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 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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PROVIDER

Hours: M-TU 8:00AM-5:00PM

W 8:00AM-7:00PM

D2. Directorio de atención primaria

TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 402434
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License Number: NP95003447
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 Provider Language(s)
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Cultural Competency: N
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MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
PIER VIEW WAY

818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000

Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-TU 8:00AM-5:00PM
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SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 206341
Provider Gender: Male
License Number: NP95020584
NPI: 1851747166

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057
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Website: [www.vistacommu
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Medi-Cal Open Panel: Yes
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CERTIFIED NURSE

D2. Directorio de atención primaria

PRACTITIONER

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 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 206341

Provider Gender: Male

License Number: NP95020584

NPI: 1851747166

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057



Phone: (760) 631-5000



After Hours Phone: (760)
631-5000



Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 206341

Provider Gender: Male

License Number: NP95020584


NPI: 1851747166


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

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OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

WAGNER, TASIA

Provider ID: 206341

Provider Gender: Female

License Number: NP95001650


NPI: 1598158768


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

WAGNER, TASIA

Provider ID: 206341

Provider Gender: Female

License Number: NP95001650

NPI: 1598158768


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD


D2. Directorio de atención primaria






OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

WAGNER, TASIA


Provider ID: 206341
Provider Gender: Female
License Number: NP95001650
NPI: 1598158768
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC






 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

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Board Certified Specialty: No
IHP of Southern Cal-PHP
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OCEANSIDE, CA 92057
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SA 9:00AM-4:00PM

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

D2. Directorio de atención primaria

SA 9:00AM-4:00PM

FAMILY PRACTICE


ESPINOSA-SILVA, YAMINAH

Provider ID: 206341

Provider Gender: Female

License Number: 20A12958

NPI: 1003172016

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL


ENCINITAS, TRI CITY MEDICAL
CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000


 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FAMILY PRACTICE



ESPINOSA-SILVA, YAMINAH

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 Provider Language(s)
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Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL


ENCINITAS, TRI CITY MEDICAL
CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

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MEMORIAL HOSPITAL


ENCINITAS, TRI CITY MEDICAL
CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

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 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

D2. Directorio de atención primaria

nityclinic.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE


ESPINOSA-SILVA, YAMINAH

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License Number: 20A12958

NPI: 1003172016

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 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL


CTR


Board Certified Specialty: No

IHP of Southern Cal-PHP

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MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL


CTR


Board Certified Specialty: No

IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FAMILY PRACTICE

FATLAND, SARAH

Provider ID: 206341

Provider Gender: Female

License Number: 20A18374

NPI: 1831354026


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FAMILY PRACTICE

FATLAND, SARAH

Provider ID: 206341

Provider Gender: Female

License Number: 20A18374

NPI: 1831354026


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes






Min/Max Age: 0\None

American Sign Language (ASL):

D2. Directorio de atención primaria



- N**
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM SA 9:00AM-4:00PM
- FAMILY PRACTICE**
FATLAND, SARAH
Provider ID: 206341
Provider Gender: Female
License Number: 20A18374
NPI: 1831354026
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*
 *Website: www.vistacommunityclinic.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM SA 9:00AM-4:00PM
- FAMILY PRACTICE**
FATLAND, SARAH
Provider ID: 206341
Provider Gender: Female
License Number: 20A18374
NPI: 1831354026
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*
 *Website: www.vistacommunityclinic.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT*
- Board Certified Specialty: No*
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*
 *Website: www.vistacommunityclinic.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM SA 9:00AM-4:00PM
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Provider Gender: Female
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NPI: 1831354026
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Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 *Phone: (760) 631-5000*
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 *Website: www.vistacommunityclinic.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT*
- PROVIDER*
Hours: M-F 8:00AM-5:00PM SA 9:00AM-4:00PM
- FAMILY PRACTICE**
FATLAND, SARAH
Provider ID: 206341
Provider Gender: Female
License Number: 20A18374
NPI: 1831354026
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*
 *Website: www.vistacommunityclinic.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM SA 9:00AM-4:00PM
- FAMILY PRACTICE**
KETCHEL, CLINT
Provider ID: 206341
Provider Gender: Male
License Number: A135564
NPI: 1699038125
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish,*




D2. Directorio de atención primaria

Syriac
Cultural Competency: N
Hospital Affiliation:
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, TRI CITY
MEDICAL CTR, WHITTIER
HOSPITAL MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE



KETCHEL, CLINT






Provider ID: 206341
Provider Gender: Male
License Number: A135564
NPI: 1699038125
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac

Cultural Competency: N
Hospital Affiliation:
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, TRI CITY
MEDICAL CTR, WHITTIER
HOSPITAL MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE



KETCHEL, CLINT

Provider ID: 402434
Provider Gender: Male
License Number: A135564
NPI: 1699038125
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac
Cultural Competency: N

Hospital Affiliation:
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, TRI CITY
MEDICAL CTR, WHITTIER
HOSPITAL MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
PIER VIEW WAY
 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM






FAMILY PRACTICE

KETCHEL, CLINT

Provider ID: 402434
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License Number: A135564
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 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac
Cultural Competency: N
Hospital Affiliation:



D2. Directorio de atención primaria

SOUTHWEST HEALTHCARE
 RANCHO SPRINGS HOSPITAL,
 SOUTHWEST HEALTHCARE
 INLAND VALLEY HOSPITAL,
 SCRIPPS MEMORIAL
 HOSPITAL ENCINITAS, TRI CITY
 MEDICAL CTR, WHITTIER
 HOSPITAL MEDICAL CENTER
 Board Certified Specialty: No
 IHP of Southern Cal-PHP
 VISTA COMMUNITY CLINIC
 PIER VIEW WAY






 818 PIER VIEW WAY
 OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760)
 631-5000
 Website: www.vistacommunityclinic.org
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 American Sign Language (ASL):
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 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

KETCHEL, CLINT



Provider ID: 206341
 Provider Gender: Male
 License Number: A135564
 NPI: 1699038125
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, Chaldean
 Neo-Aramaic, Spanish,
 Syriac
 Cultural Competency: N
 Hospital Affiliation:
 SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,
 SOUTHWEST HEALTHCARE
 INLAND VALLEY HOSPITAL,
 SCRIPPS MEMORIAL
 HOSPITAL ENCINITAS, TRI CITY
 MEDICAL CTR, WHITTIER
 HOSPITAL MEDICAL CENTER
 Board Certified Specialty: No
 IHP of Southern Cal-PHP
 VISTA COMMUNITY CLINIC




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 OCEANSIDE, CA 92057
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 After Hours Phone: (760)
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 Hours: M-F 8:00AM-5:00PM
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 SOUTHWEST HEALTHCARE
 RANCHO SPRINGS HOSPITAL,

SOUTHWEST HEALTHCARE
 INLAND VALLEY HOSPITAL,
 SCRIPPS MEMORIAL
 HOSPITAL ENCINITAS, TRI CITY
 MEDICAL CTR, WHITTIER
 HOSPITAL MEDICAL CENTER
 Board Certified Specialty: No
 IHP of Southern Cal-PHP
 VISTA COMMUNITY CLINIC
 PIER VIEW WAY

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 Spoken: Arabic, Chaldean
 Neo-Aramaic, Spanish,
 Syriac
 Cultural Competency: N
 Hospital Affiliation:
 SOUTHWEST HEALTHCARE
 RANCHO SPRINGS HOSPITAL,
 SOUTHWEST HEALTHCARE

D2. Directorio de atención primaria

INLAND VALLEY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, TRI CITY
MEDICAL CTR, WHITTIER
HOSPITAL MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
PIER VIEW WAY
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760)
631-5000
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Min/Max Age: 0\None
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Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

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Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac
Cultural Competency: N
Hospital Affiliation:
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RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,

SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, TRI CITY
MEDICAL CTR, WHITTIER
HOSPITAL MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
4700 N RIVER RD
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Phone: (760) 631-5000
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Hours: M-F 8:00AM-5:00PM
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FAMILY PRACTICE

KETCHEL, CLINT

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Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac
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Hospital Affiliation:
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, TRI CITY
MEDICAL CTR, WHITTIER
HOSPITAL MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760)
631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

KETCHEL, CLINT

Provider ID: 206341
Provider Gender: Male
License Number: A135564
NPI: 1699038125
Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac
Cultural Competency: N
Hospital Affiliation:
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, TRI CITY

D2. Directorio de atención primaria

MEDICAL CTR, WHITTIER
HOSPITAL MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760)
631-5000
Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

NGUYEN, DANIELA

Provider ID: 206341
Provider Gender: Female
License Number: 20A21066
NPI: 1891069662

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760)
631-5000
Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

NGUYEN, DANIELA

Provider ID: 206341
Provider Gender: Female
License Number: 20A21066
NPI: 1891069662

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
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FAMILY PRACTICE

NGUYEN, DANIELA

Provider ID: 206341
Provider Gender: Female
License Number: 20A21066
NPI: 1891069662

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

NGUYEN, DANIELA

Provider ID: 206341
Provider Gender: Female
License Number: 20A21066
NPI: 1891069662

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

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Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT

D2. Directorio de atención primaria

PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

NGUYEN, DANIELA

Provider ID: 206341

Provider Gender: Female

License Number: 20A21066

NPI: 1891069662


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

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 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

NGUYEN, DANIELA

Provider ID: 206341

Provider Gender: Female

License Number: 20A21066

NPI: 1891069662


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

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American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

PANICKER, CIBU

Provider ID: 206341

Provider Gender: Male

License Number: A149340

NPI: 1235492760

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR


Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE

PANICKER, CIBU

Provider ID: 206341

Provider Gender: Male

License Number: A149340

NPI: 1235492760

 Provider English Spoken: Y
Cultural Competency: N


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PROVIDER

FAMILY PRACTICE

PANICKER, CIBU

Provider ID: 206341

Provider Gender: Male

License Number: A149340

NPI: 1235492760






 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP


D2. Directorio de atención primaria

VISTA COMMUNITY CLINIC



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OCEANSIDE, CA 92057
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Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PANICKER, CIBU


Provider ID: 206341
Provider Gender: Male
License Number: A149340
NPI: 1235492760
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP

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PROVIDER

FAMILY PRACTICE

PANICKER, CIBU


Provider ID: 206341
Provider Gender: Male
License Number: A149340
NPI: 1235492760
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Cultural Competency: N
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MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP

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FAMILY PRACTICE

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PONSFORD, DIANA

Provider ID: 402436
Provider Gender: Female
License Number: 20A17371
NPI: 1407204969
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
HORNE STREET

 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

D2. Directorio de atención primaria

FAMILY PRACTICE

PONSFORD, DIANA

Provider ID: 402436

Provider Gender: Female

License Number: 20A17371

NPI: 1407204969

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP


VISTA COMMUNITY CLINIC

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631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FAMILY PRACTICE

PONSFORD, DIANA

Provider ID: 402436

Provider Gender: Female

License Number: 20A17371

NPI: 1407204969

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP

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FAMILY PRACTICE

PONSFORD, DIANA

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Provider Gender: Female

License Number: 20A17371

NPI: 1407204969

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TRI CITY
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IHP of Southern Cal-PHP


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American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FAMILY PRACTICE

VIDAL, MONICA

Provider ID: 206341

Provider Gender: Female

License Number: 20A8949

NPI: 1871791749

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FAMILY PRACTICE

VIDAL, MONICA

Provider ID: 206341

Provider Gender: Female

D2. Directorio de atención primaria

License Number: 20A8949

NPI: 1871791749

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FAMILY PRACTICE

VIDAL, MONICA

Provider ID: 206341

Provider Gender: Female

License Number: 20A8949

NPI: 1871791749

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

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After Hours Phone: (760)

631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FAMILY PRACTICE

VIDAL, MONICA

Provider ID: 206341

Provider Gender: Female

License Number: 20A8949

NPI: 1871791749

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

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Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FAMILY PRACTICE

VIDAL, MONICA

Provider ID: 206341

Provider Gender: Female

License Number: 20A8949

NPI: 1871791749

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

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PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FAMILY PRACTICE

VIDAL, MONICA

Provider ID: 206341

Provider Gender: Female

License Number: 20A8949

NPI: 1871791749

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish






Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

D2. Directorio de atención primaria

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC

TRUECARE,

Provider ID: 480247


NPI: 1245246917

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:30PM

FQHC

TRUECARE,

Provider ID: 480247


NPI: 1245246917

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:30PM

FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 206341


NPI: 1649662719

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 206341


NPI: 1316501562

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP


VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 206341


NPI: 1851300123

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

D2. Directorio de atención primaria

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000


 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 206341


NPI: 1649662719

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

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FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 206341


NPI: 1851300123

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FQHC

VISTA COMMUNITY CLINIC

HORNE STREET,

Provider ID: 402436

NPI: 1609094036


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

HORNE STREET

 517 N HORNE ST
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Min/Max Age: 0\None

American Sign Language (ASL):

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 Accessibility: CONTACT PROVIDER

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SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC

HORNE STREET,

Provider ID: 402436





NPI: 1609094036

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP







D2. Directorio de atención primaria

VISTA COMMUNITY CLINIC HORNE STREET

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VISTA COMMUNITY CLINIC HORNE STREET,

Provider ID: 402436
NPI: 1609094036
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
HORNE STREET
 517 N HORNE ST
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 Accessibility: CONTACT

PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC HORNE STREET,

Provider ID: 402436
NPI: 1609094036
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
HORNE STREET
 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC PIER VIEW WAY,

Provider ID: 402434
NPI: 1629357355
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Hours: M-TU 8:00AM-5:00PM
W 8:00AM-7:00PM

TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC


VISTA COMMUNITY CLINIC PIER VIEW WAY,

Provider ID: 402434
NPI: 1629357355

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000
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 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

D2. Directorio de atención primaria

PROVIDER
Hours: M-TU 8:00AM-5:00PM
W 8:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC

PIER VIEW WAY,

Provider ID: 402434

NPI: 1629357355

Provider English Spoken: Y


Cultural Competency: N

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

PIER VIEW WAY

 818 PIER VIEW WAY
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 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

W 8:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC

PIER VIEW WAY,

Provider ID: 402434

NPI: 1629357355

Provider English Spoken: Y


Cultural Competency: N

IHP of Southern Cal-PHP

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 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

W 8:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

INTERNAL MEDICINE

HASSANI, FARZANEH

Provider ID: 206341

Provider Gender: Female

License Number: C54458

NPI: 1942204979

Provider English Spoken: Y

Provider Language(s)

Spoken: Arabic, Farsi,

Persian, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL


CTR, UC DAVIS MEDICAL CTR


Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000


 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

INTERNAL MEDICINE

HASSANI, FARZANEH

Provider ID: 206341

Provider Gender: Female

License Number: C54458

NPI: 1942204979

Provider English Spoken: Y

Provider Language(s)

Spoken: Arabic, Farsi,

Persian, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL


CTR, UC DAVIS MEDICAL CTR


Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org


Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\None

American Sign Language (ASL): **INTERNAL MEDICINE**

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

INTERNAL MEDICINE


HASSANI, FARZANEH


Provider ID: 206341

Provider Gender: Female

License Number: C54458

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 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Farsi,
Persian, Urdu

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


ENCINITAS, TRI CITY MEDICAL
CTR, UC DAVIS MEDICAL CTR


Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): **INTERNAL MEDICINE**

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 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
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HASSANI, FARZANEH


Provider ID: 206341

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Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


ENCINITAS, TRI CITY MEDICAL
CTR, UC DAVIS MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

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 Provider Language(s)
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Persian, Urdu

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


ENCINITAS, TRI CITY MEDICAL
CTR, UC DAVIS MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

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Min/Max Age: 0\None

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 Accessibility: CONTACT PROVIDER

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License Number: C54458

NPI: 1942204979

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 Provider Language(s)
Spoken: Arabic, Farsi,
Persian, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL

D2. Directorio de atención primaria

CTR, UC DAVIS MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

PEDIATRICS

CALHOUN, CHANELLE

Provider ID: 480247

Provider Gender: Female

License Number: G75390

NPI: 1437166709

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 891-4667

After Hours Phone: (760)

891-4667

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

CALHOUN, CHANELLE

Provider ID: 480247

Provider Gender: Female

License Number: G75390

NPI: 1437166709

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 891-4667

After Hours Phone: (760)
891-4667

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

CALHOUN, CHANELLE

Provider ID: 480247

Provider Gender: Female

License Number: G75390

NPI: 1437166709

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 891-4667

After Hours Phone: (760)
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Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
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Accessibility: CONTACT
PROVIDER

PEDIATRICS

CALHOUN, CHANELLE

Provider ID: 480247

Provider Gender: Female

License Number: G75390

NPI: 1437166709

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

D2. Directorio de atención primaria

ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 891-4667

After Hours Phone: (760)
891-4667

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

CALHOUN, CHANELLE

Provider ID: 344145

Provider Gender: Female

NPI: 1437166709

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

Rady Childrens Health Network
CHANELLE R CALHOUN

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): NPI: 1164434312

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CURLEY, EDWARD

Provider ID: 240736

Provider Gender: Male

NPI: 1164434312

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No

Rady Childrens Health Network
EDWARD R CURLEY

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS

CURLEY, EDWARD

Provider ID: 480247

Provider Gender: Male

License Number: A73814

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS

CURLEY, EDWARD

Provider ID: 480247

Provider Gender: Male

License Number: A73814

NPI: 1164434312

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

2210 MESA DR STE 300

D2. Directorio de atención primaria

OCEANSIDE, CA 92054
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS

CURLEY, EDWARD

Provider ID: 480247

Provider Gender: Male

License Number: A73814

NPI: 1164434312

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 736-6767
After Hours Phone: (760) 736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:30PM

PEDIATRICS

CURLEY, EDWARD

Provider ID: 480247

Provider Gender: Male

License Number: A73814

NPI: 1164434312

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS

DANIELS, SARAH

Provider ID: 433806

Provider Gender: Female

NPI: 1730446527

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network
SARAH R DANIELS

3605 VISTA WAY STE 130
BLDG B
OCEANSIDE, CA 92056

Phone: (760) 547-1010
After Hours Phone: (760) 547-1010

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GUNTA, SUJANA

Provider ID: 402434

Provider Gender: Female

License Number: A109056

NPI: 1932304342

Provider English Spoken: Y





Provider Language(s)
Spoken: Hindi, Marathi,
Spanish, Telugu

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
PIER VIEW WAY


D2. Directorio de atención primaria

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GUNTA, SUJANA

Provider ID: 402434

Provider Gender: Female

License Number: A109056

NPI: 1932304342

Provider English Spoken: Y





Provider Language(s)
Spoken: Hindi, Marathi,
Spanish, Telugu

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC
PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 402434

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GUNTA, SUJANA

Provider ID: 402434

Provider Gender: Female

License Number: A109056

NPI: 1932304342

Provider English Spoken: Y





Provider Language(s)
Spoken: Hindi, Marathi,
Spanish, Telugu

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC
PIER VIEW WAY

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 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
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 Accessibility: CONTACT
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PEDIATRICS

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Provider Gender: Female

License Number: A109056

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Provider Language(s)
Spoken: Hindi, Marathi,
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Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No
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VISTA COMMUNITY CLINIC
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

KRAMER, MELISSA

Provider ID: 469759

Provider Gender: Female

NPI: 1467833467

Provider English Spoken: Y


Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

D2. Directorio de atención primaria

Board Certified Specialty: No
Rady Childrens Health Network
MELISSA S KRAMER

 3605 VISTA WAY BLDG B
OCEANSIDE, CA 92056

 Phone: (760) 547-1010

Fax: (760) 547-1011


 After Hours Phone: (760)
547-1010

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

MACINTYRE, ELIZABETH

Provider ID: 543354

Provider Gender: Female


NPI: 1336520766

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: Yes
Rady Childrens Health Network
ELIZABETH T MACINTYRE


 3605 VISTA WAY BLDG B
STE 130

OCEANSIDE, CA 92056

 Phone: (760) 547-1010

Fax: (760) 547-1011

 After Hours Phone: (760)
547-1010

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

MCCAMMACK, BRADLEY


Provider ID: 206341

Provider Gender: Male

License Number: A130883

NPI: 1629368857

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

*Hospital Affiliation: TRI CITY
MEDICAL CTR*

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3731

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

MCCAMMACK, BRADLEY

Provider ID: 206341

Provider Gender: Male

License Number: A130883

NPI: 1629368857

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

*Hospital Affiliation: TRI CITY
MEDICAL CTR*


Board Certified Specialty: No
IHP of Southern Cal-PHP
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PEDIATRICS

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 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

*Hospital Affiliation: TRI CITY
MEDICAL CTR*

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

D2. Directorio de atención primaria

Fax: (760) 414-3731

☎ After Hours Phone: (760) 631-5000

🌐 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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♿ Accessibility: CONTACT PROVIDER

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Provider Gender: Male

License Number: A130883

NPI: 1629368857

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

📍 4700 N RIVER RD
OCEANSIDE, CA 92057

☎ Phone: (760) 631-5000

Fax: (760) 414-3731

☎ After Hours Phone: (760) 631-5000

🌐 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

MCCAMMACK, BRADLEY

Provider ID: 206341

Provider Gender: Male

License Number: A130883

NPI: 1629368857

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

MCCAMMACK, BRADLEY

Provider ID: 206341

Provider Gender: Male

License Number: A130883

NPI: 1629368857

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

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🌐 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

MILLER, DONALD

Provider ID: 433589

Provider Gender: Male

NPI: 1154356582

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS

HOSPITAL SAN DIEGO,

PALOMAR MEDICAL CENTER,

UCSF BENIOFF CHILDREN'S

HOSPITAL OAKLAND, SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network

DONALD T MILLER

📍 3605 VISTA WAY BLDG B

D2. Directorio de atención primaria

STE 130
OCEANSIDE, CA 92056
☎ Phone: (760) 547-1010
📞 After Hours Phone: (760)
547-1010

🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

PARK, RONALD

Provider ID: 271889
Provider Gender: Male
NPI: 1881695914

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
Rady Childrens Health Network
RONALD E PARK

📍 2210 MESA DR STE 300
OCEANSIDE, CA 92054
☎ Phone: (760) 736-6767
Fax: (760) 736-8740
📞 After Hours Phone: (760)
736-6767

🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS

PERKINS, RACHEL

Provider ID: 435952
Provider Gender: Female
NPI: 1427398320

☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
Rady Childrens Health Network
RACHEL E PERKINS

📍 3605 VISTA WAY STE 130
BLDG B
OCEANSIDE, CA 92056
☎ Phone: (760) 547-1010
📞 After Hours Phone: (760)
547-1010

🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

RONAN, KEVIN

Provider ID: 206341

Provider Gender: Male
License Number: G77176
NPI: 1225017353

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

📍 4700 N RIVER RD
OCEANSIDE, CA 92057
☎ Phone: (760) 631-5000
📞 After Hours Phone: (760)
631-5000
🌐 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

PEDIATRICS

RONAN, KEVIN

Provider ID: 206341
Provider Gender: Male
License Number: G77176
NPI: 1225017353

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY

D2. Directorio de atención primaria

MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000
After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

PEDIATRICS

RONAN, KEVIN

Provider ID: 206341

Provider Gender: Male

License Number: G77176

NPI: 1225017353

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000
After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

PEDIATRICS

RONAN, KEVIN

Provider ID: 206341

Provider Gender: Male

License Number: G77176

NPI: 1225017353

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000
After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

PEDIATRICS

RONAN, KEVIN

Provider ID: 206341

Provider Gender: Male

License Number: G77176

NPI: 1225017353

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000
After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER








Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

PEDIATRICS

RONAN, KEVIN



Provider ID: 206341






D2. Directorio de atención primaria

Provider Gender: Male
License Number: G77176
NPI: 1225017353
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

PEDIATRICS






ZACHRY, ALISON



Provider ID: 480247
Provider Gender: Female
License Number: A131678
NPI: 1922402858
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE
 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS








ZACHRY, ALISON

Provider ID: 480247
Provider Gender: Female
License Number: A131678
NPI: 1922402858
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE
 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS

ZACHRY, ALISON

Provider ID: 480247
Provider Gender: Female
License Number: A131678
NPI: 1922402858
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE
 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

D2. Directorio de atención primaria

PEDIATRICS

ZACHRY, ALISON

Provider ID: 480247

Provider Gender: Female

License Number: A131678

NPI: 1922402858

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:30PM

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480247

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 966-3306

 After Hours Phone: (760)
966-3306

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480247

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 966-3306

 After Hours Phone: (760)
966-3306

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480247

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 966-3306

 After Hours Phone: (760)
966-3306

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480247

Provider Gender: Male

License Number: PA22667

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Hospital Affiliation:

GROSSMONT HOSPITAL





Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054


D2. Directorio de atención primaria






 Phone: (760) 966-3306
 After Hours Phone: (760) 966-3306
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 480247
Provider Gender: Female
License Number: PA53036
NPI: 1922471192


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE






 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 966-3306
 After Hours Phone: (760) 966-3306
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 480247
Provider Gender: Female
License Number: PA53036
NPI: 1922471192


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE






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 After Hours Phone: (760) 966-3306
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
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 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 480247
Provider Gender: Female
License Number: PA53036
NPI: 1922471192


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE






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OCEANSIDE, CA 92054
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 After Hours Phone: (760) 966-3306
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
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 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 480247
Provider Gender: Female
License Number: PA53036
NPI: 1922471192

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE



 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 966-3306
 After Hours Phone: (760) 966-3306
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

POWAY

FAMILY PRACTICE

KAUR, JATINDER

Provider ID: 481187
Provider Gender: Female
License Number: A120771
NPI: 1912141391

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Punjabi,
Urdu

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE GOLD FAMILY



D2. Directorio de atención primaria

HEALTH CENTER

 13010 POWAY RD
POWAY, CA 92064
 Phone: (858) 218-3000
 After Hours Phone: (858)
218-3000
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM




FAMILY PRACTICE

KAUR, JATINDER

Provider ID: 481187
Provider Gender: Female
License Number: A120771
NPI: 1912141391
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Punjabi,
Urdu

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

NEIGHBORHOOD
HEALTHCARE GOLD FAMILY
HEALTH CENTER

 13010 POWAY RD
POWAY, CA 92064
 Phone: (858) 218-3000
 After Hours Phone: (858)
218-3000
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER


Hours: M-F 8:00AM-5:00PM

FQHC



**NEIGHBORHOOD
HEALTHCARE GOLD FAMILY
HEALTH CENTER,**

Provider ID: 481187


NPI: 1023518768


 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP

NEIGHBORHOOD
HEALTHCARE GOLD FAMILY
HEALTH CENTER

 13010 POWAY RD
POWAY, CA 92064
 Phone: (858) 218-3000
Fax: (360) 462-2742

 After Hours Phone: (858)
218-3000

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

**NEIGHBORHOOD
HEALTHCARE GOLD FAMILY
HEALTH CENTER,**






Provider ID: 481187

NPI: 1023518768

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP



NEIGHBORHOOD
HEALTHCARE GOLD FAMILY

HEALTH CENTER

 13010 POWAY RD
POWAY, CA 92064
 Phone: (858) 218-3000
Fax: (360) 462-2742
 After Hours Phone: (858)
218-3000
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS





CURET, ZULMA

Provider ID: 481187
Provider Gender: Female
License Number: A119661
NPI: 1841561107
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD

HEALTHCARE GOLD FAMILY
HEALTH CENTER

 13010 POWAY RD
POWAY, CA 92064
 Phone: (858) 218-3000
 After Hours Phone: (858)
218-3000
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

D2. Directorio de atención primaria

American Sign Language (ASL): Provider Gender: Female
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS


CURET, ZULMA

Provider ID: 481187

Provider Gender: Female

License Number: A119661

NPI: 1841561107

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE GOLD FAMILY

HEALTH CENTER

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

LINDBACK, SARAH

Provider ID: 161834


NPI: 1427345487

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, RADY CHILDRENS
HOSPITAL SAN DIEGO

Board Certified Specialty: No

Rady Childrens Health Network
SARAH M LINDBACK

 15725 POMERADO RD STE
203

POWAY, CA 92064

 Phone: (858) 673-3340

Fax: (858) 673-1075

 After Hours Phone: (858)
673-3340

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

LOSTETTER, ADRIENNE

Provider ID: 261797

Provider Gender: Female

NPI: 1881607984

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MARY BIRCH
HOSP FOR WOMEN AND
NEWBORNS, PALOMAR
HEALTH

Board Certified Specialty: No

Rady Childrens Health Network
ADRIENNE L LOSTETTER

 15725 POMERADO RD STE
203

POWAY, CA 92064

 Phone: (858) 673-3340

Fax: (858) 673-1075

 After Hours Phone: (858)
673-3340

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MOREIRA, LUCILA

Provider ID: 523761

Provider Gender: Female

NPI: 1104846567

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, RADY CHILDRENS
HOSPITAL SAN DIEGO

Board Certified Specialty: No

Rady Childrens Health Network
LUCILA K MOREIRA

 15725 POMERADO RD STE
203

POWAY, CA 92064

 Phone: (858) 673-3340

Fax: (858) 673-1075

 After Hours Phone: (858)
673-3340

 Website: N/A

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Provider Gender: Female

N

 Accessibility: CONTACT PROVIDER

Hours: SU-SA 8:00AM-5:00PM

PEDIATRICS

MORTIMER, DORI

Provider ID: 230552

Provider Gender: Female

NPI: 1417928417

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MARY BIRCH
HOSP FOR WOMEN AND
NEWBORNS, PALOMAR
HEALTH

Board Certified Specialty: No


Rady Childrens Health Network
DORI R MORTIMER

 15725 POMERADO RD STE
203

POWAY, CA 92064

 Phone: (858) 673-3340

Fax: (858) 673-1075

 After Hours Phone: (858)
673-3340


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

RAMGREN, AILEEN

Provider ID: 397707

NPI: 1356785505

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No

Rady Childrens Health Network
AILEEN N RAMGREN

 15725 POMERADO RD STE
203

POWAY, CA 92064

 Phone: (858) 673-3340

 After Hours Phone: (858)
673-3340

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

RENDLER, NATHAN

Provider ID: 30205

Provider Gender: Male

NPI: 1275531337

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Hebrew, Spanish,
Yiddish

Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR HEALTH

Board Certified Specialty: No


Rady Childrens Health Network
NATHAN RENDLER

 15525 POMERADO RD STE 1

POWAY, CA 92064

 Phone: (858) 487-8333

Fax: (858) 487-0856


 After Hours Phone: (858)
487-8333

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM
SA 9:00AM-5:00PM

PEDIATRICS

TAI, KUANGKAI

Provider ID: 351834

Provider Gender: Male

NPI: 1396744066

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Chinese, Mandarin,
Spanish

Cultural Competency: N


Hospital Affiliation: PALOMAR
HEALTH, RADY CHILDRENS
HOSPITAL SAN DIEGO

Board Certified Specialty: No


Rady Childrens Health Network
KUANGKAI TAI

 15525 POMERADO RD STE
B1



POWAY, CA 92064

 Phone: (858) 487-8333

Fax: (858) 487-0856


 After Hours Phone: (858)
484-4003






D2. Directorio de atención primaria

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:00PM
SA 8:30AM-0:00PM

PHYSICIANS ASSISTANT

BALDWIN, DONNA


Provider ID: 481187
Provider Gender: Female
License Number: PA23310
NPI: 1649692369
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE GOLD FAMILY
HEALTH CENTER

 13010 POWAY RD
POWAY, CA 92064
 Phone: (858) 218-3000
 After Hours Phone: (858)
218-3000
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-4:30PM

PHYSICIANS ASSISTANT

BALDWIN, DONNA

Provider ID: 481187
Provider Gender: Female

License Number: PA23310
NPI: 1649692369
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE GOLD FAMILY
HEALTH CENTER



 13010 POWAY RD
POWAY, CA 92064
 Phone: (858) 218-3000
 After Hours Phone: (858)
218-3000
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-4:30PM

RAMONA





CERTIFIED NURSE

PRACTITIONER

DOAN, CHINH

Provider ID: 449438
Provider Gender: Female
License Number: NP18874
NPI: 1083845069
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE



 220 ROTANZI ST
RAMONA, CA 92065

 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

DOAN, CHINH

Provider ID: 449438
Provider Gender: Female
License Number: NP18874
NPI: 1083845069
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 220 ROTANZI ST
RAMONA, CA 92065
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FQHC

TRUECARE,


Provider ID: 449438
NPI: 1245246917

D2. Directorio de atención primaria

 *Provider English Spoken: Y* SA 8:00AM-0:00PM
Cultural Competency: N

IHP of Southern Cal-PHP
TRUECARE

 220 ROTANZI ST
RAMONA, CA 92065

 *Phone: (760) 736-6767*

Fax: (760) 736-6744

 *After Hours Phone: (760)*
736-6767

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FQHC

TRUECARE,

Provider ID: 449438


NPI: 1245246917

 *Provider English Spoken: Y*
Cultural Competency: N

IHP of Southern Cal-PHP

TRUECARE

 220 ROTANZI ST
RAMONA, CA 92065

 *Phone: (760) 736-6767*

Fax: (760) 736-6744

 *After Hours Phone: (760)*
736-6767

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE


YUNG, DORIS


Provider ID: 449438

Provider Gender: Female

License Number: A89893

NPI: 1730386863

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Chinese, Mandarin,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


ENCINITAS


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 220 ROTANZI ST
RAMONA, CA 92065

 *Phone: (760) 736-6767*

 *After Hours Phone: (760)*
736-6767

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

INTERNAL MEDICINE

YUNG, DORIS

Provider ID: 449438

Provider Gender: Female

License Number: A89893

NPI: 1730386863

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Chinese, Mandarin,

Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


ENCINITAS


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 220 ROTANZI ST
RAMONA, CA 92065

 *Phone: (760) 736-6767*

 *After Hours Phone: (760)*
736-6767

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

PEDIATRICS


ZACHRY, ALISON


Provider ID: 449438

Provider Gender: Female

License Number: A131678

NPI: 1922402858

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR


Board Certified Specialty: No

IHP of Southern Cal-PHP



TRUECARE

 220 ROTANZI ST
RAMONA, CA 92065

 *Phone: (760) 736-6767*



 *After Hours Phone: (760)*

D2. Directorio de atención primaria

736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS


ZACHRY, ALISON






Provider ID: 449438
Provider Gender: Female
License Number: A131678
NPI: 1922402858
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 220 ROTANZI ST
RAMONA, CA 92065
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PHYSICIANS ASSISTANT


CHISWICK, GARY






Provider ID: 449438
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 220 ROTANZI ST
RAMONA, CA 92065
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT


CHISWICK, GARY

Provider ID: 449438
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 220 ROTANZI ST
RAMONA, CA 92065
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

REIFENBERGER, JODY

Provider ID: 449438
Provider Gender: Female
License Number: PA22669
NPI: 1386741072
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE
 220 ROTANZI ST
RAMONA, CA 92065
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


PHYSICIANS ASSISTANT






REIFENBERGER, JODY

Provider ID: 449438
Provider Gender: Female
License Number: PA22669

D2. Directorio de atención primaria

NPI: 1386741072


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE






 220 ROTANZI ST
RAMONA, CA 92065
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 449438
Provider Gender: Female
License Number: PA53036
NPI: 1922471192


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE






 220 ROTANZI ST
RAMONA, CA 92065
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 449438
Provider Gender: Female
License Number: PA53036
NPI: 1922471192


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE




 220 ROTANZI ST
RAMONA, CA 92065
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER



PHYSICIANS ASSISTANT

ZANGEN, ROCHELLE

Provider ID: 449438
Provider Gender: Female
License Number: PA51494
NPI: 1447681150

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE


 220 ROTANZI ST
RAMONA, CA 92065
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767





 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

ZANGEN, ROCHELLE

Provider ID: 449438
Provider Gender: Female
License Number: PA51494
NPI: 1447681150

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 220 ROTANZI ST
RAMONA, CA 92065
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

SAN DIEGO

CARDIOVASCULAR DISEASE

BLUM, RICHARD

Provider ID: 417937
Provider Gender: Male
License Number: G53758
NPI: 1043310030





 Provider English Spoken: Y



D2. Directorio de atención primaria

Cultural Competency: N
*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL*
Board Certified Specialty: No
*Family Health Centers of San
Diego*
*FAMILY HLTH CTR SD
HILLCREST*

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
*American Sign Language (ASL):
N*
 Accessibility: CONTACT
PROVIDER

CARDIOVASCULAR DISEASE **BLUM, RICHARD**

Provider ID: 417937
Provider Gender: Male
License Number: G53758
NPI: 1043310030
 Provider English Spoken: Y
Cultural Competency: N
*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL*
Board Certified Specialty: No
*Family Health Centers of San
Diego*
*FAMILY HLTH CTR SD
HILLCREST*
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)

515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
*American Sign Language (ASL):
N*
 Accessibility: CONTACT
PROVIDER

CARDIOVASCULAR DISEASE **GARIBYAN, VARTAN**

Provider ID: 417937
Provider Gender: Male
License Number: 20A12504
NPI: 1790084143
 Provider English Spoken: Y
Cultural Competency: N
*Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS GREEN
HOSPITAL*
Board Certified Specialty: No
*Family Health Centers of San
Diego*
*FAMILY HLTH CTR SD
HILLCREST*
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
*American Sign Language (ASL):
N*
 Accessibility: CONTACT

PROVIDER
*Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM*

CARDIOVASCULAR DISEASE **GARIBYAN, VARTAN**

Provider ID: 417937
Provider Gender: Male
License Number: 20A12504
NPI: 1790084143
 Provider English Spoken: Y
Cultural Competency: N
*Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS GREEN
HOSPITAL*
Board Certified Specialty: No
*Family Health Centers of San
Diego*
*FAMILY HLTH CTR SD
HILLCREST*
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
*American Sign Language (ASL):
N*
 Accessibility: CONTACT
PROVIDER
*Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM*

CERTIFIED NURSE

D2. Directorio de atención primaria

PRACTITIONER

AQUINO, FELINO

Provider ID: 418535

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

Provider English Spoken: Y

Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

Operation Samahan

OPERATION SAMAHAN

RANCHO PENASQUITOS

9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 418535

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

Provider English Spoken: Y

Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

Operation Samahan

OPERATION SAMAHAN

RANCHO PENASQUITOS

9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 432308

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

Provider English Spoken: Y

Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

Operation Samahan

OPERATION SAMAHAN - MIRA MESA

9855 ERMA RD STE 105 SAN DIEGO, CA 92131

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 432308

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

Provider English Spoken: Y

Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

Operation Samahan

OPERATION SAMAHAN - MIRA MESA

9855 ERMA RD STE 105 SAN DIEGO, CA 92131

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

D2. Directorio de atención primaria

PRACTITIONER

ARTS, SERENA

Provider ID: 403583

Provider Gender: Female

License Number: NP10769

NPI: 1801881552

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

ARTS, SERENA

Provider ID: 403583

Provider Gender: Female

License Number: NP10769

NPI: 1801881552

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE


FAMILY HEALTH CENTER

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

BELEN, NEZER

Provider ID: 206363

Provider Gender: Male

License Number: NP95009292

NPI: 1386120723

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San
Diego


DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

BELEN, NEZER

Provider ID: 206363

Provider Gender: Male

License Number: NP95009292

NPI: 1386120723

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San
Diego


DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

BELTRON, KIMBERLY

Provider ID: 403583

Provider Gender: Female

License Number: NP95020497

NPI: 1871295493

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER


 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 233-8500

D2. Directorio de atención primaria

 After Hours Phone: (619) 233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

BELTRON, KIMBERLY

Provider ID: 403583

Provider Gender: Female

License Number: NP95020497


NPI: 1871295493


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619) 233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

BESTERFELDT, LYDIA

Provider ID: 482070

Provider Gender: Female

License Number: NP95013060


NPI: 1265929442


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858) 810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BESTERFELDT, LYDIA

Provider ID: 482070

Provider Gender: Female

License Number: NP95013060


NPI: 1265929442


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)

810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BURNS, DELLA

Provider ID: 233597

Provider Gender: Female

License Number: NP7413


NPI: 1871577023


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619) 563-0250

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

BURNS, DELLA

D2. Directorio de atención primaria

Provider ID: 233597

Provider Gender: Female

License Number: NP7413

NPI: 1871577023


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4290 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619)
563-0250

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

CELESTIN-RAMSEY, AKANKE

Provider ID: 451167

Provider Gender: Female

License Number: NP8563

NPI: 1447450275

Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP


KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE

SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

CELESTIN-RAMSEY, AKANKE

Provider ID: 451167

Provider Gender: Female

License Number: NP8563

NPI: 1447450275


Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP

KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

CHASE, AVA LOU

Provider ID: 206360

Provider Gender: Female

License Number: NP95000602

NPI: 1164496386

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

CHASE, AVA LOU


Provider ID: 206360

Provider Gender: Female

License Number: NP95000602

D2. Directorio de atención primaria

NPI: 1164496386

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


DHARKAR-SURBER, SAPNA


Provider ID: 185268

Provider Gender: Female

License Number: NP95013257

NPI: 1538707765

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Marathi, Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA


VISTA, SCRIPPS MERCY
HOSPITAL


Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org
g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER


DHARKAR-SURBER, SAPNA


Provider ID: 185268

Provider Gender: Female

License Number: NP95013257

NPI: 1538707765

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Marathi, Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA


VISTA, SCRIPPS MERCY
HOSPITAL


Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org
g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

DO, ELAINE

Provider ID: 233532

Provider Gender: Female

License Number: NP95019446

NPI: 1215696307


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

D2. Directorio de atención primaria

American Sign Language (ASL): **GALLEGOS, CYNTHIA**

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

DO, ELAINE

Provider ID: 233532

Provider Gender: Female

License Number: NP95019446

NPI: 1215696307

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
IHP of Southern Cal-PHP


MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE


PRACTITIONER

Provider ID: 206360

Provider Gender: Female

License Number: NP95016217

NPI: 1174105589

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


GALLEGOS, CYNTHIA


Provider ID: 206360

Provider Gender: Female

License Number: NP95016217

NPI: 1174105589

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San

Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

GARCIA, JOHNNY


Provider ID: 206363

Provider Gender: Male

License Number: NP95007000

NPI: 1932622156

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

D2. Directorio de atención primaria

American Sign Language (ASL): NPI: 1134686744

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


GARCIA, JOHNNY

Provider ID: 206363

Provider Gender: Male

License Number: NP95007000

NPI: 1932622156

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE


PRACTITIONER

GOLDFINGER, SARAH

Provider ID: 206360

Provider Gender: Female

License Number: NP95011313

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


GOLDFINGER, SARAH

Provider ID: 206360

Provider Gender: Female

License Number: NP95011313

NPI: 1134686744

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

HA, THU

Provider ID: 482070

Provider Gender: Female

License Number: NP95010517

NPI: 1346443983

 Provider English Spoken: Y

 Provider Language(s) Spoken: Vietnamese


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858) 810-8700


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

HA, THU

Provider ID: 206046


D2. Directorio de atención primaria


Provider Gender: Female
License Number: NP95010517
NPI: 1346443983

Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

HA, THU

Provider ID: 482070

Provider Gender: Female


License Number: NP95010517

NPI: 1346443983

Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

HA, THU

Provider ID: 206046

Provider Gender: Female


License Number: NP95010517


NPI: 1346443983

Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

HA, THU

Provider ID: 206046

Provider Gender: Female


License Number: NP95010517


NPI: 1346443983


Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925


 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

HA, THU

Provider ID: 206046

Provider Gender: Female

License Number: NP95010517

NPI: 1346443983

Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE

D2. Directorio de atención primaria

CTR

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858)
279-0925
Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

**HARRINGTON, BARBARA
LORRAINE**

Provider ID: 185268

Provider Gender: Female

License Number: NP17008

NPI: 1659579134

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619)
255-9155

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER

**HARRINGTON, BARBARA
LORRAINE**

Provider ID: 185268

Provider Gender: Female

License Number: NP17008

NPI: 1659579134

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619)
255-9155

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER

HART, BECKY

Provider ID: 403583

Provider Gender: Female

License Number: NP95025699

NPI: 1316626344

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 645-6405

After Hours Phone: (619)
645-6405

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

HART, BECKY

Provider ID: 403583

Provider Gender: Female

License Number: NP95025699

NPI: 1316626344

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 645-6405

After Hours Phone: (619)
645-6405

Website: N/A

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


HILL, GENIELYN


Provider ID: 417101

Provider Gender: Female

License Number: NP95020046

NPI: 1710632435

 Provider English Spoken: Y

 Provider Language(s) Spoken: Tagalog

Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN - MIRA MESA

 10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426


 After Hours Phone: (844) 200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE


PRACTITIONER


HILL, GENIELYN

Provider ID: 417101

Provider Gender: Female

License Number: NP95020046
NPI: 1710632435

 Provider English Spoken: Y

 Provider Language(s) Spoken: Tagalog

Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN - MIRA MESA

 10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844) 200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

HILLIARD, THESALONICA


Provider ID: 417101

Provider Gender: Female

License Number: NP95010585

NPI: 1861956724

 Provider English Spoken: Y

 Provider Language(s) Spoken: Tagalog

Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN - MIRA MESA

 10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844) 200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

HILLIARD, THESALONICA


Provider ID: 417101

Provider Gender: Female

License Number: NP95010585

NPI: 1861956724

 Provider English Spoken: Y

 Provider Language(s) Spoken: Tagalog

Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


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 10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844) 200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE PRACTITIONER

HOANG, CHI

Provider ID: 482070

Provider Gender: Female

License Number: NP95004600

NPI: 1902350994


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700


 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HOANG, CHI

Provider ID: 482070

Provider Gender: Female

License Number: NP95004600

NPI: 1902350994

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER


HOGAN, ROSELYNN JOY

Provider ID: 206362

Provider Gender: Female

License Number: NP17852

NPI: 1205019510

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Thai


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424


 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

HOGAN, ROSELYNN JOY

Provider ID: 206362

Provider Gender: Female

License Number: NP17852

NPI: 1205019510

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Thai


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424


 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

HOGAN, ROSELYNN JOY

D2. Directorio de atención primaria

Provider ID: 206362
Provider Gender: Female
License Number: NP17852
NPI: 1205019510
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Thai
Cultural Competency: N
Board Certified Specialty: No

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

CERTIFIED NURSE


PRACTITIONER

HOGAN, ROSELYNN JOY

Provider ID: 206362
Provider Gender: Female
License Number: NP17852
NPI: 1205019510
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Thai
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San

Diego
NORTH PARK FAMILY HEALTH CENTERS
 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

CERTIFIED NURSE





PRACTITIONER


HOGAN, ROSELYNN JOY

Provider ID: 206360
Provider Gender: Female
License Number: NP17852
NPI: 1205019510
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Thai
Cultural Competency: N
Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER






CERTIFIED NURSE

PRACTITIONER

HOGAN, ROSELYNN JOY

Provider ID: 206360
Provider Gender: Female
License Number: NP17852
NPI: 1205019510
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Thai
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

HORNEY, KRISTAN

Provider ID: 403583
Provider Gender: Female

D2. Directorio de atención primaria

License Number: NP95007712


NPI: 1720590904


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500


 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

HORNEY, KRISTAN

Provider ID: 403583

Provider Gender: Female

License Number: NP95007712


NPI: 1720590904


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER


INSTONE, SUSAN

Provider ID: 233532

Provider Gender: Female

License Number: NP4858

NPI: 1710223268

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058


 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

INSTONE, SUSAN

Provider ID: 233532

Provider Gender: Female

License Number: NP4858

NPI: 1710223268

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
IHP of Southern Cal-PHP


MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

INSTONE, SUSAN


Provider ID: 482070

Provider Gender: Female

License Number: NP4858

D2. Directorio de atención primaria

NPI: 1710223268

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700


 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


INSTONE, SUSAN

Provider ID: 482070

Provider Gender: Female

License Number: NP4858

NPI: 1710223268

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


JOHNSON, SHAWNA AKIKO

Provider ID: 233597

Provider Gender: Female

License Number: NP95002518
NPI: 1922237809

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619)
563-0250

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

JOHNSON, SHAWNA AKIKO

Provider ID: 233597

Provider Gender: Female

License Number: NP95002518
NPI: 1922237809

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619)
563-0250

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


KEMP, KATHRINE

Provider ID: 403583

Provider Gender: Female

License Number: NP95018497
NPI: 1316615313

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

D2. Directorio de atención primaria

IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619)
233-8500

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

KEMP, KATHRINE

Provider ID: 403583
Provider Gender: Female
License Number: NP95018497
NPI: 1316615313

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619)
233-8500

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

KHAN, MATTHEW

Provider ID: 417987
Provider Gender: Male
License Number: NP17838
NPI: 1942456124

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HEALTH CTR IBARRA

4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619)
515-2426

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

KHAN, MATTHEW

Provider ID: 417987
Provider Gender: Male
License Number: NP17838
NPI: 1942456124

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HEALTH CTR IBARRA

4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619)
515-2426

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

KI, TRISH

Provider ID: 482070
Provider Gender: Female
License Number: NP23847
NPI: 1376840199

Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858)
810-8700

Website: www.sdfamilycare
.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER


KI, TRISH

Provider ID: 206046

Provider Gender: Female

License Number: NP23847

NPI: 1376840199

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Vietnamese*


Cultural Competency: N


Board Certified Specialty: No IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE

CTR

 *6973 LINDA VISTA RD
SAN DIEGO, CA 92111*

 *Phone: (858) 279-0925*

 *After Hours Phone: (858) 279-0925*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM*

CERTIFIED NURSE PRACTITIONER


KI, TRISH

Provider ID: 206046

Provider Gender: Female

License Number: NP23847

NPI: 1376840199

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Vietnamese*


Cultural Competency: N


Board Certified Specialty: No IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE

CTR

 *6973 LINDA VISTA RD
SAN DIEGO, CA 92111*

 *Phone: (858) 279-0925*

 *After Hours Phone: (858) 279-0925*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM*

CERTIFIED NURSE PRACTITIONER


KI, TRISH


Provider ID: 482070

Provider Gender: Female

License Number: NP23847

NPI: 1376840199

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Vietnamese*

Cultural Competency: N


Board Certified Specialty: No IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 *7011 LINDA VISTA RD
SAN DIEGO, CA 92111*

 *Phone: (858) 810-8700*

 *After Hours Phone: (858) 810-8700*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

KI, TRISH


Provider ID: 206046

Provider Gender: Female

License Number: NP23847

NPI: 1376840199

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Vietnamese*


Cultural Competency: N


Board Certified Specialty: No IHP of Southern Cal-PHP


LINDA VISTA HEALTH CARE

CTR

 *6973 LINDA VISTA RD
SAN DIEGO, CA 92111*

 *Phone: (858) 279-0925*


 *After Hours Phone: (858) 279-0925*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM*

D2. Directorio de atención primaria

CERTIFIED NURSE PRACTITIONER

KI, TRISH

Provider ID: 206046

Provider Gender: Female

License Number: NP23847

NPI: 1376840199

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE

CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

KLOBERDANZ, KELSEY

Provider ID: 417937

Provider Gender: Female

License Number: NP95005293

NPI: 1235672502

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

KLOBERDANZ, KELSEY

Provider ID: 417937

Provider Gender: Female

License Number: NP95005293

NPI: 1235672502

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San


Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

LENNON, RYAN

Provider ID: 624977

Provider Gender: Female

License Number: NP95027593

NPI: 1558084855

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San

Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 2204 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2355

 After Hours Phone: (619)
515-2355

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

LENNON, RYAN

Provider ID: 624977

Provider Gender: Female

License Number: NP95027593

NPI: 1558084855

Provider English Spoken: Y

D2. Directorio de atención primaria

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

2204 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2355

After Hours Phone: (619) 515-2355

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

LIEBER, CAROL

Provider ID: 517403

Provider Gender: Female

License Number: NP20849

NPI: 1487889846

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE

316 25TH ST
SAN DIEGO, CA 92102

Phone: (619) 238-5551

After Hours Phone: (619) 238-5551

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

LIEBER, CAROL

Provider ID: 517403

Provider Gender: Female

License Number: NP20849

NPI: 1487889846

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE

316 25TH ST
SAN DIEGO, CA 92102

Phone: (619) 238-5551

After Hours Phone: (619) 238-5551

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

LIM, IMELDA

Provider ID: 417101

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N
Board Certified Specialty: No

Operation Samahan

OPERATION SAMAHAN - MIRA MESA

10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

LIM, IMELDA

Provider ID: 417101

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No
Operation Samahan

OPERATION SAMAHAN - MIRA MESA

10737 CAMINO RUIZ STE

D2. Directorio de atención primaria


235
SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426
 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

LU, TAMMY
Provider ID: 206360
Provider Gender: Female
License Number: NP95007253
NPI: 1457879132
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):


N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

LU, TAMMY
Provider ID: 206360
Provider Gender: Female
License Number: NP95007253
NPI: 1457879132
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER






 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

MARTIN, RIA
Provider ID: 206363
Provider Gender: Female
License Number: NP95005321
NPI: 1437695079
 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


MARTIN, RIA
Provider ID: 206363
Provider Gender: Female
License Number: NP95005321
NPI: 1437695079
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\None

American Sign Language (ASL): Provider Gender: Female

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


MARTINEZ, CAROLYN

Provider ID: 214492

Provider Gender: Female

License Number: NP22031

NPI: 1609101997

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NESTOR COMMUNITY

HEALTH CENTER

 1016 OUTER RD

SAN DIEGO, CA 92154

 Phone: (619) 429-3733

 After Hours Phone: (619) 429-3733

 Website: www.ibclinic.org

Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:00PM

TU-TH 8:30AM-8:00PM

F 8:30AM-5:00PM

CERTIFIED NURSE


PRACTITIONER

MARTINEZ, CAROLYN

Provider ID: 214492

License Number: NP22031

NPI: 1609101997

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NESTOR COMMUNITY

HEALTH CENTER

 1016 OUTER RD

SAN DIEGO, CA 92154

 Phone: (619) 429-3733

 After Hours Phone: (619) 429-3733

 Website: www.ibclinic.org

Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:00PM

TU-TH 8:30AM-8:00PM

F 8:30AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

MELTZER, VIRGINIA

Provider ID: 233532

Provider Gender: Female

License Number: NP95015948

NPI: 1821684390

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,


UCSD LA JOLLA JOHN SALLY THORNTON


Board Certified Specialty: No
IHP of Southern Cal-PHP


MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619) 280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

MELTZER, VIRGINIA

Provider ID: 233532

Provider Gender: Female

License Number: NP95015948

NPI: 1821684390

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,

UCSD LA JOLLA JOHN SALLY

THORNTON

Board Certified Specialty: No

IHP of Southern Cal-PHP


MID-CITY COMMUNITY CLINIC





 4305 UNIVERSITY AVE STE 150

D2. Directorio de atención primaria

SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 After Hours Phone: (619) 280-2058
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM


CERTIFIED NURSE PRACTITIONER




MENDOZA, GRETEL MARIE
Provider ID: 417101
Provider Gender: Female
License Number: NP95002233
NPI: 1245652387
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA MESA

 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER






MENDOZA, GRETEL MARIE

Provider ID: 417101
Provider Gender: Female
License Number: NP95002233
NPI: 1245652387
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA MESA


 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER





CERTIFIED NURSE PRACTITIONER

MORAN, TIFFANY
Provider ID: 207382
Provider Gender: Female
License Number: NP95011037
NPI: 1730730649
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO AMERICAN

INDIAN HEALTH CENTER
 2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
 After Hours Phone: (619) 234-2158
 Website: WWW.SDAIHC.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Indian Health Services: Y

CERTIFIED NURSE PRACTITIONER

MORAN, TIFFANY
Provider ID: 207382
Provider Gender: Female
License Number: NP95011037
NPI: 1730730649
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO AMERICAN
INDIAN HEALTH CENTER

 2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
 After Hours Phone: (619) 234-2158
 Website: WWW.SDAIHC.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT



D2. Directorio de atención primaria

PROVIDER
Hours: M-F 8:00AM-5:00PM
Indian Health Services: Y

CERTIFIED NURSE **PRACTITIONER**

NEVAREZ, IRENE

Provider ID: 185268
Provider Gender: Female
License Number: NP95009891
NPI: 1003166646

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 564-8765
 After Hours Phone: (619)
564-8765
 Website: www.lamaestra.org

Email:
aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE **PRACTITIONER**

NEVAREZ, IRENE

Provider ID: 185268
Provider Gender: Female
License Number: NP95009891
NPI: 1003166646

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 564-8765
 After Hours Phone: (619)
564-8765
 Website: www.lamaestra.org

Email:
aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE **PRACTITIONER**

NGUYEN, NINA


Provider ID: 417101

Provider Gender: Female
License Number: NP95020179
NPI: 1417699869

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE **PRACTITIONER**


NGUYEN, NINA

Provider ID: 417101
Provider Gender: Female
License Number: NP95020179
NPI: 1417699869


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126

D2. Directorio de atención primaria

 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE PRACTITIONER

NOCEDA, ANA



Provider ID: 233532
Provider Gender: Female
License Number: NP19505
NPI: 1386971760

Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC


 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

 Phone: (619) 280-2058
 After Hours Phone: (619) 280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER


NOCEDA, ANA



Provider ID: 233532
Provider Gender: Female
License Number: NP19505
NPI: 1386971760

Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO


Board Certified Specialty: No
IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

 Phone: (619) 280-2058
 After Hours Phone: (619) 280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER

NOCEDA, ANA



Provider ID: 482070
Provider Gender: Female
License Number: NP19505
NPI: 1386971760


Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700
 After Hours Phone: (858) 810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM


CERTIFIED NURSE PRACTITIONER

NOCEDA, ANA

Provider ID: 482070
Provider Gender: Female
License Number: NP19505
NPI: 1386971760


Provider English Spoken: Y

D2. Directorio de atención primaria

 *Provider Language(s)
Spoken: Tagalog*
Cultural Competency: N
*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*

*Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE*

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 810-8700*
 *After Hours Phone: (858)
810-8700*

 *Website: www.sdfamilycare
.org*

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\None*

*American Sign Language (ASL):
N*



 *Accessibility: CONTACT
PROVIDER*

*Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM*

CERTIFIED NURSE PRACTITIONER

OCAMPO, ELAINE

*Provider ID: 482070
Provider Gender: Female
License Number: NP95003427
NPI: 1063856805*

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Mandarin, Yue
Chinese*

*Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP*

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 810-8700*
 *After Hours Phone: (858)
810-8700*

 *Website: www.sdfamilycare
.org*

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\None*



*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

CERTIFIED NURSE PRACTITIONER

OCAMPO, ELAINE

*Provider ID: 482070
Provider Gender: Female
License Number: NP95003427
NPI: 1063856805*

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Mandarin, Yue
Chinese*

*Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE*

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 810-8700*
 *After Hours Phone: (858)
810-8700*

 *Website: www.sdfamilycare
.org*

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\None*

*American Sign Language (ASL):
N*



 *Accessibility: CONTACT*

PROVIDER

CERTIFIED NURSE PRACTITIONER


OCAMPO, ELAINE

*Provider ID: 206046
Provider Gender: Female
License Number: NP95003427
NPI: 1063856805*

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Mandarin, Yue
Chinese*

*Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR*

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
 *After Hours Phone: (858)
279-0925*

 *Website: www.sdfamilycare
.org*

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

CERTIFIED NURSE PRACTITIONER

OCAMPO, ELAINE

*Provider ID: 206046
Provider Gender: Female
License Number: NP95003427
NPI: 1063856805*

 *Provider English Spoken: Y*
 *Provider Language(s)*

D2. Directorio de atención primaria

Spoken: Mandarin, Yue Chinese
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

After Hours Phone: (858)
279-0925

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

OCAMPO, ELAINE

Provider ID: 206046

Provider Gender: Female

License Number: NP95003427

NPI: 1063856805

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin, Yue
Chinese

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE

CTR

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

After Hours Phone: (858)
279-0925

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

OCAMPO, ELAINE

Provider ID: 206046

Provider Gender: Female

License Number: NP95003427

NPI: 1063856805

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin, Yue
Chinese

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE

CTR

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

After Hours Phone: (858)
279-0925

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

ODA, THAGHAR

Provider ID: 206363

Provider Gender: Female

License Number: NP95000205

NPI: 1063835692

Provider English Spoken: Y

Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

ODA, THAGHAR

Provider ID: 206363

Provider Gender: Female

License Number: RN810863

NPI: 1063835692

Provider English Spoken: Y

Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

D2. Directorio de atención primaria

DIAMOND NEIGHBORHOODS N

FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

ODA, THAGHAR

Provider ID: 206363

Provider Gender: Female

License Number: RN810863

NPI: 1063835692

Provider English Spoken: Y

Provider Language(s)
Spoken: Amharic, Arabic

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS N

FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

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515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

ODA, THAGHAR

Provider ID: 206363

Provider Gender: Female

License Number: NP95000205

NPI: 1063835692

Provider English Spoken: Y

Provider Language(s)
Spoken: Amharic, Arabic

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

ODA, THAGHAR

Provider ID: 206360

Provider Gender: Female

License Number: NP95000205

NPI: 1063835692

Provider English Spoken: Y

Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

ODA, THAGHAR

Provider ID: 206360

Provider Gender: Female

License Number: RN810863

NPI: 1063835692

Provider English Spoken: Y

Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N





Board Certified Specialty: No

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113








D2. Directorio de atención primaria

 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER








ODA, THAGHAR

Provider ID: 206360
Provider Gender: Female
License Number: RN810863
NPI: 1063835692
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER



ODA, THAGHAR

Provider ID: 206360
Provider Gender: Female
License Number: NP95000205
NPI: 1063835692
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER





CERTIFIED NURSE

PRACTITIONER

ORPILLA, IMELDA

Provider ID: 417101
Provider Gender: Female
License Number: NP95003211
NPI: 1790785988
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N






Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA MESA

 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

ORPILLA, IMELDA

Provider ID: 418535
Provider Gender: Female
License Number: NP95003211
NPI: 1790785988
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN RANCHO PENASQUITOS
 9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org

D2. Directorio de atención primaria

mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


ORPILLA, IMELDA

Provider ID: 417101

Provider Gender: Female

License Number: NP95003211

NPI: 1790785988

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: *www.operationsa
mahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER


ORPILLA, IMELDA

Provider ID: 418535

Provider Gender: Female

License Number: NP95003211

NPI: 1790785988

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN

RANCHO PENASQUITOS

 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: *www.operationsa
mahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

OWEN, MICHAEL


Provider ID: 206362

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San


Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424


 After Hours Phone: (619)
515-2424

 Website: *www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:30PM

F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

OWEN, MICHAEL


Provider ID: 206362

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: *www.fhcsd.org*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

D2. Directorio de atención primaria

American Sign Language (ASL): Provider ID: 206362

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER


OWEN, MICHAEL

Provider ID: 206362

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

CERTIFIED NURSE


PRACTITIONER


OWEN, MICHAEL

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER


OWEN, MICHAEL


Provider ID: 206363

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

OWEN, MICHAEL

Provider ID: 206363

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

D2. Directorio de atención primaria

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

PADILLA, MICHELE

Provider ID: 403583

Provider Gender: Female

License Number: NP95020636


NPI: 1356083828


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER

PADILLA, MICHELE

Provider ID: 403583

Provider Gender: Female


License Number: NP95020636


NPI: 1356083828

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER

PATEL, KELLY

Provider ID: 402851

Provider Gender: Female

License Number: NP95004735

NPI: 1033493747

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

PATEL, KELLY

Provider ID: 402851

Provider Gender: Female

License Number: NP95004735

NPI: 1033493747

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego


FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

D2. Directorio de atención primaria

PATIAG, DANIEL

Provider ID: 206046

Provider Gender: Male

License Number: NP95012511

NPI: 1073169769

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE

CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

PATIAG, DANIEL

Provider ID: 206046

Provider Gender: Male

License Number: NP95012511

NPI: 1073169769

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

PATIAG, DANIEL

Provider ID: 206046

Provider Gender: Male

License Number: NP95012511

NPI: 1073169769

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE

CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

PATIAG, DANIEL

Provider ID: 482070

Provider Gender: Male

License Number: NP95012511

NPI: 1073169769

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

PATIAG, DANIEL

Provider ID: 482070

D2. Directorio de atención primaria

Provider Gender: Male

License Number: NP95012511

NPI: 1073169769

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858)
810-8700

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

PATIAG, DANIEL

Provider ID: 206046

Provider Gender: Male

License Number: NP95012511

NPI: 1073169769

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

After Hours Phone: (858)
279-0925

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

PERRY, KATHERINE

Provider ID: 207382

Provider Gender: Female

License Number: NP95014964

NPI: 1215543426

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN DIEGO AMERICAN

INDIAN HEALTH CENTER

2630 1ST AVE
SAN DIEGO, CA 92103

Phone: (619) 234-2158

After Hours Phone: (619)
234-2158

Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:00PM

Indian Health Services: Y

CERTIFIED NURSE

PRACTITIONER

PERRY, KATHERINE

Provider ID: 207382

Provider Gender: Female

License Number: NP95014964

NPI: 1215543426

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN DIEGO AMERICAN

INDIAN HEALTH CENTER

2630 1ST AVE
SAN DIEGO, CA 92103

Phone: (619) 234-2158

After Hours Phone: (619)
234-2158

Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

Indian Health Services: Y

CERTIFIED NURSE

PRACTITIONER

QUINTO, CINDY

Provider ID: 482070


Provider Gender: Female

License Number: NP16433

NPI: 1902810377


Provider English Spoken: Y

D2. Directorio de atención primaria

 *Provider Language(s)
Spoken: French, Lao,
Spanish*
Cultural Competency: N
*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*


Board Certified Specialty: No
*IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE*

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 810-8700*
 *After Hours Phone: (858)
810-8700*

 *Website: www.sdfamilycare
.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

CERTIFIED NURSE

PRACTITIONER


QUINTO, CINDY


Provider ID: 482070

Provider Gender: Female

License Number: NP16433

NPI: 1902810377

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: French, Lao,
Spanish*

Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 810-8700*
 *After Hours Phone: (858)
810-8700*

 *Website: www.sdfamilycare
.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

CERTIFIED NURSE

PRACTITIONER


QUINTO, CINDY


Provider ID: 233532

Provider Gender: Female

License Number: NP16433

NPI: 1902810377

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: French, Lao,
Spanish*


Cultural Competency: N


*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*

Board Certified Specialty: No
IHP of Southern Cal-PHP

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

 *Phone: (619) 280-2058*

 *After Hours Phone: (619)
280-2058*

 *Website: www.sdfamilycare
.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

*Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM*

CERTIFIED NURSE

PRACTITIONER

QUINTO, CINDY


Provider ID: 233532

Provider Gender: Female

License Number: NP16433

NPI: 1902810377

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: French, Lao,
Spanish*


Cultural Competency: N


*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*

Board Certified Specialty: No
IHP of Southern Cal-PHP

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

 *Phone: (619) 280-2058*

 *After Hours Phone: (619)
280-2058*

 *Website: www.sdfamilycare
.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

D2. Directorio de atención primaria

SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

REID, EMILY

Provider ID: 185268

Provider Gender: Female

License Number: NP95002766

NPI: 1083081467

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

REID, EMILY

Provider ID: 185268

Provider Gender: Female

License Number: NP95002766

NPI: 1083081467

Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

ROGERS, TANYA

Provider ID: 417987

Provider Gender: Female

License Number: NP95004443

NPI: 1558710038

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San

Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

ROGERS, TANYA

Provider ID: 417987

Provider Gender: Female

License Number: NP95004443

NPI: 1558710038

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San

Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

SABIN, NANCY

Provider ID: 482070

Provider Gender: Female

License Number: NP4668

NPI: 1285732586

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N


D2. Directorio de atención primaria

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY

Provider ID: 206046
Provider Gender: Female
License Number: NP4668
NPI: 1285732586

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare

.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM
TU 8:00AM-8:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-1:00PM

CERTIFIED NURSE

PRACTITIONER


SABIN, NANCY

Provider ID: 206046
Provider Gender: Female
License Number: NP4668
NPI: 1285732586

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare
.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 8:00AM-8:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-1:00PM

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY

Provider ID: 482070
Provider Gender: Female
License Number: NP4668
NPI: 1285732586

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER


SABIN, NANCY

Provider ID: 206046
Provider Gender: Female

D2. Directorio de atención primaria

License Number: NP4668

NPI: 1285732586

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE

CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

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CERTIFIED NURSE

PRACTITIONER


SABIN, NANCY

Provider ID: 206046

Provider Gender: Female

License Number: NP4668

NPI: 1285732586

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

CERTIFIED NURSE

PRACTITIONER

SAMPSON, ANDRIECE

Provider ID: 207382

Provider Gender: Female

License Number: NP95026377

NPI: 1619594124

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN DIEGO AMERICAN

INDIAN HEALTH CENTER

 2630 1ST AVE
SAN DIEGO, CA 92103

 Phone: (619) 234-2158


 After Hours Phone: (619)
234-2158

 Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

Indian Health Services: Y

CERTIFIED NURSE

PRACTITIONER

SAMPSON, ANDRIECE

Provider ID: 207382

Provider Gender: Female

License Number: NP95026377

NPI: 1619594124

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN DIEGO AMERICAN

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 2630 1ST AVE
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 Phone: (619) 234-2158

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234-2158


 Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

Indian Health Services: Y

CERTIFIED NURSE

PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 482070

Provider Gender: Female

D2. Directorio de atención primaria


License Number: NP2390


NPI: 1619370475

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

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CERTIFIED NURSE

PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 206046

Provider Gender: Female

License Number: NP2390


NPI: 1619370475

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE

CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

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PROVIDER

Hours: M 8:00AM-5:00PM

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CERTIFIED NURSE

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SANTANGELO, JOANNE

Provider ID: 206046

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License Number: NP2390


NPI: 1619370475


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Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

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Cultural Competency: N

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CERTIFIED NURSE

PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 206046

Provider Gender: Female

D2. Directorio de atención primaria

License Number: NP2390


NPI: 1619370475


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

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W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

CERTIFIED NURSE

PRACTITIONER

SATTERWHITE, MAURINE

Provider ID: 206046

Provider Gender: Female

License Number: NP7022

NPI: 1225012842



Provider English Spoken: Y



Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR



6973 LINDA VISTA RD

SAN DIEGO, CA 92111



Phone: (858) 279-0925



After Hours Phone: (858)

279-0925



Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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Accessibility: CONTACT
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Hours: M 8:00AM-5:00PM

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CERTIFIED NURSE

PRACTITIONER

SATTERWHITE, MAURINE

Provider ID: 482070

Provider Gender: Female

License Number: NP7022

NPI: 1225012842



Provider English Spoken: Y



Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE



7011 LINDA VISTA RD

SAN DIEGO, CA 92111



Phone: (858) 810-8700



After Hours Phone: (858)

810-8700



Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N



Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

SATTERWHITE, MAURINE


Provider ID: 206046

D2. Directorio de atención primaria

Provider Gender: Female

License Number: NP7022

NPI: 1225012842

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

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 After Hours Phone: (858)
279-0925


 Website: www.sdfamilycare.org

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Min/Max Age: 0\None

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SA 9:00AM-1:00PM

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License Number: NP7022

NPI: 1225012842

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IHP of Southern Cal-PHP

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 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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PROVIDER

Hours: M 8:00AM-5:00PM

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W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

CERTIFIED NURSE

PRACTITIONER


SATTERWHITE, MAURINE

Provider ID: 482070

Provider Gender: Female

License Number: NP7022

NPI: 1225012842

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

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Min/Max Age: 0\None

American Sign Language (ASL):

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 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

SATTERWHITE, MAURINE

Provider ID: 206046

Provider Gender: Female

License Number: NP7022

NPI: 1225012842

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


LINDA VISTA HEALTH CARE

CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

D2. Directorio de atención primaria

CERTIFIED NURSE PRACTITIONER

SAVILLE, EDITH

Provider ID: 417937

Provider Gender: Female

License Number: NP7374


NPI: 1730567678


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

SAVILLE, EDITH

Provider ID: 417937

Provider Gender: Female

License Number: NP7374


NPI: 1730567678


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

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 Website: www.fhcsd.org
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

SEAMAN, MARY

Provider ID: 206363

Provider Gender: Female

License Number: NP10146


NPI: 1033116652


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SEAMAN, MARY

Provider ID: 206363

Provider Gender: Female

License Number: NP10146


NPI: 1033116652


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560


 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SEBRING, JAN

Provider ID: 206360

Provider Gender: Female

D2. Directorio de atención primaria

License Number: RN486421

NPI: 1295750339

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

🕒 After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

SEBRING, JAN

Provider ID: 206360

Provider Gender: Female

License Number: NP10906

NPI: 1295750339

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

🕒 After Hours Phone: (619)

515-2300

🌐 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

SEBRING, JAN

Provider ID: 206360

Provider Gender: Female

License Number: RN486421

NPI: 1295750339

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

🕒 After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

SEBRING, JAN

Provider ID: 206360

Provider Gender: Female

License Number: NP10906

NPI: 1295750339

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

TAYLOR, KAYLA

Provider ID: 206362

Provider Gender: Female

License Number: NP95006792

NPI: 1730604414

☐ Provider English Spoken: Y
Cultural Competency: N





Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

📍 3544 30TH ST

SAN DIEGO, CA 92104


D2. Directorio de atención primaria

 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER






CERTIFIED NURSE

PRACTITIONER

TAYLOR, KAYLA

Provider ID: 206362
Provider Gender: Female
License Number: NP95006792
NPI: 1730604414
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego


NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER






CERTIFIED NURSE

PRACTITIONER

TAYLOR, KAYLA

Provider ID: 206362
Provider Gender: Female
License Number: NP95006792
NPI: 1730604414
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Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego


NORTH PARK FAMILY HEALTH CENTERS

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PRACTITIONER

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Family Health Centers of San Diego

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
CERTIFIED NURSE

PRACTITIONER

TAYLOR, KAYLA

Provider ID: 417429
Provider Gender: Female
License Number: NP95006792
NPI: 1730604414
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101
 Phone: (619) 515-2525
 After Hours Phone: (619) 515-2525
 Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

D2. Directorio de atención primaria

TAYLOR, KAYLA

Provider ID: 417429

Provider Gender: Female

License Number: NP95006792


NPI: 1730604414


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619) 515-2525

 Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

TODD, MIKAYLA

Provider ID: 517998

Provider Gender: Female

License Number: NP95005999


NPI: 1316478092


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH

COMMUNITY HEIGHTS FAMILY MED

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

TODD, MIKAYLA

Provider ID: 517998

Provider Gender: Female

License Number: NP95005999

NPI: 1316478092

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

COMMUNITY HEIGHTS FAMILY MED

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PROVIDER

CERTIFIED NURSE

PRACTITIONER

TRAN, KELLY

Provider ID: 206360

Provider Gender: Female

License Number: NP95003689

NPI: 1255799276


Provider English Spoken: Y


Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

TRAN, KELLY

Provider ID: 206360

Provider Gender: Female

License Number: NP95003689

NPI: 1255799276

Provider English Spoken: Y

Provider Language(s)

D2. Directorio de atención primaria

Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

TUEROS, VICTORIA

Provider ID: 206360

Provider Gender: Female

License Number: NP2286

NPI: 1598989261

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

TUEROS, VICTORIA

Provider ID: 206360

Provider Gender: Female

License Number: NP2286

NPI: 1598989261

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

VEGA, TERESA

Provider ID: 206360

Provider Gender: Female

License Number: NP95001705

NPI: 1912304569

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

VEGA, TERESA

Provider ID: 206360

Provider Gender: Female

License Number: NP95001705

NPI: 1912304569

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

D2. Directorio de atención primaria

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

VELASQUEZ, FERNANDO

Provider ID: 206360

Provider Gender: Male

License Number: NP95011254

NPI: 1386195535

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

VELASQUEZ, FERNANDO

Provider ID: 206360

Provider Gender: Male

License Number: NP95011254

NPI: 1386195535

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

VELASQUEZ, FERNANDO

Provider ID: 419529

Provider Gender: Male

License Number: NP95011254

NPI: 1386195535

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113

Phone: (619) 515-2422

After Hours Phone: (619) 515-2422

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

VELASQUEZ, FERNANDO

Provider ID: 419529

Provider Gender: Male

License Number: NP95011254

NPI: 1386195535

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR OF SD SAN

D2. Directorio de atención primaria

DIEGO COMMERCIAL

2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113

Phone: (619) 515-2422

After Hours Phone: (619)
515-2422

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

VILLALOBOS, REBECA

Provider ID: 206360

Provider Gender: Female

License Number: NP95015780

NPI: 1184224396

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San

Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

VILLALOBOS, REBECA

Provider ID: 206360

Provider Gender: Female

License Number: NP95015780

NPI: 1184224396

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San

Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

WEICKERT, MARIA

Provider ID: 417429

Provider Gender: Female

License Number: NP95010814

NPI: 1841758984

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San

Diego

FAMILY HLTH CTR SAN

DIEGO- CITY COLLEGE

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619)
515-2525

Website: www.fhcsd.org
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

WEICKERT, MARIA

Provider ID: 417429

Provider Gender: Female

License Number: NP95010814

NPI: 1841758984

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San

Diego

FAMILY HLTH CTR SAN

DIEGO- CITY COLLEGE

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619)
515-2525

D2. Directorio de atención primaria


 Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER


WILLIAMS, BREAHA

Provider ID: 185268

Provider Gender: Female

License Number: NP95001840

NPI: 1063884864

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org


Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER


WILLIAMS, BREAHA

Provider ID: 185268

Provider Gender: Female

License Number: NP95001840

NPI: 1063884864

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 416831

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 416831

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST

D2. Directorio de atención primaria

SAN DIEGO, CA 92104
☎ Phone: (619) 515-2424
🕒 After Hours Phone: (619) 515-2424
🌐 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 402851
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386

☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

📍 3705 MISSION BLVD
SAN DIEGO, CA 92109

☎ Phone: (619) 515-2444
🕒 After Hours Phone: (619) 515-2444

🌐 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 402851
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386

☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

📍 3705 MISSION BLVD
SAN DIEGO, CA 92109

☎ Phone: (619) 515-2444
🕒 After Hours Phone: (619) 515-2444

🌐 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

WOLF, CELIA

Provider ID: 417937
Provider Gender: Female
License Number: NP95001899
NPI: 1245635564

☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SD HILLCREST

📍 4094 4TH AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 515-2545
🕒 After Hours Phone: (619) 515-2545

🌐 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

WOLF, CELIA

Provider ID: 417937
Provider Gender: Female
License Number: NP95001899
NPI: 1245635564

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD HILLCREST

📍 4094 4TH AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 515-2545
🕒 After Hours Phone: (619) 515-2545

🌐 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

D2. Directorio de atención primaria

American Sign Language (ASL): NPI: 1174553259

N

 Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE


BOSTON, LAURA

Provider ID: 206360

Provider Gender: Female

License Number: NM792

NPI: 1174553259

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1396956512

N

 Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED


NURSE MIDWIFE

BOSTON, LAURA

Provider ID: 206360

Provider Gender: Female

License Number: NM792

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED


NURSE MIDWIFE


GEPSHTEIN, YANA

Provider ID: 402851

Provider Gender: Female

License Number: NM1662

 Provider English Spoken: Y

 Provider Language(s) Spoken: Hebrew

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 3705 MISSION BLVD

SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619) 515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

GEPSHTEIN, YANA


Provider ID: 402851

Provider Gender: Female

License Number: NM1662

NPI: 1396956512

 Provider English Spoken: Y

 Provider Language(s) Spoken: Hebrew


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619) 515-2444


 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

CERTIFIED REGISTERED

NURSE MIDWIFE


TOLMIE, SIMONE


Provider ID: 206360

Provider Gender: Female

License Number: NM236263

NPI: 1104572007

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: Providence

Santa Rosa Memorial Hospital

Board Certified Specialty: No

Family Health Centers of San


Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

TOLMIE, SIMONE


Provider ID: 206360

Provider Gender: Female

License Number: NM236263

NPI: 1104572007

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: Providence

Santa Rosa Memorial Hospital

Board Certified Specialty: No

Family Health Centers of San


Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)

515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

ASSADIAN, MEHRAK

Provider ID: 451167

Provider Gender: Female

License Number: DC27523

NPI: 1295278281

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Turkish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP

KING CHAVEZ HEALTH


CENTER

 950 S EUCLID AVE

SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

ASSADIAN, MEHRAK

Provider ID: 451167

Provider Gender: Female

License Number: DC27523

NPI: 1295278281

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Turkish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


KING CHAVEZ HEALTH


CENTER

 950 S EUCLID AVE

SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

D2. Directorio de atención primaria

CABALLERO, JAMES

Provider ID: 417101

Provider Gender: Male

License Number: DC27726

NPI: 1093991549

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Operation Samahan

OPERATION SAMAHAN - MIRA
MESA

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

CHIROPRACTOR

CABALLERO, JAMES

Provider ID: 417101

Provider Gender: Male

License Number: DC27726

NPI: 1093991549

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Operation Samahan

OPERATION SAMAHAN - MIRA
MESA

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

CHIROPRACTOR

CABALLERO, JAMES

Provider ID: 418535

Provider Gender: Male

License Number: DC27726

NPI: 1093991549

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Operation Samahan

OPERATION SAMAHAN
RANCHO PENASQUITOS

9995 CARMEL MOUNTAIN
RD STE B10 AND B11

SAN DIEGO, CA 92129

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

CHIROPRACTOR

CABALLERO, JAMES

Provider ID: 418535

Provider Gender: Male

License Number: DC27726

NPI: 1093991549

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Operation Samahan

OPERATION SAMAHAN
RANCHO PENASQUITOS

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SAN DIEGO, CA 92129

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

CHIROPRACTOR

GILIBERTO, JOSEPH

Provider ID: 418535

Provider Gender: Male

License Number: DC15775


NPI: 1821463159

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish



D2. Directorio de atención primaria

Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN
RANCHO PENASQUITOS
 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129
 *Phone: (844) 200-2426*
 *After Hours Phone: (844)*
200-2426
 *Website: www.operationsa*
mahan.org




Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

CHIROPRACTOR

GILIBERTO, JOSEPH

Provider ID: 418535
Provider Gender: Male
License Number: DC15775
NPI: 1821463159
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish



Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN
RANCHO PENASQUITOS

 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129
 *Phone: (844) 200-2426*
 *After Hours Phone: (844)*




200-2426
 *Website: www.operationsa*
mahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM


CHIROPRACTOR


GILIBERTO, JOSEPH

Provider ID: 417101
Provider Gender: Male
License Number: DC15775
NPI: 1821463159
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA
MESA



 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
 *Phone: (844) 200-2426*
 *After Hours Phone: (844)*
200-2426

 *Website: www.operationsa*
mahan.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-4:30PM

CHIROPRACTOR


GILIBERTO, JOSEPH

Provider ID: 417101
Provider Gender: Male
License Number: DC15775
NPI: 1821463159
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA
MESA



 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
 *Phone: (844) 200-2426*
 *After Hours Phone: (844)*
200-2426
 *Website: www.operationsa*
mahan.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-4:30PM

CHIROPRACTOR

HALEY, STEVEN

Provider ID: 185268
Provider Gender: Male
License Number: DC25697
NPI: 1083764484
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N

D2. Directorio de atención primaria


Board Certified Specialty: No
La Maestra Family Clinic
**LA MAESTRA FAMILY CLINIC
INC**

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 280-4213
 After Hours Phone: (619)
280-4213
 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR


HALEY, STEVEN

Provider ID: 185268

Provider Gender: Male

License Number: DC25697

NPI: 1083764484

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
**LA MAESTRA FAMILY CLINIC
INC**

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 280-4213
 After Hours Phone: (619)
280-4213
 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR


HOURIHAN, KEITH

Provider ID: 185268

Provider Gender: Male

License Number: DC29314

NPI: 1306916994

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
**LA MAESTRA FAMILY CLINIC
INC**

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 280-4213
 After Hours Phone: (619)
280-4213
 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

HOURIHAN, KEITH

Provider ID: 185268

Provider Gender: Male

License Number: DC29314

NPI: 1306916994

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
**LA MAESTRA FAMILY CLINIC
INC**

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 280-4213
 After Hours Phone: (619)
280-4213
 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

ILCHENA, ALESANDRA

Provider ID: 185268

Provider Gender: Female

License Number: DC32800

NPI: 1871046664

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

D2. Directorio de atención primaria

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 798-3947
After Hours Phone: (619)
798-3947

Website: www.lamaestra.org

Email:
aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

ILCHENA, ALESANDRA

Provider ID: 185268

Provider Gender: Female

License Number: DC32800

NPI: 1871046664

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 798-3947

After Hours Phone: (619)
798-3947

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

KAZEM, AHMAD

Provider ID: 227409

Provider Gender: Male

License Number: DC33300

NPI: 1003296096

Provider English Spoken: Y

Provider Language(s)

Spoken: Farsi, Persian

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC -

OCEAN VIEW

3177 OCEAN VIEW BLVD

SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

KAZEM, AHMAD

Provider ID: 227409

Provider Gender: Male

License Number: DC33300

NPI: 1003296096

Provider English Spoken: Y

Provider Language(s)

Spoken: Farsi, Persian

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC -

OCEAN VIEW

3177 OCEAN VIEW BLVD

SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

LOVERN, JENNIFER

Provider ID: 418535

Provider Gender: Female

License Number: DC29074

NPI: 1235469396

Provider English Spoken: Y

Provider Language(s)

Spoken: French, Italian,
Spanish

Cultural Competency: N

Board Certified Specialty: No

D2. Directorio de atención primaria

Operation Samahan

OPERATION SAMAHAN

RANCHO PENASQUITOS

9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

CHIROPRACTOR

LOVERN, JENNIFER

Provider ID: 418535

Provider Gender: Female

License Number: DC29074

NPI: 1235469396

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Italian,
Spanish

Cultural Competency: N

Board Certified Specialty: No

Operation Samahan

OPERATION SAMAHAN

RANCHO PENASQUITOS

9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

CHIROPRACTOR

OLSEN, MARTIN

Provider ID: 402851

Provider Gender: Male

License Number: DC20729

NPI: 1730247990

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

OLSEN, MARTIN

Provider ID: 402851

Provider Gender: Male

License Number: DC20729

NPI: 1730247990

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San

Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

PAGE, BIANCA

Provider ID: 417937

Provider Gender: Female

License Number: DC33688

NPI: 1649787607

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San


Diego

FAMILY HLTH CTR SD


D2. Directorio de atención primaria

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CHIROPRACTOR


PAGE, BIANCA

Provider ID: 417937
Provider Gender: Female
License Number: DC33688
NPI: 1649787607

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CHIROPRACTOR


ROJAS, RICHARD

Provider ID: 417937
Provider Gender: Male
License Number: DC31024
NPI: 1538318811

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

CHIROPRACTOR

ROJAS, RICHARD


Provider ID: 417937
Provider Gender: Male
License Number: DC31024
NPI: 1538318811

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM


CHIROPRACTOR


SOSA, DAVID

Provider ID: 417937
Provider Gender: Male
License Number: DC33150
NPI: 1013308675


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes






D2. Directorio de atención primaria

Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CHIROPRACTOR

SOSA, DAVID


Provider ID: 417937
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CHIROPRACTOR

SOSA, DAVID





Provider ID: 206363
Provider Gender: Male



License Number: DC33150
NPI: 1013308675
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR



SOSA, DAVID






Provider ID: 206363
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

TAGHIZADEH, MAJID

Provider ID: 417937
Provider Gender: Male
License Number: DC30121
NPI: 1750590600
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Persian,
Turkish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

CHIROPRACTOR

D2. Directorio de atención primaria

TAGHIZADEH, MAJID

Provider ID: 417937

Provider Gender: Male

License Number: DC30121

NPI: 1750590600

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Persian,
Turkish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CHIROPRACTOR

TRUONG, VENNES

Provider ID: 417101

Provider Gender: Female

License Number: DC34907

NPI: 1053919928

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Operation Samahan

OPERATION SAMAHAN - MIRA

MESA

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: [www.operationsa
mahan.org](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

CHIROPRACTOR

TRUONG, VENNES

Provider ID: 417101

Provider Gender: Female

License Number: DC34907

NPI: 1053919928

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Operation Samahan

OPERATION SAMAHAN - MIRA

MESA

10737 CAMINO RUIZ STE
235

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Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: [www.operationsa
mahan.org](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-4:30PM

CLINIC OUTPATIENT

OPERATION SAMAHAN

RANCHO PENASQUITOS,

Provider ID: 418535

NPI: 1699216622

Provider English Spoken: Y

Cultural Competency: N

Operation Samahan

OPERATION SAMAHAN

RANCHO PENASQUITOS

9995 CARMEL MOUNTAIN

RD STE B10 AND B11

SAN DIEGO, CA 92129

Phone: (844) 200-2426

Fax: (858) 695-9074

After Hours Phone: (844)
200-2426

Website: [www.operationsa
mahan.org](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

CLINIC OUTPATIENT

OPERATION SAMAHAN

RANCHO PENASQUITOS,

Provider ID: 418535

NPI: 1699216622

Provider English Spoken: Y

Cultural Competency: N

Operation Samahan

OPERATION SAMAHAN

D2. Directorio de atención primaria

RANCHO PENASQUITOS

9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129

Phone: (844) 200-2426

Fax: (858) 695-9074

After Hours Phone: (844) 200-2426

Website: www.operationsamahana.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

DERMATOLOGY

BURROWS, WILLIAM

Provider ID: 417937

Provider Gender: Male

License Number: G16236

NPI: 1639199292

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

DERMATOLOGY

BURROWS, WILLIAM

Provider ID: 417937

Provider Gender: Male

License Number: G16236

NPI: 1639199292

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
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Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

DERMATOLOGY

CARTER, NATASHA

Provider ID: 206363

Provider Gender: Female

License Number: A140912

NPI: 1033539184

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR

Board Certified Specialty: No

Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

DERMATOLOGY

CARTER, NATASHA

Provider ID: 206363

Provider Gender: Female

License Number: A140912

NPI: 1033539184

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

D2. Directorio de atención primaria

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

AHMAD, AAKIF

Provider ID: 206360

Provider Gender: Male

License Number: 20A12732

NPI: 1720308331

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS GREEN HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

AHMAD, AAKIF

Provider ID: 206360

Provider Gender: Male

License Number: 20A12732

NPI: 1720308331

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS GREEN HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

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Phone: (619) 515-2300

After Hours Phone: (619)
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Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

CARRILLO, MARITZA

Provider ID: 206360

Provider Gender: Female

License Number: A163183

NPI: 1649628587

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

ENDOCRINOLOGY

D2. Directorio de atención primaria

METABOLISM DIABETES

CARRILLO, MARITZA

Provider ID: 206360

Provider Gender: Female

License Number: A163183

NPI: 1649628587


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

ENDOCRINOLOGY

METABOLISM DIABETES

CHANG, AMY

Provider ID: 206360

Provider Gender: Female

License Number: A93385

NPI: 1750568911

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,


SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SADDLEBACK MEMORIAL
MED CTR, SCRIPPS GREEN
HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
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 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

CHANG, AMY

Provider ID: 206360

Provider Gender: Female

License Number: A93385

NPI: 1750568911

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL


HOSPITAL ENCINITAS,
SADDLEBACK MEMORIAL
MED CTR, SCRIPPS GREEN
HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

GANDHI, ANAND

Provider ID: 206360

Provider Gender: Male

License Number: A178494

NPI: 1821651779

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego



LOGAN HEIGHTS FAMILY
HEALTH CENTER

D2. Directorio de atención primaria





 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
Fax: (619) 515-2510
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

GANDHI, ANAND

Provider ID: 206360
Provider Gender: Male
License Number: A178494
NPI: 1821651779
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER


 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
Fax: (619) 515-2510
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):


N


 Accessibility: CONTACT
PROVIDER


ENDOCRINOLOGY METABOLISM DIABETES

HOSEIN, NADEEN

Provider ID: 417937
Provider Gender: Female
License Number: A113255
NPI: 1912051715
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SD
HILLCREST


 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM


ENDOCRINOLOGY METABOLISM DIABETES


HOSEIN, NADEEN

Provider ID: 417937
Provider Gender: Female
License Number: A113255
NPI: 1912051715
 Provider English Spoken: Y

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SD
HILLCREST



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Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

ENDOCRINOLOGY METABOLISM DIABETES



ISLAM, JULIE

Provider ID: 206363
Provider Gender: Female
License Number: A149552
NPI: 1750780516
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Bengali, Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)



D2. Directorio de atención primaria

515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

ISLAM, JULIE

Provider ID: 206363
Provider Gender: Female
License Number: A149552
NPI: 1750780516
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Bengali, Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC



 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY




METABOLISM DIABETES


LEVINE, MATTHEW

Provider ID: 206360
Provider Gender: Male
License Number: A77126
NPI: 1801994231

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


ENDOCRINOLOGY

METABOLISM DIABETES




LEVINE, MATTHEW



Provider ID: 206360
Provider Gender: Male
License Number: A77126
NPI: 1801994231

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300



 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

LORENZO, PATRICIA

Provider ID: 206360
Provider Gender: Female
License Number: A129599
NPI: 1487913315

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No

D2. Directorio de atención primaria

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

LORENZO, PATRICIA

Provider ID: 206360

Provider Gender: Female

License Number: A129599

NPI: 1487913315

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

MCCALLUM, JAMES

Provider ID: 206360

Provider Gender: Male

License Number: A55708

NPI: 1609838994

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-TU 8:30AM-6:00PM

TH 8:30AM-6:00PM

F 8:30AM-5:00PM

SA 8:30AM-5:00PM

ENDOCRINOLOGY

METABOLISM DIABETES

MCCALLUM, JAMES

Provider ID: 206360

Provider Gender: Male

License Number: A55708

NPI: 1609838994

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

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Phone: (619) 515-2300

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Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-6:00PM

TH 8:30AM-6:00PM

D2. Directorio de atención primaria





F 8:30AM-5:00PM
SA 8:30AM-5:00PM


ENDOCRINOLOGY METABOLISM DIABETES **NAGELBERG, JODI**

Provider ID: 206360
Provider Gender: Female
License Number: A146838
NPI: 1720474141

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER




ENDOCRINOLOGY METABOLISM DIABETES **NAGELBERG, JODI**

Provider ID: 206360
Provider Gender: Female
License Number: A146838
NPI: 1720474141

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

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 Phone: (619) 515-2300
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515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES **PHILIS-TSIMIKAS, ATHENA**




Provider ID: 206360
Provider Gender: Female
License Number: A50477
NPI: 1922105964



Provider English Spoken: Y
 Provider Language(s)
Spoken: Greek

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS GREEN
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 9:00AM-5:00PM

ENDOCRINOLOGY METABOLISM DIABETES **PHILIS-TSIMIKAS, ATHENA**

Provider ID: 206360
Provider Gender: Female
License Number: A50477
NPI: 1922105964

Provider English Spoken: Y
 Provider Language(s)
Spoken: Greek

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS GREEN
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San

D2. Directorio de atención primaria

Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

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Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

FAMILY PRACTICE

ABDALLAH, ALI

Provider ID: 206363

Provider Gender: Male

License Number: 20A15471

NPI: 1649699968

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ABDALLAH, ALI

Provider ID: 206363

Provider Gender: Male

License Number: 20A15471

NPI: 1649699968

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

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After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 227409

Provider Gender: Male

License Number: A157505

NPI: 1588197826

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL, PARADISE VALLEY
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC -
OCEAN VIEW

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 227409

Provider Gender: Male

License Number: A157505

NPI: 1588197826

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL, PARADISE VALLEY

D2. Directorio de atención primaria

HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC -
OCEAN VIEW

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

BACHARACH, REBECCA

Provider ID: 417937

Provider Gender: Female

License Number: 20A15459

NPI: 1225442643

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

BACHARACH, REBECCA

Provider ID: 417937

Provider Gender: Female

License Number: 20A15459

NPI: 1225442643

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

BAGINGITO, AUSTIN

Provider ID: 417937

Provider Gender: Male

License Number: A163977

NPI: 1942705637

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

BAGINGITO, AUSTIN

Provider ID: 417937

Provider Gender: Male

License Number: A163977

NPI: 1942705637

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD


HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

D2. Directorio de atención primaria

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

BAGINGITO, AUSTIN

Provider ID: 417429

Provider Gender: Male

License Number: A163977

NPI: 1942705637


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619) 515-2525

 Website: www.fhcsd.org
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

BAGINGITO, AUSTIN

Provider ID: 417429

Provider Gender: Male

License Number: A163977

NPI: 1942705637


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619) 515-2525

 Website: www.fhcsd.org
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

BAGINGITO, AUSTIN

Provider ID: 206360

Provider Gender: Male

License Number: A163977

NPI: 1942705637

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BAGINGITO, AUSTIN

Provider ID: 206360

Provider Gender: Male

License Number: A163977

NPI: 1942705637


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

FAMILY PRACTICE

BAHRAMZI, MARIA

Provider ID: 206362

Provider Gender: Female

License Number: A173486

NPI: 1588141865

Provider English Spoken: Y

Provider Language(s)
Spoken: Pashto


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BAHRAMZI, MARIA

Provider ID: 206362

Provider Gender: Female

License Number: A173486

NPI: 1588141865

Provider English Spoken: Y

Provider Language(s)
Spoken: Pashto


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BAHRAMZI, MARIA

Provider ID: 206362

Provider Gender: Female

License Number: A173486

NPI: 1588141865

Provider English Spoken: Y

Provider Language(s)
Spoken: Pashto


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BAHRAMZI, MARIA

Provider ID: 206362

Provider Gender: Female

License Number: A173486

NPI: 1588141865

Provider English Spoken: Y

Provider Language(s)
Spoken: Pashto


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BAHRAMZI, MARIA

Provider ID: 417987

Provider Gender: Female

License Number: A173486

NPI: 1588141865

Provider English Spoken: Y

Provider Language(s)
Spoken: Pashto

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San

D2. Directorio de atención primaria

Diego

FAMILY HEALTH CTR IBARRA

4874 POLK AVE

SAN DIEGO, CA 92105

Phone: (619) 515-2426

After Hours Phone: (619) 515-2426

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BAHRAMZI, MARIA

Provider ID: 417987

Provider Gender: Female

License Number: A173486

NPI: 1588141865

Provider English Spoken: Y

Provider Language(s) Spoken: Pashto

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HEALTH CTR IBARRA

4874 POLK AVE

SAN DIEGO, CA 92105

Phone: (619) 515-2426

After Hours Phone: (619) 515-2426

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BAIN, NATALIE

Provider ID: 206360

Provider Gender: Female

License Number: A183464

NPI: 1821677584

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BAIN, NATALIE

Provider ID: 206360

Provider Gender: Female

License Number: A183464

NPI: 1821677584

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San

Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BAUTISTA, LUIS

Provider ID: 517403

Provider Gender: Male

License Number: A97270

NPI: 1295712206

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,

ST AGNES MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH 25TH ST

FAMILY MEDICINE

316 25TH ST

SAN DIEGO, CA 92102

Phone: (619) 238-5551

After Hours Phone: (619) 238-5551

Website: N/A


Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\120

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


BAUTISTA, LUIS

Provider ID: 517403

Provider Gender: Male

License Number: A97270

NPI: 1295712206

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,


ST AGNES MEDICAL CENTER

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH 25TH ST

FAMILY MEDICINE

 316 25TH ST

SAN DIEGO, CA 92102

 Phone: (619) 238-5551

 After Hours Phone: (619) 238-5551

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


BISHOP, MELISSA

Provider ID: 403583

Provider Gender: Female

License Number: C137521

NPI: 1578667077

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER

Board Certified Specialty: No


IHP of Southern Cal-PHP


ST VINCENT DE PAUL VILLAGE


FAMILY HEALTH CENTER

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 645-6405

 After Hours Phone: (619) 645-6405

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE


BISHOP, MELISSA

Provider ID: 403583

Provider Gender: Female

License Number: C137521

NPI: 1578667077

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER

Board Certified Specialty: No


IHP of Southern Cal-PHP


ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 645-6405

 After Hours Phone: (619) 645-6405

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE

BODIFORD, SAMANTHA

Provider ID: 214492

Provider Gender: Female

License Number: A165398

NPI: 1730684200

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NESTOR COMMUNITY

HEALTH CENTER

 1016 OUTER RD

SAN DIEGO, CA 92154

 Phone: (619) 429-3733

 After Hours Phone: (619) 429-3733

 Website: www.ibclinic.org


Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:00PM

TU-TH 8:30AM-8:00PM

D2. Directorio de atención primaria

F 8:30AM-5:00PM

FAMILY PRACTICE

BODIFORD, SAMANTHA

Provider ID: 214492

Provider Gender: Female

License Number: A165398


NPI: 1730684200


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

NESTOR COMMUNITY
HEALTH CENTER

 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

 After Hours Phone: (619)
429-3733

 Website: www.ibclinic.org
Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:00PM

TU-TH 8:30AM-8:00PM

F 8:30AM-5:00PM

FAMILY PRACTICE

BORTNER, ADAM

Provider ID: 206363

Provider Gender: Male

License Number: A164879

NPI: 1811491749

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BORTNER, ADAM

Provider ID: 206363

Provider Gender: Male

License Number: A164879

NPI: 1811491749

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BORTNER, ADAM

Provider ID: 417937

Provider Gender: Male

License Number: A164879

NPI: 1811491749

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

FAMILY PRACTICE

BORTNER, ADAM


Provider ID: 417937

Provider Gender: Male

D2. Directorio de atención primaria

License Number: A164879

NPI: 1811491749

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org


Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

FAMILY PRACTICE

BRADY, PATRICIA

Provider ID: 403583

Provider Gender: Female

License Number: C53121

NPI: 1952390437

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Board Certified Specialty: No


IHP of Southern Cal-PHP


ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:00PM

TH 8:30AM-9:00PM

F 8:30AM-5:00PM

FAMILY PRACTICE


BRADY, PATRICIA

Provider ID: 403583

Provider Gender: Female

License Number: C53121

NPI: 1952390437

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Board Certified Specialty: No


IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:00PM

TH 8:30AM-9:00PM

F 8:30AM-5:00PM

FAMILY PRACTICE

BRODSKY, MARK

Provider ID: 402851

Provider Gender: Male

License Number: C53623

NPI: 1346337904

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

FAMILY PRACTICE

BRODSKY, MARK

Provider ID: 402851

Provider Gender: Male

D2. Directorio de atención primaria

License Number: C53623


NPI: 1346337904


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619) 515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

FAMILY PRACTICE


BROWN, BRANDON

Provider ID: 206360

Provider Gender: Male

License Number: A148499

NPI: 1013399559

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

FAMILY PRACTICE


BROWN, BRANDON


Provider ID: 206360

Provider Gender: Male

License Number: A148499

NPI: 1013399559

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

FAMILY PRACTICE

BURTON, LUCAS

Provider ID: 206362

Provider Gender: Male

License Number: 20A20786

NPI: 1376171520

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

BURTON, LUCAS

Provider ID: 206362

D2. Directorio de atención primaria

Provider Gender: Male

License Number: 20A20786

NPI: 1376171520

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424


 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

BURTON, LUCAS

Provider ID: 206362

Provider Gender: Male

License Number: 20A20786

NPI: 1376171520

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

BURTON, LUCAS

Provider ID: 206362

Provider Gender: Male

License Number: 20A20786

NPI: 1376171520

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
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 3544 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

CAMPBELL, BRIANNA

Provider ID: 451167

Provider Gender: Female

License Number: A157488

NPI: 1316479892

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: CHULA
VISTA COMM HOSP


Board Certified Specialty: No


IHP of Southern Cal-PHP


KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE

SAN DIEGO, CA 92114

 Phone: (619) 662-4194

 After Hours Phone: (619)
662-4194

 Website: [www.syhealth.org
/clinics/king-
chavez-
health-
center](http://www.syhealth.org/clinics/king-chavez-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CAMPBELL, BRIANNA

Provider ID: 451167

Provider Gender: Female

License Number: A157488

NPI: 1316479892

Provider English Spoken: Y






Provider Language(s)
Spoken: Spanish



D2. Directorio de atención primaria

Cultural Competency: N
Hospital Affiliation: CHULA VISTA COMM HOSP
Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH CENTER



 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4194
 After Hours Phone: (619) 662-4194
 Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE **CAMPOS, PRISCILLA**

Provider ID: 206360
Provider Gender: Female
License Number: A152651
NPI: 1508217399
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300


 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE **CAMPOS, PRISCILLA**



Provider ID: 206360
Provider Gender: Female
License Number: A152651
NPI: 1508217399
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
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 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE **CARRIEDO-CENICEROS, MARIA**

Provider ID: 227409
Provider Gender: Female
License Number: A78373
NPI: 1295746618
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC - OCEAN VIEW
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE **CARRIEDO-CENICEROS, MARIA**


Provider ID: 227409
Provider Gender: Female
License Number: A78373
NPI: 1295746618
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC - OCEAN VIEW

D2. Directorio de atención primaria






 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CHOU, BILL


Provider ID: 206362
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego






NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


CHOU, BILL

Provider ID: 206362
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
**NORTH PARK FAMILY HEALTH
CENTERS**



 3544 30TH ST
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 Phone: (619) 515-2424
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 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CHOU, BILL


Provider ID: 206362
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
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**NORTH PARK FAMILY HEALTH
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Min/Max Age: 0\None
American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CHOU, BILL

Provider ID: 206362
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
**NORTH PARK FAMILY HEALTH
CENTERS**


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SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CHOU, BILL

Provider ID: 417937
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101



D2. Directorio de atención primaria


 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 *Phone: (619) 515-2545*
 *After Hours Phone: (619) 515-2545*
 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE



CHOU, BILL

Provider ID: 417937
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST
 4094 4TH AVE
SAN DIEGO, CA 92103
 *Phone: (619) 515-2545*
 *After Hours Phone: (619) 515-2545*
 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

CHUN, HYUN

Provider ID: 206360
Provider Gender: Male
License Number: A163978
NPI: 1083118988
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Korean*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619) 515-2300*
 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*






FAMILY PRACTICE

CHUN, HYUN

Provider ID: 206360
Provider Gender: Male
License Number: A163978



NPI: 1083118988

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Korean*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER




 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619) 515-2300*
 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

COLLINS, WILLIAM


Provider ID: 417937
Provider Gender: Male
License Number: 20A15413
NPI: 1417361973
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST
 4094 4TH AVE


D2. Directorio de atención primaria

 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:00AM-9:00PM

FAMILY PRACTICE

COLLINS, WILLIAM




Provider ID: 417937
Provider Gender: Male
License Number: 20A15413
NPI: 1417361973
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:00AM-9:00PM


FAMILY PRACTICE

COLLINS, WILLIAM

Provider ID: 206362
Provider Gender: Male
License Number: 20A15413
NPI: 1417361973
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS


 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:30AM-5:30PM


FAMILY PRACTICE

COLLINS, WILLIAM

Provider ID: 206362
Provider Gender: Male
License Number: 20A15413
NPI: 1417361973
 Provider English Spoken: Y



Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:30AM-5:30PM

FAMILY PRACTICE

COLLINS, WILLIAM

Provider ID: 206362
Provider Gender: Male
License Number: 20A15413
NPI: 1417361973
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS
 3544 30TH ST

D2. Directorio de atención primaria

SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:30AM-5:30PM

FAMILY PRACTICE

COLLINS, WILLIAM

Provider ID: 206362
Provider Gender: Male
License Number: 20A15413
NPI: 1417361973
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: SU-SA 8:30AM-5:30PM

FAMILY PRACTICE

CORMAN, DANIEL

Provider ID: 402851
Provider Gender: Male
License Number: 20A13060
NPI: 1629339593
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CORMAN, DANIEL

Provider ID: 402851
Provider Gender: Male
License Number: 20A13060
NPI: 1629339593
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


DAPPEN, AMANDA

Provider ID: 227409
Provider Gender: Female
License Number: A153414
NPI: 1689037111
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC - OCEAN VIEW

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

D2. Directorio de atención primaria


N




 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM


FAMILY PRACTICE


DAPPEN, AMANDA

Provider ID: 227409
Provider Gender: Female
License Number: A153414
NPI: 1689037111

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC - OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*



 *Website: <https://www.syhealth.org/locations>*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

DAVIS, DEIRDRE


Provider ID: 451167
Provider Gender: Female
License Number: A165432
NPI: 1265921365

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org/clinics/king-chavez-health-center*



Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

FAMILY PRACTICE


DAVIS, DEIRDRE

Provider ID: 451167
Provider Gender: Female
License Number: A165432
NPI: 1265921365

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org*


/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

FAMILY PRACTICE




DOSCAS, MICHELLE


Provider ID: 206360
Provider Gender: Female
License Number: A163633
NPI: 1306343421

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT*

D2. Directorio de atención primaria

PROVIDER

FAMILY PRACTICE


DOSCAS, MICHELLE

Provider ID: 206360

Provider Gender: Female

License Number: A163633

NPI: 1306343421

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Board Certified Specialty: No


Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


FAMBRO, CYNTHIA


Provider ID: 451167

Provider Gender: Female

License Number: A153223

NPI: 1710331707

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


KING CHAVEZ HEALTH

CENTER

 950 S EUCLID AVE

SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org

[/clinics/king-chavez-health-center](http://clinics/king-chavez-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


FAMBRO, CYNTHIA

Provider ID: 451167

Provider Gender: Female

License Number: A153223

NPI: 1710331707

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


KING CHAVEZ HEALTH


CENTER

 950 S EUCLID AVE

SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

FLORES, JOE

Provider ID: 417937

Provider Gender: Male

License Number: A171135

NPI: 1033647409

 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

FAMILY PRACTICE

FLORES, JOE

D2. Directorio de atención primaria

Provider ID: 417937

Provider Gender: Male

License Number: A171135

NPI: 1033647409

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

FAMILY PRACTICE

GLEASON ROHRER, GWEN

Provider ID: 233597

Provider Gender: Female

License Number: A112176

NPI: 1710140462

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

4290 POLK AVE

SAN DIEGO, CA 92105

Phone: (619) 563-0250

After Hours Phone: (619) 563-0250

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

GLEASON ROHRER, GWEN

Provider ID: 233532

Provider Gender: Female

License Number: A112176

NPI: 1710140462

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Board Certified Specialty: No

IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

After Hours Phone: (619) 280-2058

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

GLEASON ROHRER, GWEN

Provider ID: 233532

Provider Gender: Female

License Number: A112176

NPI: 1710140462

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Board Certified Specialty: No

IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

After Hours Phone: (619) 280-2058

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

GLEASON ROHRER, GWEN

Provider ID: 233597

Provider Gender: Female

License Number: A112176

NPI: 1710140462


Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

D2. Directorio de atención primaria

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC


 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
 After Hours Phone: (619)
563-0250
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


GRIFFITHS, KENNETH

Provider ID: 417937
Provider Gender: Male
License Number: C52451
NPI: 1760563068

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST


 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org

Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE


GRIFFITHS, KENNETH


Provider ID: 417937
Provider Gender: Male
License Number: C52451
NPI: 1760563068

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST

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515-2545



 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

GUTIERREZ, TANIA


Provider ID: 417987
Provider Gender: Female
License Number: 20A19345
NPI: 1285196311


 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 515-2426
 After Hours Phone: (619)
515-2426



 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

GUTIERREZ, TANIA






Provider ID: 417987
Provider Gender: Female
License Number: 20A19345
NPI: 1285196311

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

D2. Directorio de atención primaria

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 515-2426
 After Hours Phone: (619)
515-2426
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE







HAMILTON, LISA MARIE

Provider ID: 206363
Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE


HAMILTON, LISA MARIE

Provider ID: 206363
Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
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 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM






 4725 MARKET ST
SAN DIEGO, CA 92102
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515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

HAMILTON, LISA MARIE






Provider ID: 418142
Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105
 Phone: (619) 515-2454
 After Hours Phone: (619)
515-2454
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE


HAMILTON, LISA MARIE

Provider ID: 418142
Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HEALTH CTR SAN
DIEGO-OAK PARK
 5160 FEDERAL BLVD
SAN DIEGO, CA 92105
 Phone: (619) 515-2454
 After Hours Phone: (619)
515-2454
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105
 Phone: (619) 515-2454
 After Hours Phone: (619)
515-2454
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N



D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM


FAMILY PRACTICE

HEINRICI, ALEKA


Provider ID: 451167
Provider Gender: Female
License Number: A125329
NPI: 1780979120

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No IHP of Southern Cal-PHP
KING CHAVEZ HEALTH CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org /clinics/king- chavez- health- center*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

FAMILY PRACTICE

HEINRICI, ALEKA




Provider ID: 451167
Provider Gender: Female


License Number: A125329
NPI: 1780979120

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No IHP of Southern Cal-PHP

KING CHAVEZ HEALTH CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org /clinics/king- chavez- health- center*



Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

FAMILY PRACTICE

HENDRIX, JEFFERSON


Provider ID: 631494
Provider Gender: Male
License Number: A32571
NPI: 1235142738

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP

SAN YSIDRO HEALTH PRECISION PARK

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*



 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

HENDRIX, JEFFERSON


Provider ID: 631494
Provider Gender: Male
License Number: A32571
NPI: 1235142738

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP

SAN YSIDRO HEALTH PRECISION PARK

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

D2. Directorio de atención primaria

FAMILY PRACTICE

KAUFHOLD, ANNE

Provider ID: 227409

Provider Gender: Female

License Number: A88893

NPI: 1164508073

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC -

OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

KAUFHOLD, ANNE

Provider ID: 227409

Provider Gender: Female

License Number: A88893

NPI: 1164508073

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHC -

OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

KAUFMAN, JENNIFER CHILYN

Provider ID: 417987

Provider Gender: Female

License Number: G149974

NPI: 1407818768

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San


Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

KAUFMAN, JENNIFER CHILYN

Provider ID: 417987

Provider Gender: Female

License Number: G149974

NPI: 1407818768

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

KEFLEZIGHI, BAHGHI

Provider ID: 206363

Provider Gender: Female

License Number: A100391

NPI: 1124210844

D2. Directorio de atención primaria

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
Family Health Centers of San Diego
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
Fax: (619) 263-2499
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KEFLEZIGHI, BAHGHI

Provider ID: 206363
Provider Gender: Female
License Number: A100391
NPI: 1124210844
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
Family Health Centers of San Diego
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
Fax: (619) 263-2499
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KIDDER, BRENDAN

Provider ID: 227409
Provider Gender: Male
License Number: A112379
NPI: 1275793929
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP SAN YSIDRO HEALTH CHC - OCEAN VIEW
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 After Hours Phone: (619)

662-4100
 Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KIDDER, BRENDAN

Provider ID: 227409
Provider Gender: Male
License Number: A112379
NPI: 1275793929
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP SAN YSIDRO HEALTH CHC - OCEAN VIEW
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


LACH, REBECCA

Provider ID: 206362
Provider Gender: Female

D2. Directorio de atención primaria

License Number: A177922

NPI: 1679137780

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

**NORTH PARK FAMILY HEALTH
CENTERS**

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424


 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


LACH, REBECCA

Provider ID: 417937

Provider Gender: Female

License Number: A177922

NPI: 1679137780

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

FAMILY PRACTICE


LACH, REBECCA

Provider ID: 417937

Provider Gender: Female

License Number: A177922

NPI: 1679137780

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
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 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

FAMILY PRACTICE

LACH, REBECCA

Provider ID: 206362

Provider Gender: Female

License Number: A177922

NPI: 1679137780

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

**NORTH PARK FAMILY HEALTH
CENTERS**

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424


 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LACH, REBECCA


Provider ID: 206362

Provider Gender: Female

License Number: A177922

NPI: 1679137780

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

D2. Directorio de atención primaria


Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None



American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE



LACH, REBECCA


Provider ID: 206362
Provider Gender: Female
License Number: A177922
NPI: 1679137780

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None



American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

LEE, SANDRINE


Provider ID: 206362
Provider Gender: Female
License Number: 20A15068
NPI: 1073909651

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: French*

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None



American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

LEE, SANDRINE


Provider ID: 206362
Provider Gender: Female
License Number: 20A15068
NPI: 1073909651

 *Provider English Spoken: Y*
 *Provider Language(s)*

Spoken: French
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None



American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE




LEE, SANDRINE


Provider ID: 206362
Provider Gender: Female
License Number: 20A15068
NPI: 1073909651

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: French*

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


LEE, SANDRINE

Provider ID: 206362

Provider Gender: Female

License Number: 20A15068

NPI: 1073909651

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424


 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


LINDEMAN, KURTIS


Provider ID: 403583

Provider Gender: Male

License Number: A104052

NPI: 1124155791

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


LINDEMAN, KURTIS

Provider ID: 403583

Provider Gender: Male

License Number: A104052

NPI: 1124155791

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Board Certified Specialty: No

IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LISH, JONATHAN

Provider ID: 206360

Provider Gender: Male

License Number: A177373

NPI: 1811459456

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

D2. Directorio de atención primaria

PROVIDER

FAMILY PRACTICE

LISH, JONATHAN

Provider ID: 206360

Provider Gender: Male

License Number: A177373


NPI: 1811459456


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300


 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LOUGH, MICHELLE

Provider ID: 206363

Provider Gender: Female

License Number: A165872

NPI: 1053816496


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LOUGH, MICHELLE

Provider ID: 206363

Provider Gender: Female

License Number: A165872


NPI: 1053816496


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LU, JULIE

Provider ID: 418142

Provider Gender: Female

License Number: 20A14804

NPI: 1619210614

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

 Phone: (619) 515-2454

 After Hours Phone: (619) 515-2454

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

LU, JULIE

Provider ID: 418142

Provider Gender: Female

License Number: 20A14804

NPI: 1619210614

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

D2. Directorio de atención primaria

Family Health Centers of San Diego

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

5160 FEDERAL BLVD
SAN DIEGO, CA 92105

Phone: (619) 515-2454

After Hours Phone: (619) 515-2454

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

MANDOYAN, AUSTIN

Provider ID: 206360

Provider Gender: Female

License Number: A161682

NPI: 1841726148

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

FAMILY PRACTICE

MANDOYAN, AUSTIN

Provider ID: 206360

Provider Gender: Female

License Number: A161682

NPI: 1841726148

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

FAMILY PRACTICE

MARSTON, JACQUELINE

Provider ID: 206046

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE

CTR

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

After Hours Phone: (858) 279-0925

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MARSTON, JACQUELINE

Provider ID: 206046

Provider Gender: Female

License Number: 20A12402

D2. Directorio de atención primaria

NPI: 1417205055

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE

CTR

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

After Hours Phone: (858)
279-0925

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MARSTON, JACQUELINE

Provider ID: 206046

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE

CTR

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

After Hours Phone: (858)
279-0925

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MARSTON, JACQUELINE

Provider ID: 206046

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE

CTR

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

After Hours Phone: (858)
279-0925

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE

MARSTON, JACQUELINE

Provider ID: 482070

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858)
810-8700

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MARSTON, JACQUELINE

Provider ID: 482070

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

D2. Directorio de atención primaria

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE


 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


FAMILY PRACTICE

MATICH, BRANKO

Provider ID: 482070
Provider Gender: Male
License Number: C174985
NPI: 1023437704

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM


FAMILY PRACTICE

MATICH, BRANKO

Provider ID: 206046
Provider Gender: Male
License Number: C174985
NPI: 1023437704

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE


MATICH, BRANKO

Provider ID: 206046
Provider Gender: Male
License Number: C174985
NPI: 1023437704

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR


 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM


FAMILY PRACTICE

MATICH, BRANKO

Provider ID: 482070
Provider Gender: Male
License Number: C174985
NPI: 1023437704

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT

D2. Directorio de atención primaria

PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

MATICH, BRANKO

Provider ID: 206046
Provider Gender: Male
License Number: C174985
NPI: 1023437704
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

MATICH, BRANKO

Provider ID: 206046
Provider Gender: Male
License Number: C174985
NPI: 1023437704
 Provider English Spoken: Y
Cultural Competency: N





Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR


 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

MCLAUGHLIN, ERIK

Provider ID: 207382
Provider Gender: Male
License Number: C176574
NPI: 1861637217
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO AMERICAN
INDIAN HEALTH CENTER


 2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
 After Hours Phone: (619)
234-2158
 Website: WWW.SDAIHC.ORG
G
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
Indian Health Services: Y

FAMILY PRACTICE

MCLAUGHLIN, ERIK

Provider ID: 207382
Provider Gender: Male
License Number: C176574
NPI: 1861637217
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO AMERICAN
INDIAN HEALTH CENTER

 2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
 After Hours Phone: (619)
234-2158
 Website: WWW.SDAIHC.ORG
G
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
Indian Health Services: Y

FAMILY PRACTICE

MELGAR, MONICA



Provider ID: 402851
Provider Gender: Female
License Number: A154399
NPI: 1629432174
 Provider English Spoken: Y
 Provider Language(s)


D2. Directorio de atención primaria

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109


 *Phone: (619) 515-2444*
 *After Hours Phone: (619) 515-2444*

 *Website: www.fhcsd.org*
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

FAMILY PRACTICE

MELGAR, MONICA

Provider ID: 402851

Provider Gender: Female

License Number: A154399

NPI: 1629432174

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 *Phone: (619) 515-2444*

 *After Hours Phone: (619) 515-2444*

 *Website: www.fhcsd.org*

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

FAMILY PRACTICE

MORALES, ALEJANDRA

Provider ID: 227409

Provider Gender: Female


License Number: A162332


NPI: 1063945657


 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC - OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: https://www.syhealth.org/locations*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

MORALES, ALEJANDRA

Provider ID: 227409

Provider Gender: Female


License Number: A162332


NPI: 1063945657


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC - OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: https://www.syhealth.org/locations*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

NAVARRO, VANESSA MARIA


Provider ID: 631494

Provider Gender: Female

License Number: A113624

NPI: 1952563421

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Filipino, Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR

D2. Directorio de atención primaria

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PRECISION PARK

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NAVARRO, VANESSA MARIA

Provider ID: 631494

Provider Gender: Female

License Number: A113624

NPI: 1952563421

Provider English Spoken: Y

Provider Language(s)
Spoken: Filipino, Spanish,
Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PRECISION PARK

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NGUYEN, NGOC

Provider ID: 517998

Provider Gender: Male

License Number: A74094

NPI: 1184668105

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

COMMUNITY HEIGHTS FAMILY

MED

4690 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NGUYEN, NGOC

Provider ID: 517998

Provider Gender: Male

License Number: A74094

NPI: 1184668105

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

COMMUNITY HEIGHTS FAMILY
MED

4690 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NGUYEN CLEARY, THAI

Provider ID: 417937

Provider Gender: Male

License Number: A86079

NPI: 1467442624

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation:

HOLLYWOOD PRESBYTERIAN

MED CTR

D2. Directorio de atención primaria

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

FAMILY PRACTICE

NGUYEN CLEARY, THAI

Provider ID: 417937

Provider Gender: Male

License Number: A86079

NPI: 1467442624

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation:

HOLLYWOOD PRESBYTERIAN
MED CTR

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

FAMILY PRACTICE

NIAZI, HARRIS

Provider ID: 206360

Provider Gender: Male

License Number: A146111

NPI: 1174905871

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE

NIAZI, HARRIS

Provider ID: 206360

Provider Gender: Male

License Number: A146111

NPI: 1174905871

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NORRIS, JEFFREY

Provider ID: 403583

Provider Gender: Male

License Number: A136275

NPI: 1073870374

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

D2. Directorio de atención primaria

Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619)
233-8500
Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

NORRIS, JEFFREY

Provider ID: 403583
Provider Gender: Male
License Number: A136275
NPI: 1073870374

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619)
233-8500
Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

NUQUI, JOSIE

Provider ID: 432308
Provider Gender: Female
License Number: A71544
NPI: 1184773673

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N

Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA
MESA

9855 ERMA RD STE 105
SAN DIEGO, CA 92131
Phone: (844) 200-2426
After Hours Phone: (844)
200-2426

Website: www.operationsa
mahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:00PM
SA 8:30AM-5:00PM

FAMILY PRACTICE

NUQUI, JOSIE

Provider ID: 432308
Provider Gender: Female
License Number: A71544
NPI: 1184773673

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA
MESA

9855 ERMA RD STE 105
SAN DIEGO, CA 92131
Phone: (844) 200-2426
After Hours Phone: (844)
200-2426

Website: www.operationsa
mahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:00PM
SA 8:30AM-5:00PM

FAMILY PRACTICE

ORTIZ, KENNETH

Provider ID: 517403
Provider Gender: Male
License Number: A156607
NPI: 1356761571

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE


316 25TH ST
SAN DIEGO, CA 92102






D2. Directorio de atención primaria

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE



ORTIZ, KENNETH

Provider ID: 517403
Provider Gender: Male
License Number: A156607
NPI: 1356761571
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE

 316 25TH ST
SAN DIEGO, CA 92102
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE



PALOMINO, VERONICA

Provider ID: 206360
Provider Gender: Female
License Number: A121451
NPI: 1255569083
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PALOMINO, VERONICA

Provider ID: 206360
Provider Gender: Female
License Number: A121451
NPI: 1255569083
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No






Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


FAMILY PRACTICE

PAYAMI, MADDIHA

Provider ID: 417429
Provider Gender: Female
License Number: 20A14012
NPI: 1336484104
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE
 1550 BROADWAY STE 2
SAN DIEGO, CA 92101
 Phone: (619) 515-2525
 After Hours Phone: (619) 515-2525
 Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE


PAYAMI, MADDIHA

Provider ID: 417429

Provider Gender: Female


License Number: 20A14012


NPI: 1336484104


 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 *1550 BROADWAY STE 2
SAN DIEGO, CA 92101*

 *Phone: (619) 515-2525*

 *After Hours Phone: (619)
515-2525*


 *Website: www.fhcsd.org*
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE


PEREZ, PERLITA


Provider ID: 206363

Provider Gender: Female

License Number: A119689

NPI: 1174810972


 *Provider English Spoken: Y*


 *Provider Language(s)*


Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 *4725 MARKET ST
SAN DIEGO, CA 92102*

 *Phone: (619) 515-2560*

 *After Hours Phone: (619)
515-2560*

 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


PEREZ, PERLITA


Provider ID: 206363

Provider Gender: Female

License Number: A119689

NPI: 1174810972

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 *4725 MARKET ST
SAN DIEGO, CA 92102*

 *Phone: (619) 515-2560*

 *After Hours Phone: (619)
515-2560*

 *Website: www.fhcsd.org*

Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

POSADA, SEAN

Provider ID: 206360

Provider Gender: Male

License Number: A180171

NPI: 1295100691

 *Provider English Spoken: Y*


 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 *1809 NATIONAL AVE
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*

 *After Hours Phone: (619)
515-2300*

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*



FAMILY PRACTICE

POSADA, SEAN

Provider ID: 206360

Provider Gender: Male



D2. Directorio de atención primaria

License Number: A180171
NPI: 1295100691
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER





 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PROPST, TOBE



Provider ID: 403583
Provider Gender: Male
License Number: A82123
NPI: 1194814277
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER


 1501 IMPERIAL AVE
SAN DIEGO, CA 92101



 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PROPST, TOBE

Provider ID: 403583
Provider Gender: Male
License Number: A82123
NPI: 1194814277
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER





 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE



RAGUVEER, VISHAKA

Provider ID: 418535
Provider Gender: Female





License Number: A172736
NPI: 1740609387
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN
RANCHO PENASQUITOS
 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129
 Phone: (916) 419-7292
 After Hours Phone: (916)
419-7292
 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

FAMILY PRACTICE

RAGUVEER, VISHAKA

Provider ID: 418535
Provider Gender: Female
License Number: A172736
NPI: 1740609387
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN
RANCHO PENASQUITOS
 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

D2. Directorio de atención primaria

 Phone: (916) 419-7292
 After Hours Phone: (916) 419-7292
 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM



FAMILY PRACTICE



RAGUVEER, VISHAKA

Provider ID: 618164
Provider Gender: Female
NPI: 1740609387
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Community Care IPA LLC
VISHAKA RAGUVEER
 9995 CARMEL MOUNTAIN RD STE 10-11B
SAN DIEGO, CA 92129
 Phone: (844) 200-2426
Fax: (858) 240-6470
 After Hours Phone: (844) 200-2426
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

RAMIREZ, CRISTHIAN



Provider ID: 206360
Provider Gender: Female
License Number: 20A17478
NPI: 1407200942
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

FAMILY PRACTICE

RAMIREZ, CRISTHIAN





Provider ID: 206360
Provider Gender: Female
License Number: 20A17478
NPI: 1407200942
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N























 Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

FAMILY PRACTICE

RIDGE, NEAL

Provider ID: 631494
Provider Gender: Male
License Number: 20A6920
NPI: 1053381004
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH PRECISION PARK
 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

D2. Directorio de atención primaria

 Website: www.syhealth.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER	Board Certified Specialty: No IHP of Southern Cal-PHP KING CHAVEZ HEALTH CENTER  950 S EUCLID AVE SAN DIEGO, CA 92114  Phone: (619) 662-4100  After Hours Phone: (619) 662-4100  Website: www.syhealth.org/clinics/king-chavez-health-center Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER	N  Accessibility: CONTACT PROVIDER
<u>FAMILY PRACTICE</u> RIDGE, NEAL Provider ID: 631494 Provider Gender: Male License Number: 20A6920 NPI: 1053381004 <input type="checkbox"/> Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH PRECISION PARK  1666 PRECISION PARK LN SAN DIEGO, CA 92173  Phone: (619) 662-4100  After Hours Phone: (619) 662-4100  Website: www.syhealth.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER	<u>FAMILY PRACTICE</u> RITTER, STEVEN Provider ID: 451167 Provider Gender: Male License Number: 20A7435 NPI: 1356556021 <input type="checkbox"/> Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No IHP of Southern Cal-PHP KING CHAVEZ HEALTH CENTER  950 S EUCLID AVE SAN DIEGO, CA 92114  Phone: (619) 662-4100  After Hours Phone: (619) 662-4100  Website: www.syhealth.org/clinics/king-chavez-health-center Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL):	<u>FAMILY PRACTICE</u> RODRIGUEZ, LOUIE Provider ID: 206360 Provider Gender: Male License Number: A176144 NPI: 1558823625 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No Family Health Centers of San Diego LOGAN HEIGHTS FAMILY HEALTH CENTER  1809 NATIONAL AVE SAN DIEGO, CA 92113  Phone: (619) 515-2300  After Hours Phone: (619) 515-2300  Website: www.fhcsd.org Email: dalvarado@fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER
<u>FAMILY PRACTICE</u> RITTER, STEVEN Provider ID: 451167 Provider Gender: Male License Number: 20A7435 NPI: 1356556021 <input type="checkbox"/> Provider English Spoken: Y Cultural Competency: N		<u>FAMILY PRACTICE</u> RODRIGUEZ, LOUIE Provider ID: 206360 Provider Gender: Male License Number: A176144 NPI: 1558823625 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s)

D2. Directorio de atención primaria

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RODRIGUEZ, SEAN

Provider ID: 227409
Provider Gender: Male
License Number: A120576
NPI: 1780909903

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC - OCEAN VIEW

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

RODRIGUEZ, SEAN

Provider ID: 227409
Provider Gender: Male
License Number: A120576
NPI: 1780909903

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC - OCEAN VIEW

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

RODRIGUEZ, LOUIE

Provider ID: 417937
Provider Gender: Male
License Number: A176144
NPI: 1558823625

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RODRIGUEZ, LOUIE

Provider ID: 417937
Provider Gender: Male
License Number: A176144
NPI: 1558823625

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Cultural Competency: N

D2. Directorio de atención primaria

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ROSADO, IVAN

Provider ID: 517403

Provider Gender: Male

License Number: A169434

NPI: 1316479603

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH 25TH ST

FAMILY MEDICINE

316 25TH ST

SAN DIEGO, CA 92102

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ROSADO, IVAN

Provider ID: 517403

Provider Gender: Male

License Number: A169434

NPI: 1316479603

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH 25TH ST

FAMILY MEDICINE

316 25TH ST

SAN DIEGO, CA 92102

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ROSENBAUM, HERBERT

Provider ID: 631494

Provider Gender: Male

License Number: A169694

NPI: 1922532712

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

FAMILY MEDICINE

PRECISION PARK

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ROSENBAUM, HERBERT

Provider ID: 631494

Provider Gender: Male

License Number: A169694

NPI: 1922532712

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PRECISION PARK

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

D2. Directorio de atención primaria

SCHUMAKER, EDWARD

Provider ID: 185268

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

Fax: (619) 284-4731

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

FAMILY PRACTICE

SCHUMAKER, EDWARD

Provider ID: 185268

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

Fax: (619) 284-4731

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

FAMILY PRACTICE

SCOTT, RYLEE

Provider ID: 402851

Provider Gender: Male

License Number: A162946

NPI: 1457887911

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2300

 After Hours Phone: (619)

515-2300

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SCOTT, RYLEE

Provider ID: 402851

Provider Gender: Male

License Number: A162946

NPI: 1457887911

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org


Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SCOTT, LAGINA


Provider ID: 206360

Provider Gender: Female

D2. Directorio de atención primaria

License Number: A160489


NPI: 1558897009


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SCOTT, LAGINA

Provider ID: 206360

Provider Gender: Female

License Number: A160489


NPI: 1558897009


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


SHEIKH, ZARA


Provider ID: 233597

Provider Gender: Female

License Number: A163512

NPI: 1952808727

 Provider English Spoken: Y


 Provider Language(s) Spoken: Urdu


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619) 563-0250

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

FAMILY PRACTICE

SHEIKH, ZARA


Provider ID: 233532

Provider Gender: Female

License Number: A163512

NPI: 1952808727

 Provider English Spoken: Y

 Provider Language(s) Spoken: Urdu


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE 150

 Phone: (619) 280-2058

 After Hours Phone: (619) 280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

FAMILY PRACTICE

SHEIKH, ZARA

Provider ID: 233532

Provider Gender: Female

License Number: A163512

NPI: 1952808727

 Provider English Spoken: Y

 Provider Language(s) Spoken: Urdu

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC


 4305 UNIVERSITY AVE STE 150


D2. Directorio de atención primaria

SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 After Hours Phone: (619) 280-2058
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

FAMILY PRACTICE

SHEIKH, ZARA


Provider ID: 233597
Provider Gender: Female
License Number: A163512
NPI: 1952808727
 Provider English Spoken: Y
 Provider Language(s) Spoken: Urdu
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
 After Hours Phone: (619) 563-0250
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM






SA 8:00AM-2:00PM

FAMILY PRACTICE

SHIRAKI, JEAN



Provider ID: 417987
Provider Gender: Female
License Number: 20A17577
NPI: 1144684382
 Provider English Spoken: Y
 Provider Language(s) Spoken: Japanese
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 515-2426
 After Hours Phone: (619) 515-2426
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER






FAMILY PRACTICE

SHIRAKI, JEAN

Provider ID: 417987
Provider Gender: Female
License Number: 20A17577
NPI: 1144684382
 Provider English Spoken: Y
 Provider Language(s) Spoken: Japanese
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San



Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 515-2426
 After Hours Phone: (619) 515-2426
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SHUMILAK, KAILI

Provider ID: 418142
Provider Gender: Female
License Number: 20A12796
NPI: 1831489855
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105
 Phone: (619) 515-2454
 After Hours Phone: (619) 515-2454
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT

D2. Directorio de atención primaria

PROVIDER

FAMILY PRACTICE

SHUMILAK, KAILI

Provider ID: 418142

Provider Gender: Female

License Number: 20A12796

NPI: 1831489855

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HEALTH CTR SAN

DIEGO-OAK PARK

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

 Phone: (619) 515-2454

 After Hours Phone: (619)
515-2454

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SMOOT, CHARLES

Provider ID: 206360

Provider Gender: Male

License Number: A97036

NPI: 1245490358

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

FAMILY PRACTICE

SMOOT, CHARLES

Provider ID: 206360

Provider Gender: Male

License Number: A97036

NPI: 1245490358

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

FAMILY PRACTICE

SMOOT, CHARLES

Provider ID: 356145

Provider Gender: Male

License Number: A97036

NPI: 1245490358

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

SHERMAN HEIGHTS FAMILY
HLTH CTRS INC

 2391 ISLAND AVE
SAN DIEGO, CA 92102

 Phone: (619) 515-2435

 After Hours Phone: (619)
515-2435

 Website: N/A

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SMOOT, CHARLES


Provider ID: 356145

Provider Gender: Male

D2. Directorio de atención primaria

License Number: A97036

NPI: 1245490358

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

SHERMAN HEIGHTS FAMILY
HLTH CTRS INC

 2391 ISLAND AVE

SAN DIEGO, CA 92102

 Phone: (619) 515-2435

 After Hours Phone: (619)
515-2435

 Website: N/A

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


SNYDER, CHRISTOPHER

Provider ID: 517998

Provider Gender: Male

License Number: 20A7502

NPI: 1922041235

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

Hospital - Downey, JOHN F

KENNEDY MEMORIAL HOSP,

CEDARS SINAI MEDICAL

CENTER, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

EISENHOWER MEDICAL CTR,
GROSSMONT HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

COMMUNITY HEIGHTS FAMILY
MED

 4690 EL CAJON BLVD

SAN DIEGO, CA 92115

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


SNYDER, CHRISTOPHER

Provider ID: 517998

Provider Gender: Male

License Number: 20A7502

NPI: 1922041235

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

Hospital - Downey, JOHN F

KENNEDY MEMORIAL HOSP,

CEDARS SINAI MEDICAL

CENTER, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

EISENHOWER MEDICAL CTR,

GROSSMONT HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

COMMUNITY HEIGHTS FAMILY
MED

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SOPHY, ELIZABETH

Provider ID: 403583

Provider Gender: Female

License Number: A157547

NPI: 1013441203

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N



D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM



FAMILY PRACTICE


SOPHY, ELIZABETH


Provider ID: 403583
Provider Gender: Female
License Number: A157547
NPI: 1013441203

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

 *1501 IMPERIAL AVE*
SAN DIEGO, CA 92101
 *Phone: (619) 233-8500*
 *After Hours Phone: (619) 233-8500*



 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM




FAMILY PRACTICE


SUMMERS-DAY, COURTNEY

Provider ID: 214492
Provider Gender: Female
License Number: A112781
NPI: 1124288873

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
NESTOR COMMUNITY HEALTH CENTER

 *1016 OUTER RD*
SAN DIEGO, CA 92154
 *Phone: (619) 429-3733*
 *After Hours Phone: (619) 429-3733*



 *Website: www.ibclinic.org*
Email: avaldez@ibclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


SUMMERS-DAY, COURTNEY

Provider ID: 214492
Provider Gender: Female
License Number: A112781
NPI: 1124288873

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No

IHP of Southern Cal-PHP
NESTOR COMMUNITY HEALTH CENTER

 *1016 OUTER RD*
SAN DIEGO, CA 92154
 *Phone: (619) 429-3733*
 *After Hours Phone: (619) 429-3733*



 *Website: www.ibclinic.org*
Email: avaldez@ibclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

SWARTZ, JOHN



Provider ID: 403583
Provider Gender: Male
License Number: G72486
NPI: 1396754131

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

 *1501 IMPERIAL AVE*
SAN DIEGO, CA 92101
 *Phone: (619) 233-8500*
 *After Hours Phone: (619)*

D2. Directorio de atención primaria

233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE







SWARTZ, JOHN







Provider ID: 403583
Provider Gender: Male
License Number: G72486
NPI: 1396754131
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL, LOS ANGELES
COUNTY HARBOR UCLA
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE




THAI, JUSTIN

Provider ID: 417937
Provider Gender: Male
License Number: A177462
NPI: 1093276198
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SD
HILLCREST
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM
FAMILY PRACTICE
THAI, JUSTIN
Provider ID: 417937
Provider Gender: Male
License Number: A177462
NPI: 1093276198
 Provider English Spoken: Y





 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SD
HILLCREST
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

THAI, JUSTIN



Provider ID: 206360
Provider Gender: Male
License Number: A177462
NPI: 1093276198
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113

D2. Directorio de atención primaria

 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

THAI, JUSTIN


Provider ID: 206360
Provider Gender: Male
License Number: A177462
NPI: 1093276198
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego






LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

THOMAS, ZACHARY



Provider ID: 417987
Provider Gender: Male
License Number: A145023
NPI: 1326453119
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 515-2426
 After Hours Phone: (619) 515-2426
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



THOMAS, ZACHARY






Provider ID: 417987
Provider Gender: Male
License Number: A145023
NPI: 1326453119
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HEALTH CTR IBARRA
 4874 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 515-2426
 After Hours Phone: (619) 515-2426

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TRAN, TONNIA

Provider ID: 233597
Provider Gender: Female
License Number: 20A7662
NPI: 1982746657
 Provider English Spoken: Y
 Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
 After Hours Phone: (619) 563-0250
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TRAN, TONNIA

Provider ID: 233597
Provider Gender: Female
License Number: 20A7662
NPI: 1982746657



D2. Directorio de atención primaria






 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
 After Hours Phone: (619)
563-0250
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TRAN, UYEN THAO


Provider ID: 206360
Provider Gender: Female
License Number: A76709
NPI: 1891720355
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish,
Vietnamese
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
Fax: (619) 795-2756
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE






TRAN, UYEN THAO

Provider ID: 206360
Provider Gender: Female
License Number: A76709
NPI: 1891720355
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish,
Vietnamese
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
Fax: (619) 795-2756
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TRUONG, NHA

Provider ID: 417937
Provider Gender: Female
License Number: 20A17836
NPI: 1760975833
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SD
HILLCREST
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2400
 After Hours Phone: (619)
515-2400
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


TRUONG, NHA

Provider ID: 417937
Provider Gender: Female

D2. Directorio de atención primaria

License Number: 20A17836

NPI: 1760975833

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2400

 After Hours Phone: (619)
515-2400

 Website: www.fhcsd.org


Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


TSUCHIYA, KIMIKO

Provider ID: 417782

Provider Gender: Female

License Number: 20A19610

NPI: 1629637285

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

DOWNTOWN FAMILY CTR AT
CONNECTIONS

 1250 6TH AVE STE 100

SAN DIEGO, CA 92101

 Phone: (619) 515-2430

 After Hours Phone: (619)
515-2430

 Website: www.fhcsd.org

Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


TSUCHIYA, KIMIKO

Provider ID: 417782

Provider Gender: Female

License Number: 20A19610

NPI: 1629637285

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

DOWNTOWN FAMILY CTR AT
CONNECTIONS

 1250 6TH AVE STE 100

SAN DIEGO, CA 92101

 Phone: (619) 515-2430

 After Hours Phone: (619)
515-2430

 Website: www.fhcsd.org

Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


VALENZUELA, TRICIA


Provider ID: 206363

Provider Gender: Female

License Number: A161373

NPI: 1346776358

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San
Diego


DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

VALENZUELA, TRICIA


Provider ID: 206363

Provider Gender: Female

License Number: A161373

NPI: 1346776358

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

D2. Directorio de atención primaria








DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


FAMILY PRACTICE

VILLA, MARIA






Provider ID: 107710
Provider Gender: Female
NPI: 1861541385
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified Specialty: No
Community Care IPA LLC
MARIA T VILLA
 655 SATURN BLVD STE J
SAN DIEGO, CA 92154
 Phone: (619) 575-4442
Fax: (619) 575-1297
 After Hours Phone: (619)
575-4442
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE

WANG, REGINA


Provider ID: 403583
Provider Gender: Female
License Number: A109828
NPI: 1154554871
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: LONG
BEACH MEMORIAL MED CTR,
UCSD MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER


 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE

WANG, REGINA



Provider ID: 403583
Provider Gender: Female
License Number: A109828
NPI: 1154554871
 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: LONG
BEACH MEMORIAL MED CTR,
UCSD MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE

WHITE, KATHERINE

Provider ID: 227409
Provider Gender: Female
License Number: A120447
NPI: 1801112925
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC -
OCEAN VIEW
 3177 OCEAN VIEW BLVD

D2. Directorio de atención primaria

SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE **WHITE, KATHERINE**

Provider ID: 227409
Provider Gender: Female
License Number: A120447
NPI: 180112925
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC - OCEAN VIEW
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE **WU, JENNIFER**

Provider ID: 403583
Provider Gender: Female
License Number: A54702
NPI: 1215953013
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE **WU, JENNIFER**



Provider ID: 403583
Provider Gender: Female
License Number: A54702
NPI: 1215953013
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin, Spanish

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE **ZAHLER, MARVIN**


Provider ID: 417937
Provider Gender: Male
License Number: 20A11612
NPI: 1134380710
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD HILLCREST
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619)

D2. Directorio de atención primaria



515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ZAHLER, MARVIN




Provider ID: 417937
Provider Gender: Male
License Number: 20A11612
NPI: 1134380710
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC - OCEAN VIEW
FAMILY HLTH CTR SD HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER



FAMILY PRACTICE

ZINK, IRENE






Provider ID: 227409
Provider Gender: Female
License Number: C54198
NPI: 1215959549
 Provider English Spoken: Y
 Provider Language(s)
Spoken: German
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC - OCEAN VIEW
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

ZINK, IRENE

Provider ID: 227409
Provider Gender: Female
License Number: C54198
NPI: 1215959549
 Provider English Spoken: Y
 Provider Language(s)
Spoken: German
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC - OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC,

Provider ID: 206363
NPI: 1982747671
 Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
Fax: (619) 263-2499
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*

FQHC

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC,

Provider ID: 206363


NPI: 1982747671

 *Provider English Spoken: Y Cultural Competency: N*


Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 *Phone: (619) 515-2560*

Fax: (619) 263-2499

 *After Hours Phone: (619) 515-2560*

 *Website: www.fhcsd.org*

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FQHC

DOWNTOWN FAMILY CTR AT CONNECTIONS,

Provider ID: 417782


NPI: 1588901045

 *Provider English Spoken: Y Cultural Competency: N*

Family Health Centers of San Diego

DOWNTOWN FAMILY CTR AT CONNECTIONS

 1250 6TH AVE STE 100
SAN DIEGO, CA 92101

 *Phone: (619) 515-2430*

Fax: (619) 578-2410

 *After Hours Phone: (619) 515-2430*

 *Website: www.fhcsd.org*

Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

FQHC

DOWNTOWN FAMILY CTR AT CONNECTIONS,

Provider ID: 417782


NPI: 1588901045

 *Provider English Spoken: Y Cultural Competency: N*

Family Health Centers of San Diego

DOWNTOWN FAMILY CTR AT CONNECTIONS

 1250 6TH AVE STE 100
SAN DIEGO, CA 92101

 *Phone: (619) 515-2430*

Fax: (619) 578-2410

 *After Hours Phone: (619) 515-2430*

 *Website: www.fhcsd.org*

Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

FQHC

FAMILY HEALTH CTR IBARRA,

Provider ID: 417987

NPI: 1477953933


 *Provider English Spoken: Y Cultural Competency: N*

Family Health Centers of San Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE

SAN DIEGO, CA 92105

 *Phone: (619) 515-2426*

Fax: (619) 255-8002

 *After Hours Phone: (619) 515-2426*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HEALTH CTR IBARRA,

Provider ID: 417987

NPI: 1477953933


 *Provider English Spoken: Y Cultural Competency: N*

Family Health Centers of San Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE

SAN DIEGO, CA 92105

 *Phone: (619) 515-2426*

Fax: (619) 255-8002

 *After Hours Phone: (619) 515-2426*

 *Website: www.fhcsd.org*

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Diego

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HEALTH CTR OF SD-ELM ST,

Provider ID: 419167


NPI: 1316419070

 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego


FAMILY HEALTH CTR OF SD-ELM ST

 140 ELM ST
SAN DIEGO, CA 92101

 Phone: (619) 515-2520

Fax: (619) 231-0431

 After Hours Phone: (619) 515-2520


 Website: www.fhcsd.org
Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Diego

N

 Accessibility: CONTACT PROVIDER


Hours: M-F 8:00AM-5:00PM

FQHC

FAMILY HEALTH CTR OF SD-ELM ST,

Provider ID: 419167

NPI: 1316419070

 Provider English Spoken: Y


Cultural Competency: N

Family Health Centers of San

DIEGO


FAMILY HEALTH CTR OF SD-ELM ST

 140 ELM ST
SAN DIEGO, CA 92101

 Phone: (619) 515-2520

Fax: (619) 231-0431

 After Hours Phone: (619) 515-2520

 Website: www.fhcsd.org
Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,

Provider ID: 418142

NPI: 1336525906

 Provider English Spoken: Y
Cultural Competency: N


Family Health Centers of San

DIEGO

FAMILY HEALTH CTR SAN


DIEGO-OAK PARK

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

 Phone: (619) 515-2454

Fax: (619) 794-2696

 After Hours Phone: (619) 515-2454

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,

Provider ID: 664747


NPI: 1336525906


 Provider English Spoken: Y
Cultural Competency: N


Family Health Centers of San Diego

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

 2114 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2406

 After Hours Phone: (619) 515-2406

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,

Provider ID: 664747




NPI: 1336525906


 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

D2. Directorio de atención primaria

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

 2114 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2406
 After Hours Phone: (619)
515-2406

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,


Provider ID: 418142

NPI: 1336525906

 Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San
Diego


FAMILY HEALTH CTR SAN DIEGO-OAK PARK

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

 Phone: (619) 515-2454

Fax: (619) 794-2696

 After Hours Phone: (619)
515-2454

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL,

Provider ID: 419529

NPI: 1235521782


 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San
Diego


FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

Fax: (619) 269-0053

 After Hours Phone: (619)
515-2422

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL,

Provider ID: 419529

NPI: 1235521782

 Provider English Spoken: Y
Cultural Competency: N


Family Health Centers of San
Diego

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


 2325 COMMERCIAL ST STE


1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

Fax: (619) 269-0053


 After Hours Phone: (619)
515-2422

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE,

Provider ID: 417429


NPI: 1952729303

 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San
Diego


FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

Fax: (619) 501-5814


 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

D2. Directorio de atención primaria

FQHC

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE,

Provider ID: 417429


NPI: 1952729303

 Provider English Spoken: Y
Cultural Competency: N


Family Health Centers of San Diego


FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

Fax: (619) 501-5814


 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HLTH CTR SAN DIEGO-BEACH AREA,

Provider ID: 402851


NPI: 1386689701

 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego


FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

Fax: (858) 488-1394


 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

FQHC

FAMILY HLTH CTR SAN DIEGO-BEACH AREA,

Provider ID: 402851


NPI: 1386689701

 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego


FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

Fax: (858) 488-1394

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

FQHC

FAMILY HLTH CTR SD HILLCREST,

Provider ID: 417937


NPI: 1629456900

 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego


FAMILY HLTH CTR SD HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

Fax: (619) 501-9645

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

FQHC

FAMILY HLTH CTR SD HILLCREST,

Provider ID: 417937

NPI: 1629456900

 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San

D2. Directorio de atención primaria

Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

Fax: (619) 501-9645

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

FQHC

**KING CHAVEZ HEALTH
CENTER,**

Provider ID: 451167

NPI: 1538262092

Provider English Spoken: Y

Cultural Competency: N

IHP of Southern Cal-PHP

KING CHAVEZ HEALTH

CENTER

950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

Fax: (619) 205-1952

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:00PM

FQHC

**KING CHAVEZ HEALTH
CENTER,**

Provider ID: 451167

NPI: 1538262092

Provider English Spoken: Y

Cultural Competency: N

IHP of Southern Cal-PHP

KING CHAVEZ HEALTH

CENTER

950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

Fax: (619) 205-1952

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:00PM

FQHC

**LA MAESTRA FAMILY CLINIC
INC,**

Provider ID: 185268

NPI: 1336353721

Provider English Spoken: Y

Cultural Competency: N

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 280-4213

Fax: (619) 795-9849

After Hours Phone: (619)
280-4213

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

**LA MAESTRA FAMILY CLINIC
INC,**

Provider ID: 185268

NPI: 1336353721

Provider English Spoken: Y

Cultural Competency: N

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 280-4213

Fax: (619) 795-9849

After Hours Phone: (619)
280-4213

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org


Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\None

American Sign Language (ASL): CTR

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM


FQHC

LINDA VISTA HEALTH CARE

CTR,

Provider ID: 206046

NPI: 1780665877

 Provider English Spoken: Y


Cultural Competency: N

IHP of Southern Cal-PHP


LINDA VISTA HEALTH CARE

CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): CTR

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

LINDA VISTA HEALTH CARE

CTR,

Provider ID: 206046

NPI: 1609905215


 Provider English Spoken: Y

Cultural Competency: N


IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): CTR

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM


FQHC

LINDA VISTA HEALTH CARE

CTR,

Provider ID: 206046

NPI: 1780665877


 Provider English Spoken: Y

Cultural Competency: N


IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

LINDA VISTA HEALTH CARE

CTR,

Provider ID: 206046

NPI: 1609905215


 Provider English Spoken: Y

Cultural Competency: N


IHP of Southern Cal-PHP


LINDA VISTA HEALTH CARE

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

LOGAN HEIGHTS FAMILY

HEALTH CENTER,

Provider ID: 206360

NPI: 1447281936

 Provider English Spoken: Y

Cultural Competency: N

Family Health Centers of San



Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113


D2. Directorio de atención primaria

 Phone: (619) 515-2300
Fax: (619) 234-2447
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FQHC


LOGAN HEIGHTS FAMILY HEALTH CENTER,

Provider ID: 206360
NPI: 1447281936


 Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300
Fax: (619) 234-2447

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

FQHC

LOGAN HEIGHTS FAMILY


HEALTH CENTER,
Provider ID: 624977

NPI: 1447281936


 Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 2204 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2355
Fax: (619) 232-7011

 After Hours Phone: (619) 515-2355

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes


Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FQHC


LOGAN HEIGHTS FAMILY HEALTH CENTER,

Provider ID: 624977
NPI: 1447281936

 Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY HEALTH CENTER

 2204 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2355
Fax: (619) 232-7011

 After Hours Phone: (619) 515-2355

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FQHC

MID-CITY COMMUNITY CLINIC,


Provider ID: 233532


NPI: 1962483040

 Provider English Spoken: Y
Cultural Competency: N


IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC


 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

 Phone: (619) 280-2058
Fax: (858) 633-4682

 After Hours Phone: (619) 280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

FQHC

MID-CITY COMMUNITY CLINIC,

Provider ID: 233597



NPI: 1962483040

 Provider English Spoken: Y
Cultural Competency: N


IHP of Southern Cal-PHP





MID-CITY COMMUNITY CLINIC

D2. Directorio de atención primaria


 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
Fax: (858) 633-4681
 After Hours Phone: (619)
563-0250
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM



FQHC


MID-CITY COMMUNITY CLINIC,
Provider ID: 233597
NPI: 1962483040
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC


 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
Fax: (858) 633-4681
 After Hours Phone: (619)
563-0250
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

FQHC

MID-CITY COMMUNITY CLINIC,
Provider ID: 233532
NPI: 1962483040
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 Phone: (619) 280-2058
Fax: (858) 633-4682

 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER



Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

FQHC

**NESTOR COMMUNITY HEALTH
CENTER,**

Provider ID: 214492
NPI: 1215246996

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
NESTOR COMMUNITY
HEALTH CENTER

 1016 OUTER RD
SAN DIEGO, CA 92154
 Phone: (619) 429-3733
Fax: (619) 628-5550

 After Hours Phone: (619)

429-3733

 Website: www.ibclinic.org

Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:00PM

TU-TH 8:30AM-8:00PM

F 8:30AM-5:00PM

FQHC

**NESTOR COMMUNITY HEALTH
CENTER,**

Provider ID: 214492

NPI: 1215246996


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

NESTOR COMMUNITY

HEALTH CENTER

 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

 Website: www.ibclinic.org

Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:00PM

TU-TH 8:30AM-8:00PM

F 8:30AM-5:00PM

D2. Directorio de atención primaria

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 206362

NPI: 1700821303

☐ Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

📍 3544 30TH ST
SAN DIEGO, CA 92104

☎ Phone: (619) 515-2424

Fax: (619) 501-0627

🕒 After Hours Phone: (619) 515-2424

🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 416831

NPI: 1700821303

☐ Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

📍 3514 30TH ST
SAN DIEGO, CA 92104

☎ Phone: (619) 515-2424

Fax: (619) 683-7586

🕒 After Hours Phone: (619)

515-2424

🌐 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 206362

NPI: 1184169963

☐ Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

📍 3544 30TH ST
SAN DIEGO, CA 92104

☎ Phone: (619) 515-2424

Fax: (619) 501-0627

🕒 After Hours Phone: (619) 515-2424

🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 206362

NPI: 1184169963

☐ Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

📍 3544 30TH ST
SAN DIEGO, CA 92104

☎ Phone: (619) 515-2424

Fax: (619) 501-0627

🕒 After Hours Phone: (619) 515-2424

🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 206362

NPI: 1700821303

☐ Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

📍 3544 30TH ST
SAN DIEGO, CA 92104

☎ Phone: (619) 515-2424

Fax: (619) 501-0627























🕒 After Hours Phone: (619) 515-2424

🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes



Min/Max Age: 0\None

American Sign Language (ASL):

D2. Directorio de atención primaria





- N**
 *Accessibility: CONTACT PROVIDER*
- FQHC**
NORTH PARK FAMILY HEALTH CENTERS,
Provider ID: 416831
NPI: 1700821303
 *Provider English Spoken: Y*
Cultural Competency: N
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS
 3514 30TH ST
SAN DIEGO, CA 92104
 *Phone: (619) 515-2424*
Fax: (619) 683-7586
 *After Hours Phone: (619) 515-2424*
 *Website: www.fhcsd.org*
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-5:00PM
- FQHC**
OPERATION SAMAHAN - MIRA MESA,
Provider ID: 432308
NPI: 1861933897
 *Provider English Spoken: Y*
Cultural Competency: N
Operation Samahan
OPERATION SAMAHAN - MIRA MESA
-  9855 ERMA RD STE 105
SAN DIEGO, CA 92131
 *Phone: (844) 200-2426*
Fax: (858) 536-8034
 *After Hours Phone: (844) 200-2426*
 *Website: www.operationsamahan.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
- FQHC**
OPERATION SAMAHAN - MIRA MESA,
Provider ID: 432308
NPI: 1861933897
 *Provider English Spoken: Y*
Cultural Competency: N
Operation Samahan
OPERATION SAMAHAN - MIRA MESA
 9855 ERMA RD STE 105
SAN DIEGO, CA 92131
 *Phone: (844) 200-2426*
Fax: (858) 536-8034
 *After Hours Phone: (844) 200-2426*
 *Website: www.operationsamahan.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
- FQHC**
OPERATION SAMAHAN - MIRA MESA,
Provider ID: 417101
NPI: 1871680397
 *Provider English Spoken: Y*
Cultural Competency: N
Operation Samahan
OPERATION SAMAHAN - MIRA MESA
 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
 *Phone: (844) 200-2426*
Fax: (858) 578-4417
 *After Hours Phone: (844) 200-2426*
 *Website: www.operationsamahan.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-4:30PM
- FQHC**
OPERATION SAMAHAN - MIRA MESA,
Provider ID: 417101
NPI: 1871680397
 *Provider English Spoken: Y*
Cultural Competency: N
Operation Samahan
OPERATION SAMAHAN - MIRA MESA
 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
 *Phone: (844) 200-2426*
Fax: (858) 578-4417
 *After Hours Phone: (844) 200-2426*

D2. Directorio de atención primaria

 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

FQHC




OPERATION SAMAHAN RANCHO PENASQUITOS,

Provider ID: 418535
NPI: 1699216622
 Provider English Spoken: Y
Cultural Competency: N
Operation Samahan
OPERATION SAMAHAN
RANCHO PENASQUITOS
 9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129
 Phone: (844) 200-2426
Fax: (858) 695-9074
 After Hours Phone: (844) 200-2426

 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

FQHC



OPERATION SAMAHAN




RANCHO PENASQUITOS,
Provider ID: 418535
NPI: 1699216622
 Provider English Spoken: Y
Cultural Competency: N
Operation Samahan
OPERATION SAMAHAN
RANCHO PENASQUITOS
 9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129
 Phone: (844) 200-2426
Fax: (858) 695-9074

 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

FQHC

SAN DIEGO AMERICAN INDIAN HEALTH CENTER,




Provider ID: 207382
NPI: 1003902917
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN DIEGO AMERICAN INDIAN HEALTH CENTER
 2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
Fax: (619) 234-0206

 After Hours Phone: (619) 234-2158
 Website: WWW.SDAIHC.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Indian Health Services: Y

FQHC

SAN DIEGO AMERICAN INDIAN HEALTH CENTER,

Provider ID: 207382
NPI: 1003902917
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN DIEGO AMERICAN INDIAN HEALTH CENTER
 2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
Fax: (619) 234-0206

 After Hours Phone: (619) 234-2158
 Website: WWW.SDAIHC.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Indian Health Services: Y


FQHC

D2. Directorio de atención primaria

SAN DIEGO FAMILY CARE,


Provider ID: 482070

NPI: 1457724858

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP


SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680


 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM


SA 9:00AM-4:00PM

FQHC

SAN DIEGO FAMILY CARE,


Provider ID: 482070

NPI: 1457724858

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP


SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM


SA 9:00AM-4:00PM

FQHC

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE,


Provider ID: 517403

NPI: 1598308926

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP


**SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE**

 316 25TH ST
SAN DIEGO, CA 92102

 Phone: (619) 238-5551

Fax: (619) 238-3807

 After Hours Phone: (619)
238-5551

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE,


Provider ID: 517403

NPI: 1598308926

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP
**SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE**

 316 25TH ST
SAN DIEGO, CA 92102

 Phone: (619) 238-5551

Fax: (619) 238-3807

 After Hours Phone: (619)
238-5551

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Hours: M-F 8:00AM-5:00PM

FQHC


SAN YSIDRO HEALTH CHC - OCEAN VIEW,


Provider ID: 227409

NPI: 1326225632

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP


**SAN YSIDRO HEALTH CHC -
OCEAN VIEW**

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

Fax: (619) 595-0258

 After Hours Phone: (619)
662-4100


 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH CHC - OCEAN VIEW,


Provider ID: 227409


NPI: 1326225632

 *Provider English Spoken: Y*
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC - OCEAN VIEW

 *3177 OCEAN VIEW BLVD*
SAN DIEGO, CA 92113

 *Phone: (619) 662-4100*

Fax: (619) 595-0258

 *After Hours Phone: (619) 662-4100*

 *Website: <https://www.syhealth.org/locations>*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED,

Provider ID: 517998

NPI: 1205477841

 *Provider English Spoken: Y*
Cultural Competency: N


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

COMMUNITY HEIGHTS FAMILY

MED

 *4690 EL CAJON BLVD*
SAN DIEGO, CA 92115

 *Phone: (619) 662-4100*

Fax: (619) 824-9076

 *After Hours Phone: (619) 662-4100*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED,

Provider ID: 517998

NPI: 1205477841

 *Provider English Spoken: Y*
Cultural Competency: N


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

COMMUNITY HEIGHTS FAMILY

MED

 *4690 EL CAJON BLVD*
SAN DIEGO, CA 92115

 *Phone: (619) 662-4100*

Fax: (619) 824-9076

 *After Hours Phone: (619) 662-4100*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH PRECISION PARK,

Provider ID: 631494


NPI: 1124782685

 *Provider English Spoken: Y*
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH PRECISION PARK

 *1666 PRECISION PARK LN*
SAN DIEGO, CA 92173

 *Phone: (619) 662-4100*

Fax: (619) 600-4870


 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH PRECISION PARK,

Provider ID: 631494

NPI: 1124782685


 *Provider English Spoken: Y*
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PRECISION PARK

 *1666 PRECISION PARK LN*
SAN DIEGO, CA 92173

 *Phone: (619) 662-4100*

Fax: (619) 600-4870

 *After Hours Phone: (619)*

D2. Directorio de atención primaria

662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

SHERMAN HEIGHTS FAMILY HLTH CTRS INC,

Provider ID: 356145

NPI: 1174549232

Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

2391 ISLAND AVE
SAN DIEGO, CA 92102

Phone: (619) 515-2435

Fax: (619) 515-2435

After Hours Phone: (619) 515-2435

Website: N/A

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

FQHC

SHERMAN HEIGHTS FAMILY HLTH CTRS INC,

Provider ID: 356145

NPI: 1174549232

Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

2391 ISLAND AVE
SAN DIEGO, CA 92102

Phone: (619) 515-2435

Fax: (619) 515-2435

After Hours Phone: (619) 515-2435

Website: N/A

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

FQHC

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER,

Provider ID: 403583

NPI: 1659415131

Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500

Fax: (619) 687-1067

After Hours Phone: (619) 233-8500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

FQHC

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER,

Provider ID: 403583

NPI: 1659415131

Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500

Fax: (619) 687-1067

After Hours Phone: (619) 233-8500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

GASTROENTEROLOGY

FRENETTE, CATHERINE

Provider ID: 417937

Provider Gender: Female

License Number: A80461

NPI: 1417935081

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL,

D2. Directorio de atención primaria

SCRIPPS MERCY HOSPITAL
CHULA VISTA, CALIFORNIA
PACIFIC MED CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545
After Hours Phone: (619)
515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

GASTROENTEROLOGY

FRENETTE, CATHERINE

Provider ID: 417937

Provider Gender: Female

License Number: A80461

NPI: 1417935081

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, CALIFORNIA
PACIFIC MED CTR

Board Certified Specialty: No
Family Health Centers of San

Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545
After Hours Phone: (619)
515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

GASTROENTEROLOGY

GADDIPATI, KISHORE

Provider ID: 417937

Provider Gender: Male

License Number: A111638

NPI: 1720114093

Provider English Spoken: Y

Provider Language(s)
Spoken: Faroese, Hindi,
Spanish, Telugu, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545
After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

GASTROENTEROLOGY

GADDIPATI, KISHORE

Provider ID: 417937

Provider Gender: Male

License Number: A111638

NPI: 1720114093

Provider English Spoken: Y

Provider Language(s)
Spoken: Faroese, Hindi,
Spanish, Telugu, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545
After Hours Phone: (619)
515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT



D2. Directorio de atención primaria

PROVIDER
Hours: M-F 8:00AM-5:00PM

GASTROENTEROLOGY



HAI, FAIZI


Provider ID: 417937
Provider Gender: Male
License Number: A159324
NPI: 1639523228

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None


American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

GASTROENTEROLOGY

HAI, FAIZI


Provider ID: 417937
Provider Gender: Male
License Number: A159324
NPI: 1639523228

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None



American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

GASTROENTEROLOGY

STIPHO, SALLY

Provider ID: 417937
Provider Gender: Female
License Number: A104647
NPI: 1467642215


 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, KINDRED
HOSPITAL SAN DIEGO,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San

Diego


FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

GASTROENTEROLOGY

STIPHO, SALLY

Provider ID: 417937
Provider Gender: Female
License Number: A104647
NPI: 1467642215

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French



Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, KINDRED
HOSPITAL SAN DIEGO,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103


D2. Directorio de atención primaria

 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

GENERAL PRACTICE

BELLO, OSAGIE

Provider ID: 417101

Provider Gender: Male

License Number: A115182

NPI: 1164726378

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL,
SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY
HOSPITAL, SCRIPPS GREEN

HOSPITAL


Board Certified Specialty: No


Operation Samahan

OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsa

mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

GENERAL PRACTICE

BELLO, OSAGIE

Provider ID: 417101

Provider Gender: Male

License Number: A115182

NPI: 1164726378

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL,
SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY
HOSPITAL, SCRIPPS GREEN

HOSPITAL


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

GENERAL PRACTICE


DOAN STEPHENS, CRYSTAL

Provider ID: 233532

Provider Gender: Female

License Number: A152267

NPI: 1730570144


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

GENERAL PRACTICE

DOAN STEPHENS, CRYSTAL

Provider ID: 233532

Provider Gender: Female

License Number: A152267


NPI: 1730570144



 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

D2. Directorio de atención primaria

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

 Phone: (619) 280-2058
 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

GENERAL PRACTICE **RECALDE, FRANCISCO**

Provider ID: 13850

Provider Gender: Male

NPI: 1538309067

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Imperial Health Holdings


Medical Group-SD

FRANCISCO J RECALDE

 3811 EL CAJON BLVD
SAN DIEGO, CA 92105

 Phone: (619) 284-5622
Fax: (619) 566-4655

 After Hours Phone: (619)
507-3050

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT


PROVIDER
Hours: M-F 8:30AM-5:00PM

GENERAL PRACTICE **RECALDE, FRANCISCO**

Provider ID: 13850

Provider Gender: Male

NPI: 1538309067

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Community Care IPA LLC

FRANCISCO J RECALDE

 3811 EL CAJON BLVD
SAN DIEGO, CA 92105

 Phone: (619) 284-5622
Fax: (619) 566-4655


 After Hours Phone: (619)
507-3050

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

HEPATOLOGY


GISH, ROBERT

Provider ID: 185268

Provider Gender: Male

License Number: G45632

NPI: 1548281322

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Dutch, French,



Spanish, Vietnamese
Cultural Competency: N


Hospital Affiliation: LOMA
LINDA UNIVERSITY COMM
MED CTR

Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155
 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

HEPATOLOGY

GISH, ROBERT

Provider ID: 185268

Provider Gender: Male

License Number: G45632

NPI: 1548281322

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Dutch, French,
Spanish, Vietnamese

Cultural Competency: N

Hospital Affiliation: LOMA
LINDA UNIVERSITY COMM
MED CTR

Board Certified Specialty: No
La Maestra Family Clinic

D2. Directorio de atención primaria

LA MAESTRA FAMILY CLINIC INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619)
255-9155
 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

ALASSIL, SALLY

Provider ID: 206360

Provider Gender: Female

License Number: A122238

NPI: 1982044483

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE


ALASSIL, SALLY

Provider ID: 206360

Provider Gender: Female

License Number: A122238

NPI: 1982044483

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

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 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE


ALASSIL, SALLY

Provider ID: 419529

Provider Gender: Female

License Number: A122238

NPI: 1982044483

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

 After Hours Phone: (619)
515-2422

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

ALASSIL, SALLY

Provider ID: 419529

Provider Gender: Female

License Number: A122238

NPI: 1982044483

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San

Diego




FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113



 Phone: (619) 515-2422

D2. Directorio de atención primaria

 After Hours Phone: (619) 515-2422
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE



ALDOUS, JEANNETTE





Provider ID: 451167
Provider Gender: Female
License Number: A101017
NPI: 1073650339
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified Specialty: No IHP of Southern Cal-PHP KING CHAVEZ HEALTH CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


ALDOUS, JEANNETTE

Provider ID: 451167
Provider Gender: Female
License Number: A101017
NPI: 1073650339
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified Specialty: No IHP of Southern Cal-PHP KING CHAVEZ HEALTH CENTER




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 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

ANDERSON, KENDELL


Provider ID: 417937
Provider Gender: Female
License Number: 20A15598
NPI: 1285028191
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

ANDERSON, KENDELL

Provider ID: 417937
Provider Gender: Female
License Number: 20A15598
NPI: 1285028191
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST
 4094 4TH AVE
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 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


ANDREWS, JOHN

Provider ID: 403583

Provider Gender: Male

License Number: G71080

NPI: 1003164302

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500


 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE


ANDREWS, JOHN

Provider ID: 403583

Provider Gender: Male

License Number: G71080

NPI: 1003164302

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE


ASKAR, MINA

Provider ID: 417937

Provider Gender: Female

License Number: A187343

NPI: 1457939928

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545


 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

ASKAR, MINA


Provider ID: 417937

Provider Gender: Female

License Number: A187343

NPI: 1457939928

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego


Diego


FAMILY HLTH CTR SD

HILLCREST

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

D2. Directorio de atención primaria

INTERNAL MEDICINE

BENITEZ, MARTHA

Provider ID: 206362

Provider Gender: Female

License Number: 20A19248

NPI: 1124521901

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

BENITEZ, MARTHA

Provider ID: 206362

Provider Gender: Female

License Number: 20A19248

NPI: 1124521901

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San


Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

BENITEZ, MARTHA

Provider ID: 206362

Provider Gender: Female

License Number: 20A19248

NPI: 1124521901

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego


NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

INTERNAL MEDICINE

BENITEZ, MARTHA

Provider ID: 206362

Provider Gender: Female

License Number: 20A19248

NPI: 1124521901

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

BOHR, CHRISTINA

Provider ID: 417937

Provider Gender: Female

License Number: 20A17702

NPI: 1841794344

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

D2. Directorio de atención primaria



FAMILY HLTH CTR SD HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

BOHR, CHRISTINA



Provider ID: 417937
Provider Gender: Female
License Number: 20A17702
NPI: 1841794344
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SD
HILLCREST
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SD
HILLCREST
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER






PROVIDER

INTERNAL MEDICINE

BRIONES COLMAN, FELICIA



Provider ID: 417937
Provider Gender: Female
License Number: A80153
NPI: 1962517367
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM


INTERNAL MEDICINE

BRIONES COLMAN, FELICIA

Provider ID: 417937
Provider Gender: Female
License Number: A80153
NPI: 1962517367
 Provider English Spoken: Y
 Provider Language(s)





Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD HILLCREST

 4094 4TH AVE
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 Phone: (619) 515-2545
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515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

CHAN, ANDY

Provider ID: 417937
Provider Gender: Male
License Number: 20A20352
NPI: 1104480912
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SD
HILLCREST
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545

D2. Directorio de atención primaria

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org


Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

CHAN, ANDY

Provider ID: 417937

Provider Gender: Male

License Number: 20A20352

NPI: 1104480912

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org


Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

CHANDRADAS, SAJIV

Provider ID: 417937

Provider Gender: Male

License Number: A122474

NPI: 1720350465

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS


MERCY HOSPITAL

Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

CHANDRADAS, SAJIV

Provider ID: 417937

Provider Gender: Male

License Number: A122474

NPI: 1720350465

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS


MERCY HOSPITAL

Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

CHEN, JAMES

Provider ID: 417937

Provider Gender: Male

License Number: A86644

NPI: 1265495691

Provider English Spoken: Y

Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: SCRIPPS

D2. Directorio de atención primaria

MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545
After Hours Phone: (619)
515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CHEN, JAMES

Provider ID: 417937

Provider Gender: Male

License Number: A86644

NPI: 1265495691

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CSAPOCZI, PETER

Provider ID: 451167

Provider Gender: Male

License Number: A96919

NPI: 1841357118

Provider English Spoken: Y

Provider Language(s)
Spoken: Hungarian,
Spanish, Ukrainian

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

KING CHAVEZ HEALTH

CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:00PM

INTERNAL MEDICINE

CSAPOCZI, PETER

Provider ID: 451167

Provider Gender: Male

License Number: A96919

NPI: 1841357118

Provider English Spoken: Y

Provider Language(s)
Spoken: Hungarian,
Spanish, Ukrainian

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

KING CHAVEZ HEALTH

CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:00PM

INTERNAL MEDICINE

CUMMINS, ANDREW


Provider ID: 417937

Provider Gender: Male

License Number: A102764

D2. Directorio de atención primaria

NPI: 1699917096

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL


HOSPITAL ENCINITAS

Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org


Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE


CUMMINS, ANDREW

Provider ID: 417937

Provider Gender: Male

License Number: A102764

NPI: 1699917096

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL


HOSPITAL ENCINITAS

Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

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515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE


CURTIS, MEGAN

Provider ID: 206360

Provider Gender: Female

License Number: A187390

NPI: 1699138115

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San
Diego


LOGAN HEIGHTS FAMILY


HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CURTIS, MEGAN

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 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

DAHMS, ERIC


Provider ID: 417937

Provider Gender: Male

License Number: G80316



NPI: 1306808464

D2. Directorio de atención primaria

 Provider English Spoken: Y
 Provider Language(s)
Spoken: German
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SD
HILLCREST
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE




DAHMS, ERIC


Provider ID: 417937
Provider Gender: Male
License Number: G80316
NPI: 1306808464
 Provider English Spoken: Y
 Provider Language(s)
Spoken: German
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego
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Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

DIEP, KEVIN

Provider ID: 417937
Provider Gender: Male
License Number: 20A17657
NPI: 1083117865
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SD
HILLCREST
 4094 4TH AVE
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 Website: www.fhcsd.org

Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

DIEP, KEVIN

Provider ID: 417937
Provider Gender: Male
License Number: 20A17657
NPI: 1083117865
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
Family Health Centers of San
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Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

D2. Directorio de atención primaria

INTERNAL MEDICINE

DIXIT, SHUBHAM

Provider ID: 417937

Provider Gender: Male

License Number: 20A21421

NPI: 1932785367

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

DIXIT, SHUBHAM

Provider ID: 417937

Provider Gender: Male

License Number: 20A21421

NPI: 1932785367

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

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Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

DODGE, JOHN

Provider ID: 417937

Provider Gender: Male

License Number: G67831

NPI: 1770510489

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
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Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

DODGE, JOHN

Provider ID: 417937

Provider Gender: Male

License Number: G67831

NPI: 1770510489

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

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Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

D2. Directorio de atención primaria

PROVIDER

INTERNAL MEDICINE

DOMINGUEZ, FERNANDO

Provider ID: 417937

Provider Gender: Male

License Number: A154708

NPI: 1972917672

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE

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 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

DOMINGUEZ, FERNANDO

Provider ID: 417937

Provider Gender: Male

License Number: A154708

NPI: 1972917672

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

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 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

FABELLA, GABRIEL

Provider ID: 9774

Provider Gender: Male

NPI: 1124060827

Provider English Spoken: Y

Provider Language(s)
Spoken: Japanese, Spanish,
Tagalog

Cultural Competency: N


Board Certified Specialty: No

Community Care IPA LLC


GABRIEL T FABELLA

 10737 CAMINO RUIZ STE 115

SAN DIEGO, CA 92126

 Phone: (858) 695-1262

Fax: (858) 695-2132

 After Hours Phone: (858)
695-1262

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-3:00PM

INTERNAL MEDICINE

FARASAT, SADAF

Provider ID: 206360

Provider Gender: Female

License Number: A147939

NPI: 1255696407

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Punjabi,
Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, NATIVIDAD MEDICAL

CENTER, PALOMAR MEDICAL

CENTER

Board Certified Specialty: No


Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

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 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

D2. Directorio de atención primaria

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


FARASAT, SADAF


Provider ID: 206360

Provider Gender: Female

License Number: A147939

NPI: 1255696407

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Punjabi,
Urdu


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, NATIVIDAD MEDICAL
CENTER, PALOMAR MEDICAL
CENTER


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

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 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300


 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


GEHR, MARC

Provider ID: 417937

Provider Gender: Male

License Number: G67338

NPI: 1306800180

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


GEHR, MARC


Provider ID: 417937

Provider Gender: Male

License Number: G67338

NPI: 1306800180

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR SD

HILLCREST

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 Phone: (619) 515-2545

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 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

GERWER, JOHANNA

Provider ID: 206360

Provider Gender: Female

License Number: A169752

NPI: 1043742588


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

D2. Directorio de atención primaria

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


GERWER, JOHANNA

Provider ID: 206360

Provider Gender: Female

License Number: A169752

NPI: 1043742588

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

GUTIERREZ, ANGELICA

Provider ID: 233597

Provider Gender: Female

License Number: A175116

NPI: 1982180329


 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619) 563-0250

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

INTERNAL MEDICINE


GUTIERREZ, ANGELICA

Provider ID: 233597

Provider Gender: Female

License Number: A175116

NPI: 1982180329


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619) 563-0250

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

INTERNAL MEDICINE

HAN, PAUL


Provider ID: 417937

Provider Gender: Male

License Number: A116816

NPI: 1053553339

 Provider English Spoken: Y

 Provider Language(s) Spoken: Korean

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

D2. Directorio de atención primaria

HAN, PAUL

Provider ID: 417937

Provider Gender: Male

License Number: A116816

NPI: 1053553339

Provider English Spoken: Y

Provider Language(s)
Spoken: Korean

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

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515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

HAZELBAKER, PAUL

Provider ID: 417782

Provider Gender: Male

License Number: 20A7147

NPI: 1831106103

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

DOWNTOWN FAMILY CTR AT
CONNECTIONS

1250 6TH AVE STE 100
SAN DIEGO, CA 92101

Phone: (619) 515-2430

After Hours Phone: (619)
515-2430

Website: www.fhcsd.org

Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

HAZELBAKER, PAUL

Provider ID: 417782

Provider Gender: Male

License Number: 20A7147

NPI: 1831106103

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

DOWNTOWN FAMILY CTR AT
CONNECTIONS

1250 6TH AVE STE 100
SAN DIEGO, CA 92101

Phone: (619) 515-2430

After Hours Phone: (619)
515-2430

Website: www.fhcsd.org

Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

HENDERSON, PHILIP

Provider ID: 417937

Provider Gender: Male

License Number: A140324

NPI: 1447678834

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

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After Hours Phone: (619)
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Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

HENDERSON, PHILIP

Provider ID: 417937

Provider Gender: Male

License Number: A140324

D2. Directorio de atención primaria


NPI: 1447678834


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

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 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

HIGGINSON, MICHELLE

Provider ID: 417937

Provider Gender: Female

License Number: A74420

NPI: 1114955879

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

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Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

HIGGINSON, MICHELLE

Provider ID: 417937

Provider Gender: Female

License Number: A74420

NPI: 1114955879


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

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Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

JACKSON, GAVIN

Provider ID: 417937

Provider Gender: Male

License Number: A110647

NPI: 1609033182

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545


 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

INTERNAL MEDICINE

JACKSON, GAVIN


Provider ID: 417937

Provider Gender: Male

D2. Directorio de atención primaria

License Number: A110647

NPI: 1609033182

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

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 After Hours Phone: (619)
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 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

INTERNAL MEDICINE

JAMISON, KAREN

Provider ID: 417937

Provider Gender: Female

License Number: A95356

NPI: 1285830505


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
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Fax: (619) 501-9645

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

JAMISON, KAREN

Provider ID: 417937

Provider Gender: Female

License Number: A95356

NPI: 1285830505


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

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SAN DIEGO, CA 92103

 Phone: (619) 515-2545

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 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

KARCHES, KELLI

Provider ID: 417937

Provider Gender: Female

License Number: A80931

NPI: 1891997631

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA
VISTA, UCSD LA JOLLA JOHN


SALLY THORNTON, UCSD
MEDICAL CTR


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545


 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


American Sign Language (ASL):
N

D2. Directorio de atención primaria


 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM


INTERNAL MEDICINE

KARCHES, KELLI


Provider ID: 417937
Provider Gender: Female
License Number: A80931
NPI: 1891997631
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 *Phone: (619) 515-2545*
 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None


American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM


INTERNAL MEDICINE

KHANNA, POORNIMA

Provider ID: 185268
Provider Gender: Female
License Number: A70714
NPI: 1598862583

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 *Phone: (619) 280-4213*
 *After Hours Phone: (619) 280-4213*

 *Website: www.lamaestra.org*
Email:


aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

KHANNA, POORNIMA

Provider ID: 185268
Provider Gender: Female
License Number: A70714
NPI: 1598862583

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 *Phone: (619) 280-4213*
 *After Hours Phone: (619) 280-4213*
 *Website: www.lamaestra.org*


Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N




 *Accessibility: CONTACT PROVIDER*


INTERNAL MEDICINE

KRIJGER, LISA

Provider ID: 403583
Provider Gender: Female
License Number: A67762
NPI: 1932278710

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 *Phone: (619) 233-8500*
 *After Hours Phone: (619) 233-8500*

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

D2. Directorio de atención primaria

Hours: M-F 8:00AM-5:30PM

INTERNAL MEDICINE

KRIJGER, LISA

Provider ID: 403583

Provider Gender: Female

License Number: A67762


NPI: 1932278710


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500


 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

INTERNAL MEDICINE

LALITHAKUMARI, ARYA

Provider ID: 206362

Provider Gender: Female

License Number: A140646

NPI: 1265874010

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Hemet


Global Medical Center, Menifee
Global Medical Center


Board Certified Specialty: No


Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LALITHAKUMARI, ARYA

Provider ID: 206362

Provider Gender: Female

License Number: A140646

NPI: 1265874010

Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Hemet


Global Medical Center, Menifee
Global Medical Center


Board Certified Specialty: No
Family Health Centers of San

Diego
NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LALITHAKUMARI, ARYA

Provider ID: 206362

Provider Gender: Female

License Number: A140646

NPI: 1265874010

Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Hemet


Global Medical Center, Menifee
Global Medical Center


Board Certified Specialty: No
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Diego
NORTH PARK FAMILY HEALTH
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 3544 30TH ST
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 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LALITHAKUMARI, ARYA

Provider ID: 206362

Provider Gender: Female

License Number: A140646

NPI: 1265874010

Provider English Spoken: Y

D2. Directorio de atención primaria

Cultural Competency: N
Hospital Affiliation: Hemet
Global Medical Center, Menifee
Global Medical Center
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619)
515-2424

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE **LAMANTIA, MICHELE**

Provider ID: 451167
Provider Gender: Female
License Number: G71855
NPI: 1124176102

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH
CENTER

950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE **LAMANTIA, MICHELE**

Provider ID: 451167
Provider Gender: Female
License Number: G71855
NPI: 1124176102

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH
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950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE **LEE, MICHAEL**

Provider ID: 206360

Provider Gender: Male
License Number: A71671
NPI: 1760406649
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS GREEN HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE **LEE, MICHAEL**




Provider ID: 206360
Provider Gender: Male
License Number: A71671
NPI: 1760406649


Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS GREEN HOSPITAL
Board Certified Specialty: No
Family Health Centers of San

D2. Directorio de atención primaria

Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER


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SAN DIEGO, CA 92113
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 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

MARCINIAK, ROMAN

Provider ID: 206360

Provider Gender: Male




License Number: 20A17072


NPI: 1326579210

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER


 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
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515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

MARCINIAK, ROMAN

Provider ID: 206360

Provider Gender: Male




License Number: 20A17072


NPI: 1326579210

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

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 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE



NARANJO, RODRIGO

Provider ID: 482070

Provider Gender: Male

License Number: A119010

NPI: 1609095264

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE



NARANJO, RODRIGO

Provider ID: 482070

Provider Gender: Male

License Number: A119010

NPI: 1609095264

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D2. Directorio de atención primaria

INTERNAL MEDICINE

NARANJO, RODRIGO

Provider ID: 206046

Provider Gender: Male

License Number: A119010

NPI: 1609095264

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

NARANJO, RODRIGO

Provider ID: 206046

Provider Gender: Male

License Number: A119010

NPI: 1609095264

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

NARANJO, RODRIGO

Provider ID: 206046

Provider Gender: Male

License Number: A119010

NPI: 1609095264

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

INTERNAL MEDICINE

NARANJO, RODRIGO

Provider ID: 206046

Provider Gender: Male

License Number: A119010

NPI: 1609095264

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

NARAYANAN, MEENA

Provider ID: 206363

Provider Gender: Female

License Number: A113448

NPI: 1508170697

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

D2. Directorio de atención primaria

MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,
Adventist Health and Rideout
Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

NARAYANAN, MEENA

Provider ID: 206363

Provider Gender: Female

License Number: A113448

NPI: 1508170697

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,
Adventist Health and Rideout
Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619)
515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

PARIKH, MILIND

Provider ID: 206363

Provider Gender: Male

License Number: 20A13745

NPI: 1194161406

Provider English Spoken: Y

Provider Language(s)
Spoken: Gujarati, Hindi,
Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp
Grossmont Hospital, Adventist
Health and Rideout

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

PARIKH, MILIND

Provider ID: 206363

Provider Gender: Male

License Number: 20A13745

NPI: 1194161406

Provider English Spoken: Y

Provider Language(s)
Spoken: Gujarati, Hindi,
Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp
Grossmont Hospital, Adventist
Health and Rideout

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

D2. Directorio de atención primaria

PREVALLET, ALEXANDER

Provider ID: 417937

Provider Gender: Male

License Number: 20A19716

NPI: 1659833556



 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

PREVALLET, ALEXANDER

Provider ID: 417937

Provider Gender: Male

License Number: 20A19716

NPI: 1659833556



 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE



RAMERS, CHRISTIAN

Provider ID: 417937

Provider Gender: Male


License Number: A119631

NPI: 1730381385



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE

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515-2545

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Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE



RAMERS, CHRISTIAN

Provider ID: 417937

Provider Gender: Male

License Number: A119631



NPI: 1730381385


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
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Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D2. Directorio de atención primaria

INTERNAL MEDICINE

RESNIKOFF, PAMELA

Provider ID: 417937

Provider Gender: Female

License Number: G80358

NPI: 1841252533



 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

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 Phone: (619) 515-2545
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Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

RESNIKOFF, PAMELA

Provider ID: 417937

Provider Gender: Female

License Number: G80358

NPI: 1841252533

 Provider English Spoken: Y
Cultural Competency: N



Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

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 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE



RIVERA, TANIA

Provider ID: 206363

Provider Gender: Female

License Number: A126958

NPI: 1336346972

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish



Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER, SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE



RIVERA, TANIA

Provider ID: 206363

Provider Gender: Female

License Number: A126958

NPI: 1336346972



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER, SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE


ROUEL, WADI


Provider ID: 185268

Provider Gender: Male

License Number: C55979

NPI: 1740254713

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac*

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, GROSSMONT


HOSPITAL


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC INC

 *4060 FAIRMOUNT AVE SAN DIEGO, CA 92105*

 *Phone: (619) 255-9155*

 *After Hours Phone: (619) 255-9155*

 *Website: www.lamaestra.org*

g


Email: aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

INTERNAL MEDICINE


ROUEL, WADI


Provider ID: 185268

Provider Gender: Male

License Number: C55979

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 *Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac*

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, GROSSMONT


HOSPITAL


Board Certified Specialty: No


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 *Website: www.lamaestra.org*

g

Email: aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

INTERNAL MEDICINE


SASSIC, JESSICA

Provider ID: 417937

Provider Gender: Female

License Number: A185024

NPI: 1598342529

 *Provider English Spoken: Y*

Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San


Diego


FAMILY HLTH CTR SD

HILLCREST

 *4094 4TH AVE*

SAN DIEGO, CA 92103

 *Phone: (619) 515-2545*

 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

SASSIC, JESSICA

Provider ID: 417937

Provider Gender: Female

License Number: A185024

NPI: 1598342529

 *Provider English Spoken: Y*

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San


Diego

FAMILY HLTH CTR SD

HILLCREST


D2. Directorio de atención primaria

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE


SHAMSINEJAD BABAKI, ARASH

Provider ID: 631494

Provider Gender: Male

License Number: A81206

NPI: 1750498119

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: ST MARYS

MEDICAL CENTER SAN

FRANCISCO


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PRECISION PARK

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1710446539

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE


SHAMSINEJAD BABAKI, ARASH

Provider ID: 631494

Provider Gender: Male

License Number: A81206

NPI: 1750498119

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: ST MARYS

MEDICAL CENTER SAN


FRANCISCO


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PRECISION PARK

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

SHI, RUJING

Provider ID: 417937

Provider Gender: Female

License Number: 20A19399

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545


 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

SHI, RUJING

Provider ID: 417937

Provider Gender: Female

License Number: 20A19399

NPI: 1710446539

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL






Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SD


D2. Directorio de atención primaria






HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE



SLAYDEN, TANNER






Provider ID: 675582
Provider Gender: Male
NPI: 1154779205
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
UCSD Medical Group
TANNER A SLAYDEN

 330 LEWIS ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE


SMILDE, RENEE

Provider ID: 417937
Provider Gender: Female
License Number: A70175
NPI: 1427010594
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Dutch
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE



SMILDE, RENEE

Provider ID: 417937
Provider Gender: Female
License Number: A70175
NPI: 1427010594
 Provider English Spoken: Y

 Provider Language(s)
Spoken: Dutch
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SD
HILLCREST
 4094 4TH AVE
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515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

URIBE-BRUCE, LILIANA

Provider ID: 206360
Provider Gender: Female
License Number: C55724
NPI: 1689010324
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

D2. Directorio de atención primaria

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

URIBE-BRUCE, LILIANA

Provider ID: 206360
Provider Gender: Female
License Number: C55724
NPI: 1689010324
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

VALDEZ, KRYSTAL ANGELI

Provider ID: 417101
Provider Gender: Female
License Number: A156854
NPI: 1629480272
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TWIN CITIES COMMUNITY HOSPITAL, SIERRA VISTA REGIONAL MED CTR, PARADISE VALLEY HOSPITAL
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA MESA

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

INTERNAL MEDICINE

VALDEZ, KRYSTAL ANGELI

Provider ID: 417101

Provider Gender: Female
License Number: A156854
NPI: 1629480272

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TWIN CITIES COMMUNITY HOSPITAL, SIERRA VISTA REGIONAL MED CTR, PARADISE VALLEY HOSPITAL
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA MESA

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Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

INTERNAL MEDICINE

VIDAURRAZAGA, MONICA

Provider ID: 417937
Provider Gender: Female
License Number: A169207
NPI: 1346628310


Provider English Spoken: Y
Provider Language(s) Spoken: Spanish


D2. Directorio de atención primaria

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

*FAMILY HLTH CTR SD
HILLCREST*

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

INTERNAL MEDICINE


VIDAURRAZAGA, MONICA

Provider ID: 417937

Provider Gender: Female

License Number: A169207

NPI: 1346628310

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

*FAMILY HLTH CTR SD
HILLCREST*

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 *Accessibility: CONTACT
PROVIDER*

INTERNAL MEDICINE


WASTILA, LISA


Provider ID: 403583

Provider Gender: Female

License Number: A60801

NPI: 1043375231

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: German*

Cultural Competency: N

*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA*


JOHN SALLY THORNTON


Board Certified Specialty: No


*IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE*

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 *Accessibility: CONTACT
PROVIDER*

INTERNAL MEDICINE

WASTILA, LISA

Provider ID: 403583

Provider Gender: Female

License Number: A60801

NPI: 1043375231

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: German*

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Board Certified Specialty: No


IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 *Accessibility: CONTACT
PROVIDER*

INTERNAL MEDICINE

WATTANAMANO, PORNTHEP


Provider ID: 206046

Provider Gender: Male

License Number: C186338

NPI: 1295738516

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Thai*

Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

*LINDA VISTA HEALTH CARE
CTR*



 6973 LINDA VISTA RD

D2. Directorio de atención primaria

SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE



WATTANAMANO, PORNTHEP

Provider ID: 206046
Provider Gender: Male
License Number: C186338
NPI: 1295738516
 Provider English Spoken: Y
 Provider Language(s) Spoken: Thai
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE



WATTANAMANO, PORNTHEP






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Board Certified Specialty: No
IHP of Southern Cal-PHP
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CTR

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SAN DIEGO, CA 92111
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 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE







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Provider ID: 206046
Provider Gender: Male
License Number: C186338
NPI: 1295738516
 Provider English Spoken: Y
 Provider Language(s) Spoken: Thai
Cultural Competency: N
Board Certified Specialty: No

IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

WATTS, ELI

Provider ID: 451167
Provider Gender: Male
License Number: A79383
NPI: 1649373739
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH CENTER
 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/king-chavez-health-center

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1689636656

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


WATTS, ELI

Provider ID: 451167

Provider Gender: Male

License Number: A79383

NPI: 1649373739

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

YUNG, STEVEN

Provider ID: 417937

Provider Gender: Male

License Number: G80798

NPI: 1689636656

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No


Family Health Centers of San


Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

YUNG, STEVEN

Provider ID: 417937

Provider Gender: Male

License Number: G80798

NPI: 1689636656

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

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Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERVENTIONAL

CARDIOLOGY

SHETABI, KAMBIZ

Provider ID: 206363

Provider Gender: Male

License Number: A126187

NPI: 1972827806

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San

Diego

DIAMOND NEIGHBORHOODS

D2. Directorio de atención primaria

FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERVENTIONAL

CARDIOLOGY

SHETABI, KAMBIZ

Provider ID: 206363

Provider Gender: Male

License Number: A126187

NPI: 1972827806

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp
Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

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Phone: (619) 515-2560
After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

NEUROLOGY

CANTU-REYNA, GUILLERMO

Provider ID: 185268

Provider Gender: Male

License Number: A41375

NPI: 1447389101

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619)
255-9155

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

NEUROLOGY

CANTU-REYNA, GUILLERMO

Provider ID: 185268

Provider Gender: Male

License Number: A41375

NPI: 1447389101

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619)
255-9155

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

NEUROLOGY

GRISOLIA, JAMES

Provider ID: 417937

Provider Gender: Male

License Number: G42884

NPI: 1336102359

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

D2. Directorio de atención primaria

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

NEUROLOGY

GRISOLIA, JAMES

Provider ID: 417937

Provider Gender: Male

License Number: G42884

NPI: 1336102359

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

NEUROLOGY

LUHAR, RIYA

Provider ID: 417937

Provider Gender: Female

License Number: 20A19975

NPI: 1235665662

Provider English Spoken: Y

Provider Language(s)

Spoken: Gujarati, Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER, TRI CITY MEDICAL
CTR, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

NEUROLOGY

LUHAR, RIYA

Provider ID: 417937

Provider Gender: Female

License Number: 20A19975

NPI: 1235665662

Provider English Spoken: Y

Provider Language(s)

Spoken: Gujarati, Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER, TRI CITY MEDICAL
CTR, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

D2. Directorio de atención primaria

 Website: www.fhcsd.org


Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

NEUROLOGY


MARTIN, FREDERIC

Provider ID: 417937

Provider Gender: Male

License Number: G61965

NPI: 1265582605

 Provider English Spoken: Y

 Provider Language(s) Spoken: French

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SELECT

SPECIALTY HOSPITAL SAN

DIEGO, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL


CHULA VISTA

Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SD


HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

NEUROLOGY


MARTIN, FREDERIC

Provider ID: 417937

Provider Gender: Male

License Number: G61965

NPI: 1265582605

 Provider English Spoken: Y

 Provider Language(s) Spoken: French

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, SELECT

SPECIALTY HOSPITAL SAN

DIEGO, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL


CHULA VISTA

Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SD


HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

NEUROLOGY

TAFRESHI, GILDA

Provider ID: 417937

Provider Gender: Female

License Number: A103111

NPI: 1891946950

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS GREEN HOSPITAL,

SCRIPPS MERCY HOSPITAL


CHULA VISTA

Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org


Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

NEUROLOGY

TAFRESHI, GILDA

Provider ID: 417937

D2. Directorio de atención primaria

Provider Gender: Female

License Number: A103111


NPI: 1891946950


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER

Provider ID: 185268

Provider Gender: Female

License Number: A172929

NPI: 1679008569

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N


Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS


MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 280-4213

 After Hours Phone: (619) 280-4213

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


AL-MSHHDANI, AYSER

Provider ID: 185268

Provider Gender: Female

License Number: A172929

NPI: 1679008569

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N


Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA


VISTA, Sharp Grossmont


Hospital, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 280-4213

 After Hours Phone: (619) 280-4213

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206362

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH

D2. Directorio de atención primaria

CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 416831

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N



Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206362

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish



Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206362

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish



Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206362

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

D2. Directorio de atención primaria


Hospital Affiliation:


*GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL*

*Board Certified Specialty: No
Family Health Centers of San
Diego*

*NORTH PARK FAMILY HEALTH
CENTERS*

 3544 30TH ST
SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*

 *After Hours Phone: (619)
515-2424*


 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-TH 8:30AM-5:30PM

F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY


ALIMONOS, LYSISTRATI


Provider ID: 416831

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish


Cultural Competency: N

Hospital Affiliation:


*GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL*


*Board Certified Specialty: No
Family Health Centers of San
Diego*


*NORTH PARK FAMILY HEALTH
CENTERS*

 3514 30TH ST

SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*

 *After Hours Phone: (619)
515-2424*

 *Website: www.fhcsd.org*

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

OBSTETRICS / GYNECOLOGY


ALIMONOS, LYSISTRATI


Provider ID: 402851

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:


*GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL*


*Board Certified Specialty: No
Family Health Centers of San
Diego*

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 *Phone: (619) 515-2444*

 *After Hours Phone: (619)
515-2444*

 *Website: www.fhcsd.org*

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-TH 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI


Provider ID: 402851

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:


*GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL*


*Board Certified Specialty: No
Family Health Centers of San
Diego*

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 *Phone: (619) 515-2444*

 *After Hours Phone: (619)
515-2444*

 *Website: www.fhcsd.org*

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-TH 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206360

D2. Directorio de atención primaria

Provider Gender: Female
License Number: 20A14919
NPI: 1619397031
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY



ALIMONOS, LYSISTRATI




Provider ID: 206360
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


ALIMONOS, LYSISTRATI

Provider ID: 206363
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560


 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206363
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

BLAKE, GARY

Provider ID: 206046

Provider Gender: Male


License Number: G44807


NPI: 1497738439

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 *6973 LINDA VISTA RD*
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*


 *After Hours Phone: (858)*
279-0925

 *Website: www.sdfamilycare*
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

OBSTETRICS / GYNECOLOGY


BLAKE, GARY

Provider ID: 206046

Provider Gender: Male

License Number: G44807

NPI: 1497738439


 *Provider English Spoken: Y*


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 *6973 LINDA VISTA RD*
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*

 *After Hours Phone: (858)*
279-0925

 *Website: www.sdfamilycare*
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

OBSTETRICS / GYNECOLOGY

BLAKE, GARY

Provider ID: 206046

Provider Gender: Male


License Number: G44807


NPI: 1497738439

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 *6973 LINDA VISTA RD*
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*

 *After Hours Phone: (858)*
279-0925

 *Website: www.sdfamilycare*

.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

OBSTETRICS / GYNECOLOGY

BLAKE, GARY

Provider ID: 206046

Provider Gender: Male


License Number: G44807


NPI: 1497738439


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 *6973 LINDA VISTA RD*
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*


 *After Hours Phone: (858)*
279-0925

 *Website: www.sdfamilycare*
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

D2. Directorio de atención primaria

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206362

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP


MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 416831

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP


MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 402851

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP


MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444


 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 402851

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
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Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY


D2. Directorio de atención primaria


BIRCH HOSP FOR WOMEN AND NEWBORNS

*Board Certified Specialty: No
Family Health Centers of San
Diego*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

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Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


BUECHNER, CHARLENE

Provider ID: 206362

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SHARP


MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
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*Board Certified Specialty: No
Family Health Centers of San
Diego*


NORTH PARK FAMILY HEALTH CENTERS

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 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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 Accessibility: CONTACT
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OBSTETRICS / GYNECOLOGY


BUECHNER, CHARLENE

Provider ID: 206362

Provider Gender: Female

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Hospital Affiliation: SHARP


MEMORIAL HOSPITAL,
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SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
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 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 416831

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SHARP


MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS


*Board Certified Specialty: No
Family Health Centers of San
Diego*

NORTH PARK FAMILY HEALTH CENTERS

 3514 30TH ST

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 Phone: (619) 515-2424

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515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

D2. Directorio de atención primaria

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p>	<p>Provider ID: 206360</p> <p>Provider Gender: Female</p> <p>License Number: A68463</p> <p>NPI: 1376663831</p>	<p><input type="checkbox"/> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS</p> <p>Board Certified Specialty: No</p> <p>Family Health Centers of San Diego</p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113</p> <p> Phone: (619) 515-2300</p> <p> After Hours Phone: (619) 515-2300</p> <p> Website: www.fhcsd.org</p> <p>Email: dalvarado@fhcsd.org</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p>
<p><u>OBSTETRICS / GYNECOLOGY</u></p> <p>BUECHNER, CHARLENE</p> <p>Provider ID: 206362</p> <p>Provider Gender: Female</p> <p>License Number: A68463</p> <p>NPI: 1376663831</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p><input type="checkbox"/> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS</p> <p>Board Certified Specialty: No</p> <p>Family Health Centers of San Diego</p> <p>NORTH PARK FAMILY HEALTH CENTERS</p> <p> 3544 30TH ST SAN DIEGO, CA 92104</p> <p> Phone: (619) 515-2424</p> <p> After Hours Phone: (619) 515-2424</p> <p> Website: www.fhcsd.org</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p>	<p><input type="checkbox"/> Provider English Spoken: Y</p> <p><input type="checkbox"/> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS</p> <p>Board Certified Specialty: No</p> <p>Family Health Centers of San Diego</p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113</p> <p> Phone: (619) 515-2300</p> <p> After Hours Phone: (619) 515-2300</p> <p> Website: www.fhcsd.org</p> <p>Email: dalvarado@fhcsd.org</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p>	<p><input type="checkbox"/> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS</p> <p>Board Certified Specialty: No</p> <p>Family Health Centers of San Diego</p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113</p> <p> Phone: (619) 515-2300</p> <p> After Hours Phone: (619) 515-2300</p> <p> Website: www.fhcsd.org</p> <p>Email: dalvarado@fhcsd.org</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p>
<p>N</p> <p> Accessibility: CONTACT PROVIDER</p>	<p><u>OBSTETRICS / GYNECOLOGY</u></p> <p>BUECHNER, CHARLENE</p> <p>Provider ID: 206360</p> <p>Provider Gender: Female</p> <p>License Number: A68463</p> <p>NPI: 1376663831</p> <p><input type="checkbox"/> Provider English Spoken: Y</p>	<p><u>OBSTETRICS / GYNECOLOGY</u></p> <p>BUECHNER, CHARLENE</p> <p>Provider ID: 206363</p> <p>Provider Gender: Female</p> <p>License Number: A68463</p> <p>NPI: 1376663831</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p><input type="checkbox"/> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SHARP MEMORIAL HOSPITAL,</p>

D2. Directorio de atención primaria

SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2420

After Hours Phone: (619)
515-2420

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206363

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

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After Hours Phone: (619)
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Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206363

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

Family Health Centers of San

Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2420

After Hours Phone: (619)
515-2420

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206363

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

Family Health Centers of San

Diego

DIAMOND NEIGHBORHOODS

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Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


CARTER, KHALIL

Provider ID: 206360

Provider Gender: Male

License Number: A113001

NPI: 1225231582

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI


CITY MEDICAL CTR


Board Certified Specialty: No Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

 *1809 NATIONAL AVE
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*


 *Website: www.fhcsd.org
Email: dalvarado@fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


CARTER, KHALIL

Provider ID: 206360

Provider Gender: Male

License Number: A113001

NPI: 1225231582

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,


GROSSMONT HOSPITAL, TRI


CITY MEDICAL CTR


Board Certified Specialty: No Family Health Centers of San Diego

*LOGAN HEIGHTS FAMILY
HEALTH CENTER*

 *1809 NATIONAL AVE
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*


 *Website: www.fhcsd.org
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 416831

Provider Gender: Male

License Number: A113001

NPI: 1225231582

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,


GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR


Board Certified Specialty: No


Family Health Centers of San Diego

*NORTH PARK FAMILY HEALTH
CENTERS*

 *3514 30TH ST*

SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL


Provider ID: 206362

Provider Gender: Male

License Number: A113001

NPI: 1225231582

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS


D2. Directorio de atención primaria

MERCY HOSPITAL,
GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR
Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206362
Provider Gender: Male
License Number: A113001
NPI: 1225231582

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR
Board Certified Specialty: No
Family Health Centers of San
Diego


NORTH PARK FAMILY HEALTH

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Medi-Cal Open Panel: Yes
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OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206362
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Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 402851
Provider Gender: Male
License Number: A113001
NPI: 1225231582




 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
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 Phone: (619) 515-2444
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 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:00PM

D2. Directorio de atención primaria

TH 9:30AM-6:00PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 402851

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
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Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

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Min/Max Age: 0\None

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Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:00PM

TH 9:30AM-6:00PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 416831

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

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OBSTETRICS / GYNECOLOGY

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Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:30PM

F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 416831

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

3514 30TH ST

D2. Directorio de atención primaria

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 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA

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Provider Gender: Female

License Number: A163464

NPI: 1326531401

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
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 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): F 8:30AM-5:30PM

N

 Accessibility: CONTACT PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA

Provider ID: 402851

Provider Gender: Female

License Number: A163464

NPI: 1326531401

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SAN

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA

Provider ID: 416831

Provider Gender: Female

License Number: A163464

NPI: 1326531401

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424


 Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA



Provider ID: 206360

Provider Gender: Female




License Number: A163464


NPI: 1326531401

D2. Directorio de atención primaria

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None



American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA




Provider ID: 206360
Provider Gender: Female
License Number: A163464
NPI: 1326531401


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San

Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
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 *Phone: (619) 515-2300*
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 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None



American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA


Provider ID: 206363
Provider Gender: Female
License Number: A163464
NPI: 1326531401

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102
 *Phone: (619) 515-2560*
 *After Hours Phone: (619) 515-2560*

 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org



Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA


Provider ID: 206363
Provider Gender: Female
License Number: A163464
NPI: 1326531401

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102
 *Phone: (619) 515-2560*
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 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

D2. Directorio de atención primaria

Provider ID: 206363
Provider Gender: Male
License Number: A108228
NPI: 1629277322
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

📍 4725 MARKET ST
SAN DIEGO, CA 92102
☎ Phone: (619) 515-2560
🕒 After Hours Phone: (619) 515-2560
🌐 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY **DE MIK, TRAVIS**

Provider ID: 206363
Provider Gender: Male
License Number: A108228
NPI: 1629277322
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

📍 4725 MARKET ST
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🌐 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY **DE MIK, TRAVIS**

Provider ID: 206360
Provider Gender: Male
License Number: A108228
NPI: 1629277322
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER

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SAN DIEGO, CA 92113
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🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY **DE MIK, TRAVIS**

Provider ID: 206360

Provider Gender: Male
License Number: A108228
NPI: 1629277322
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Cultural Competency: N
Board Certified Specialty: No
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LOGAN HEIGHTS FAMILY
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY **DE MIK, TRAVIS**

Provider ID: 416831
Provider Gender: Male
License Number: A108228
NPI: 1629277322
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH
CENTERS


📍 3514 30TH ST
SAN DIEGO, CA 92104
☎ Phone: (619) 515-2424
🕒 After Hours Phone: (619)

D2. Directorio de atención primaria

515-2424
 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS


Provider ID: 402851
Provider Gender: Male
License Number: A108228
NPI: 1629277322
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS


Provider ID: 416831
Provider Gender: Male




License Number: A108228
NPI: 1629277322
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS



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OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS



Provider ID: 402851
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Family Health Centers of San Diego
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 416831
Provider Gender: Female
License Number: A178499
NPI: 1033613732
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS

 3514 30TH ST
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Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 402851

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
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Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 402851

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

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Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 416831

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST

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 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 206360

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

D2. Directorio de atención primaria

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


DORUELO, ASHLEY

Provider ID: 206360

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300


 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


DORUELO, ASHLEY

Provider ID: 206363

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


DORUELO, ASHLEY


Provider ID: 206363

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

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 Phone: (619) 515-2560

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 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

FOLCH TORRES-AGUIAR, BEATRIZ


Provider ID: 206360

Provider Gender: Female

License Number: A148014

NPI: 1457794752

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish, Yue Chinese

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,

Sharp Grossmont Hospital,

SCRIPPS MERCY HOSPITAL






CHULA VISTA

Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER




D2. Directorio de atención primaria

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

FOLCH TORRES-AGUIAR, BEATRIZ






Provider ID: 206360
Provider Gender: Female
License Number: A148014
NPI: 1457794752
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Yue
Chinese
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
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SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

FOLCH TORRES-AGUIAR, BEATRIZ

Provider ID: 402851
Provider Gender: Female
License Number: A148014
NPI: 1457794752
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Yue
Chinese
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM


OBSTETRICS / GYNECOLOGY

FOLCH TORRES-AGUIAR, BEATRIZ

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Provider Gender: Female
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 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Yue
Chinese
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
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 Phone: (619) 515-2444

D2. Directorio de atención primaria

 After Hours Phone: (619) 515-2444


 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

GRANT, REBEKAH

Provider ID: 206360

Provider Gender: Female

License Number: C159737

NPI: 1326243833

Provider English Spoken: Y

Provider Language(s) Spoken: French, Portuguese, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, Sharp

Grossmont Hospital, SCRIPPS

MERCY HOSPITAL, RIVERSIDE

COMMUNITY HOSP, HOAG


HOSPITAL IRVINE


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

GRANT, REBEKAH

Provider ID: 206360

Provider Gender: Female

License Number: C159737

NPI: 1326243833

Provider English Spoken: Y

Provider Language(s) Spoken: French, Portuguese, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, Sharp

Grossmont Hospital, SCRIPPS

MERCY HOSPITAL, RIVERSIDE

COMMUNITY HOSP, HOAG


HOSPITAL IRVINE


Board Certified Specialty: No


Family Health Centers of San Diego

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TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206360

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

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Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206360

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
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Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 402851

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SAN
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Accessibility: CONTACT
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Hours: M-W 8:30AM-5:30PM

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F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 402851

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 416831

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital



Board Certified Specialty: No


Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH
CENTERS

3514 30TH ST
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D2. Directorio de atención primaria

 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


HANLEY, LAUREN

Provider ID: 416831

Provider Gender: Female

License Number: C174771

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Cultural Competency: N

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MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No


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NORTH PARK FAMILY HEALTH CENTERS

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Min/Max Age: 0\18

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Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206363

Provider Gender: Female

License Number: C174771

NPI: 1053392035

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

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Provider ID: 206363

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Family Health Centers of San Diego

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

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OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA


Provider ID: 206363

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND


HEALTHCARE CTR, SCRIPPS

D2. Directorio de atención primaria


MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

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OBSTETRICS / GYNECOLOGY **LIPSCHITZ, LISA**

Provider ID: 206363
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CORONADO HOSP AND
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Board Certified Specialty: No
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CORONADO HOSP AND
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MERCY HOSPITAL,
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Board Certified Specialty: No
Family Health Centers of San
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NORTH PARK FAMILY HEALTH
CENTERS



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OBSTETRICS / GYNECOLOGY **LIPSCHITZ, LISA**

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Provider Gender: Female
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NPI: 1649208711

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 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SHARP
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D2. Directorio de atención primaria

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OBSTETRICS / GYNECOLOGY


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CORONADO HOSP AND

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MERCY HOSPITAL,


GROSSMONT HOSPITAL


Board Certified Specialty: No

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NORTH PARK FAMILY HEALTH CENTERS

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OBSTETRICS / GYNECOLOGY


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GROSSMONT HOSPITAL


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Hours: M-TH 8:30AM-5:30PM

F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY


LIPSCHITZ, LISA


Provider ID: 402851

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

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 *Website: www.fhcsd.org*

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-W 8:30AM-5:00PM

TH 9:30AM-6:00PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA


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Provider Gender: Female

License Number: A72005

NPI: 1649208711

 *Provider English Spoken: Y*

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Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,

D2. Directorio de atención primaria

GROSSMONT HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

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Accessibility: CONTACT PROVIDER

Hours: M-W 8:30AM-5:00PM

TH 9:30AM-6:00PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 416831

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

Family Health Centers of San

Diego

NORTH PARK FAMILY HEALTH

CENTERS

3514 30TH ST

SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206362

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

Family Health Centers of San

Diego

NORTH PARK FAMILY HEALTH

CENTERS

3544 30TH ST

SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:30PM

F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206360

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

Family Health Centers of San

Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206360

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
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Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206360

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206360

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
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Diego

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Min/Max Age: 0\None

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Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 416831

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

D2. Directorio de atención primaria


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*

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 *Website: www.fhcsd.org*

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY


LOEFFLER, ALLISON

Provider ID: 206362

Provider Gender: Female

License Number: A116680

NPI: 1700073962

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San

Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY


LOEFFLER, ALLISON

Provider ID: 402851

Provider Gender: Female

License Number: A116680

NPI: 1700073962

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

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Medi-Cal Open Panel: Yes

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OBSTETRICS / GYNECOLOGY

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D2. Directorio de atención primaria

OBSTETRICS / GYNECOLOGY


LOEFFLER, ALLISON

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SCRIPPS MERCY HOSPITAL
CHULA VISTA

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Family Health Centers of San
Diego


DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
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 Phone: (619) 515-2560
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 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
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 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

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 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 402851
Provider Gender: Female
License Number: A116680
NPI: 1700073962



Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444

 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY



PHAN, TIFFANI


Provider ID: 417101
Provider Gender: Female
License Number: A161105
NPI: 1134515695

Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126

 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N



 Accessibility: CONTACT PROVIDER



OBSTETRICS / GYNECOLOGY

PHAN, TIFFANI



Provider ID: 417101
Provider Gender: Female
License Number: A161105
NPI: 1134515695

D2. Directorio de atención primaria


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426
 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY **RODRIGUEZ JEREZ, ROBERTO**



Provider ID: 402851
Provider Gender: Male
License Number: A154298
NPI: 1710316450
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP





CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-BEACH AREA
 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (616) 515-2444
 After Hours Phone: (616)
515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:30AM-5:00PM






OBSTETRICS / GYNECOLOGY **RODRIGUEZ JEREZ, ROBERTO**

Provider ID: 206363
Provider Gender: Male
License Number: A154298
NPI: 1710316450


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2420
 After Hours Phone: (619)
515-2420
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM


OBSTETRICS / GYNECOLOGY **RODRIGUEZ JEREZ, ROBERTO**

Provider ID: 206363
Provider Gender: Male
License Number: A154298
NPI: 1710316450
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2420
 After Hours Phone: (619)

D2. Directorio de atención primaria

515-2420
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY **RODRIGUEZ JEREZ, ROBERTO**

Provider ID: 402851
Provider Gender: Male
License Number: A154298
NPI: 1710316450

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (616) 515-2444
 After Hours Phone: (616)
515-2444

 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):




N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:30AM-5:00PM


OBSTETRICS / GYNECOLOGY **RODRIGUEZ JEREZ, ROBERTO**

Provider ID: 206360
Provider Gender: Male
License Number: A154298
NPI: 1710316450


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM




OBSTETRICS / GYNECOLOGY **RODRIGUEZ JEREZ, ROBERTO**


Provider ID: 206360
Provider Gender: Male
License Number: A154298
NPI: 1710316450


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
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515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

D2. Directorio de atención primaria

SAPRA, SONIA

Provider ID: 206360

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 206360

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 402851

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619) 515-2444

515-2444

Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 402851

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619) 515-2444

Website: www.fhcsd.org

Email: sabay@fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*
Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


SAPRA, SONIA


Provider ID: 416831

Provider Gender: Female

License Number: A164859

NPI: 1952751711

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Hindi*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 *3514 30TH ST
SAN DIEGO, CA 92104*

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


SAPRA, SONIA


Provider ID: 416831

Provider Gender: Female

License Number: A164859

NPI: 1952751711

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Hindi*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 *3514 30TH ST
SAN DIEGO, CA 92104*

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA


Provider ID: 206363

Provider Gender: Female

License Number: A164859

NPI: 1952751711

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Hindi*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 *4725 MARKET ST
SAN DIEGO, CA 92102*

 *Phone: (619) 515-2560*

 *After Hours Phone: (619) 515-2560*

 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA


Provider ID: 206363

Provider Gender: Female

License Number: A164859

NPI: 1952751711

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Hindi*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No Family Health Centers of San Diego


DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 *4725 MARKET ST
SAN DIEGO, CA 92102*

 *Phone: (619) 515-2560*

 *After Hours Phone: (619) 515-2560*

D2. Directorio de atención primaria

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None


American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY



SHUCKETT, ARIEL

Provider ID: 206046
Provider Gender: Female
License Number: A144372
NPI: 1245590124

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SHUCKETT, ARIEL

Provider ID: 206046

Provider Gender: Female

License Number: A144372



NPI: 1245590124

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SHUCKETT, ARIEL

Provider ID: 206046

Provider Gender: Female

License Number: A144372

NPI: 1245590124

 Provider English Spoken: Y
Cultural Competency: N



Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS


Board Certified Specialty: No

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SHUCKETT, ARIEL

Provider ID: 206046

Provider Gender: Female

License Number: A144372



NPI: 1245590124

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR


 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

D2. Directorio de atención primaria

American Sign Language (ASL):  Provider English Spoken: Y
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 416831

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Sharp


Grossmont Hospital

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 402851

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp


Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 402851

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp


Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
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515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 416831

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Sharp


Grossmont Hospital

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206360

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Sharp
Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206360

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Sharp
Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206363

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Sharp
Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560


 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206363

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Sharp
Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560


 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D2. Directorio de atención primaria

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER

Provider ID: 451167

Provider Gender: Female

License Number: 20A8204

NPI: 1053407593

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER

Provider ID: 451167

Provider Gender: Female

License Number: 20A8204

NPI: 1053407593

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 206360

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 206360

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER



D2. Directorio de atención primaria

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 402851
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-BEACH AREA
 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444


 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER



Provider ID: 402851
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-BEACH AREA
 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):




N



 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 402851
Provider Gender: Male
License Number: G78814
NPI: 1699790634
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

D2. Directorio de atención primaria

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 402851

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 416831

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206362

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 416831

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP

D2. Directorio de atención primaria

AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY **ZIEG, ALAN**

Provider ID: 206362
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San

Diego
NORTH PARK FAMILY HEALTH
CENTERS
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY **ZIEG, ALAN**

Provider ID: 206362
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424

After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY **ZIEG, ALAN**

Provider ID: 206362
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

D2. Directorio de atención primaria

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


ZIEG, ALAN

Provider ID: 206360

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


ZIEG, ALAN

Provider ID: 206360

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206363

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN


Provider ID: 206363

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish



Cultural Competency: N

D2. Directorio de atención primaria

Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY



NAJAFI, DAVID

Provider ID: 206360
Provider Gender: Male
License Number: A68124
NPI: 1396715991
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Farsi, Persian,
Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,

SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TU 8:30AM-6:00PM
TH 8:30AM-6:00PM
F 8:30AM-5:00PM
SA 8:30AM-5:00PM

OPHTHALMOLOGY




NAJAFI, DAVID

Provider ID: 206360
Provider Gender: Male
License Number: A68124
NPI: 1396715991
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Farsi, Persian,
Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MEMORIAL

HOSPITAL, SHARP MEMORIAL
HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TU 8:30AM-6:00PM
TH 8:30AM-6:00PM
F 8:30AM-5:00PM
SA 8:30AM-5:00PM

OPHTHALMOLOGY

SHAW, BLAKE

Provider ID: 206363
Provider Gender: Male
License Number: G61394
NPI: 1649206541
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC
 4725 MARKET ST

D2. Directorio de atención primaria

SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

SHAW, BLAKE

Provider ID: 206360
Provider Gender: Male
License Number: G61394
NPI: 1649206541
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-7:30PM

TU-F 8:30AM-5:30PM

OPHTHALMOLOGY

SHAW, BLAKE

Provider ID: 206363
Provider Gender: Male
License Number: G61394
NPI: 1649206541
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

SHAW, BLAKE

Provider ID: 206360
Provider Gender: Male
License Number: G61394
NPI: 1649206541
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER



1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-7:30PM
TU-F 8:30AM-5:30PM

OPHTHALMOLOGY

ZABLIT, KARIM



Provider ID: 403583
Provider Gender: Male
License Number: A42127
NPI: 1083700538
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619)





D2. Directorio de atención primaria

233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-4:45PM

OPHTHALMOLOGY



ZABLIT, KARIM

Provider ID: 403583
Provider Gender: Male
License Number: A42127
NPI: 1083700538
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-4:45PM

OTOLARYNGOLOGY

CRAWFORD, KAYVA



Provider ID: 206360
Provider Gender: Female
License Number: A165819
NPI: 1396241824
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OTOLARYNGOLOGY

CRAWFORD, KAYVA

Provider ID: 206360
Provider Gender: Female
License Number: A165819
NPI: 1396241824
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

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Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OTOLARYNGOLOGY

DAVIS, MORGAN

Provider ID: 206360
Provider Gender: Female
License Number: A181809
NPI: 1891359154
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

OTOLARYNGOLOGY


DAVIS, MORGAN

Provider ID: 206360

Provider Gender: Female

License Number: A181809

NPI: 1891359154

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 *1809 NATIONAL AVE
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*


 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OTOLARYNGOLOGY

YOUSEF, ANDREW

Provider ID: 206360

Provider Gender: Male

License Number: A186426

NPI: 1275152662

 *Provider English Spoken: Y*


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 *1809 NATIONAL AVE
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OTOLARYNGOLOGY


YOUSEF, ANDREW

Provider ID: 206360

Provider Gender: Male

License Number: A186426

NPI: 1275152662

 *Provider English Spoken: Y*


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 *1809 NATIONAL AVE
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

ABELL, GEOFFREY

Provider ID: 27341

Provider Gender: Male

NPI: 1245256130

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND


NEWBORNS, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No


Rady Childrens Health Network

GEOFFREY A ABELL

 *292 EUCLID AVE STE 220
SAN DIEGO, CA 92114*

 *Phone: (619) 262-8624*

Fax: (619) 262-6639

 *After Hours Phone: (619) 262-8624*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ABRAMSON, RACHEL

Provider ID: 185268

D2. Directorio de atención primaria

Provider Gender: Female

License Number: A104918

NPI: 1588707178

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS GREEN

HOSPITAL, SHARP CHULA
VISTA MED CTR

Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 280-4213

After Hours Phone: (619)
280-4213

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PEDIATRICS

ABRAMSON, RACHEL

Provider ID: 185268

Provider Gender: Female

License Number: A104918

NPI: 1588707178

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS GREEN

HOSPITAL, SHARP CHULA
VISTA MED CTR

Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 280-4213

After Hours Phone: (619)
280-4213

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PEDIATRICS

ADJAN, ROULA

Provider ID: 185268

Provider Gender: Female

License Number: A81682

NPI: 1992847263

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, French,
Spanish

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

Fax: (619) 749-5480

After Hours Phone: (619)
255-9155

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

ADJAN, ROULA

Provider ID: 185268

Provider Gender: Female

License Number: A81682

NPI: 1992847263

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, French,
Spanish

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC


4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

Fax: (619) 749-5480

After Hours Phone: (619)
255-9155

D2. Directorio de atención primaria

 Website: www.lamaestra.org Hours: M-F 8:00AM-5:00PM


g
Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


PEDIATRICS

ADLOUNI, LOUBABA

Provider ID: 230441

Provider Gender: Female

NPI: 1669443685

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR HEALTH,
PALOMAR MEDICAL CENTER


Board Certified Specialty: No

Rady Childrens Health Network

LOUBABA A ADLOUNI

 16918 DOVE CANYON RD
STE 200

SAN DIEGO, CA 92127

 Phone: (858) 924-1960

Fax: (858) 924-1964


 After Hours Phone: (858)
924-1960

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


ALBINO, NICHOLAS

Provider ID: 416831

Provider Gender: Male

License Number: A179851

NPI: 1740843499

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM

PEDIATRICS

ALBINO, NICHOLAS

Provider ID: 416831

Provider Gender: Male

License Number: A179851

NPI: 1740843499

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424


 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM

PEDIATRICS

ANDREE, GREGOR


Provider ID: 233532

Provider Gender: Male

License Number: A72833

NPI: 1467436063

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE

D2. Directorio de atención primaria

150
SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 After Hours Phone: (619)
280-2058
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

ANDREE, GREGOR

Provider ID: 482070
Provider Gender: Male
License Number: A72833
NPI: 1467436063
 Provider English Spoken: Y
 Provider Language(s)
Spoken: German, Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PEDIATRICS


ANDREE, GREGOR

Provider ID: 482070
Provider Gender: Male
License Number: A72833
NPI: 1467436063
 Provider English Spoken: Y
 Provider Language(s)
Spoken: German, Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PEDIATRICS



ANDREE, GREGOR

Provider ID: 233532
Provider Gender: Male
License Number: A72833
NPI: 1467436063
 Provider English Spoken: Y

 Provider Language(s)
Spoken: German, Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 After Hours Phone: (619)
280-2058
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

ARCHAMBAULT, CHRISTIAN

Provider ID: 5589
Provider Gender: Male
NPI: 1992776918
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL, PALOMAR HEALTH,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, CHILDRENS
HOSPITAL OF ORANGE
COUNTY, PARADISE VALLEY
HOSPITAL, PARADISE VALLEY

D2. Directorio de atención primaria

HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network

CHRISTIAN F ARCHAMBAULT

16918 DOVE CANYON RD
STE 200

SAN DIEGO, CA 92127

Phone: (858) 924-1960

Fax: (858) 924-1964

After Hours Phone: (858)
924-1960

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

AWDYKOVYCH, MARTA

Provider ID: 206360

Provider Gender: Female

License Number: A44027

NPI: 1447265137

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, French,
Spanish, Ukrainian

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

AWDYKOVYCH, MARTA

Provider ID: 206360

Provider Gender: Female

License Number: A44027

NPI: 1447265137

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, French,
Spanish, Ukrainian

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

PEDIATRICS

AYSON, NICOLE

Provider ID: 417429

Provider Gender: Female

License Number: A128091

NPI: 1013278704

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619)
515-2525

Website: www.fhcsd.org
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

AYSON, NICOLE

Provider ID: 417429

Provider Gender: Female

License Number: A128091

NPI: 1013278704

Provider English Spoken: Y
Cultural Competency: N


D2. Directorio de atención primaria


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2 SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619) 515-2525

 Website: www.fhcsd.org


Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

AZIMI, AYSUN

Provider ID: 317194

Provider Gender: Female

NPI: 1710246160

 *Provider English Spoken: Y Cultural Competency: N*

Hospital Affiliation: PARADISE VALLEY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP MARY BIRCH

HOSP FOR WOMEN AND

NEWBORNS, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SHARP CHULA VISTA

MED CTR, COMMUNITY

REGIONAL MEDICAL

CENTER-FRESNO, CLOVIS

COMMUNITY HOSPITAL,

CLOVIS COMMUNITY

HOSPITAL


Board Certified Specialty: No

Rady Childrens Health Network

AYSUN AZIMI

 292 EUCLID AVE STE 220

SAN DIEGO, CA 92114

 Phone: (619) 262-8624

Fax: (619) 262-6639

 After Hours Phone: (619)

262-8624

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

BONSU, BEMA

Provider ID: 227409

Provider Gender: Male

License Number: C55180

NPI: 1932106986

 *Provider English Spoken: Y Cultural Competency: N*

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHC -

OCEAN VIEW

 3177 OCEAN VIEW BLVD

SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

BONSU, BEMA

Provider ID: 227409

Provider Gender: Male

License Number: C55180

NPI: 1932106986

 *Provider English Spoken: Y Cultural Competency: N*

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHC -


OCEAN VIEW

 3177 OCEAN VIEW BLVD

SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: <https://www.syhealth.org/locations>


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

CABARLO, JEHRIB

Provider ID: 206360

Provider Gender: Male

License Number: 20A8516

NPI: 1770661340

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish, Tagalog*

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO


Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 *1809 NATIONAL AVE
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS


CABARLO, JEHRIB


Provider ID: 206360

Provider Gender: Male

License Number: 20A8516

NPI: 1770661340

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish, Tagalog*

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 *1809 NATIONAL AVE
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


PEDIATRICS

CARSON, STEPHEN

Provider ID: 6735

Provider Gender: Male

NPI: 1780719872

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: French*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP MEMORIAL

HOSPITAL, SCRIPPS MERCY


HOSPITAL, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: Yes
Rady Childrens Health Network
STEPHEN H CARSON

 *550 WASHINGTON ST STE
300*

SAN DIEGO, CA 92103

 *Phone: (619) 297-5437*

Fax: (619) 297-4567


 *After Hours Phone: (619) 297-5437*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-8:30PM

F 8:00AM-5:00PM

SA 8:00AM-2:00PM

PEDIATRICS

CASTELNOVI, CLAUDIA


Provider ID: 185268

Provider Gender: Female

License Number: A111170

NPI: 1417279324

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: French, Italian, Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

La Maestra Family Clinic

*LA MAESTRA FAMILY CLINIC
INC*

 *4060 FAIRMOUNT AVE*

D2. Directorio de atención primaria

SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

CASTELNOVI, CLAUDIA

Provider ID: 185268
Provider Gender: Female
License Number: A111170
NPI: 1417279324
Provider English Spoken: Y
Provider Language(s) Spoken: French, Italian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Email:

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

CHEN, EILEEN

Provider ID: 606456
Provider Gender: Female
NPI: 1932660966
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Rady Childrens Health Network
EILEEN CHEN

7910 FROST ST STE 400
SAN DIEGO, CA 92123
Phone: (858) 495-0500
Fax: (858) 560-4279
After Hours Phone: (858) 495-0500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CHEN, JENNIFER

Provider ID: 206363
Provider Gender: Female
License Number: A141057
NPI: 1255785150
Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
Family Health Centers of San Diego
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER


PEDIATRICS

CHEN, JENNIFER

Provider ID: 206363
Provider Gender: Female
License Number: A141057
NPI: 1255785150
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
Family Health Centers of San Diego
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560

D2. Directorio de atención primaria

 After Hours Phone: (619) 515-2560


 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

CONE, STEPHANIE

Provider ID: 185268

Provider Gender: Female

License Number: A123929

NPI: 1437444858

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, RADY CHILDRENS


HOSPITAL SAN DIEGO


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9154

 After Hours Phone: (619)
255-9154

 Website: www.lamaestra.org
g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

PEDIATRICS

CONE, STEPHANIE

Provider ID: 185268

Provider Gender: Female

License Number: A123929

NPI: 1437444858

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, RADY CHILDRENS


HOSPITAL SAN DIEGO


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9154

 After Hours Phone: (619)
255-9154

 Website: www.lamaestra.org
g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

CORDES, WILLIAM

Provider ID: 206360

Provider Gender: Male

License Number: 20A15743

NPI: 1174942544

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL


Board Certified Specialty: No


Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

PEDIATRICS

CORDES, WILLIAM

Provider ID: 206360

D2. Directorio de atención primaria

Provider Gender: Male
License Number: 20A15743
NPI: 1174942544
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

PEDIATRICS

DIXON, SARAH

Provider ID: 482070

Provider Gender: Female

License Number: A137415

NPI: 1467751131

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858)
810-8700

Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PEDIATRICS

DIXON, SARAH

Provider ID: 482070

Provider Gender: Female

License Number: A137415

NPI: 1467751131

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858)
810-8700

Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PEDIATRICS

FISHMAN, ELENA

Provider ID: 524340

Provider Gender: Female

NPI: 1740249432

Provider English Spoken: Y

Provider Language(s)
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MEMORIAL

HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network

ELENA FISHMAN

11943 EL CAMINO REAL STE
210

SAN DIEGO, CA 92130

Phone: (858) 793-1011

After Hours Phone: (858)
793-1011


Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PEDIATRICS



FORTUNE, ERIN

Provider ID: 416831

Provider Gender: Male

License Number: A95577

NPI: 1801088422

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,


GROSSMONT HOSPITAL


Board Certified Specialty: No


Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 *3514 30TH ST
SAN DIEGO, CA 92104*

 *Phone: (619) 515-2424*


 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS


FORTUNE, ERIN

Provider ID: 416831

Provider Gender: Male

License Number: A95577

NPI: 1801088422

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,


GROSSMONT HOSPITAL


Board Certified Specialty: No


Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 *3514 30TH ST
SAN DIEGO, CA 92104*

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS



FORTUNE, ERIN

Provider ID: 206360

Provider Gender: Male

License Number: A95577

NPI: 1801088422

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,


GROSSMONT HOSPITAL


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 *1809 NATIONAL AVE
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*


 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 9:00AM-5:00PM

PEDIATRICS



FORTUNE, ERIN

Provider ID: 206360

Provider Gender: Male

License Number: A95577

NPI: 1801088422

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,


GROSSMONT HOSPITAL


Board Certified Specialty: No

Family Health Centers of San Diego



LOGAN HEIGHTS FAMILY HEALTH CENTER

 *1809 NATIONAL AVE
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*


 *After Hours Phone: (619)*


D2. Directorio de atención primaria


515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 9:00AM-5:00PM

PEDIATRICS

FRIEDMAN, JAIME


Provider ID: 230500
Provider Gender: Female
NPI: 1144297961
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR HEALTH
Board Certified Specialty: No
Rady Childrens Health Network
JAIME B FRIEDMAN

 16918 DOVE CANYON RD
STE 200
SAN DIEGO, CA 92127

 Phone: (858) 924-1960

Fax: (858) 924-1964


 After Hours Phone: (858)
924-1960

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


GOGGIN, SAMANTHA


Provider ID: 185268
Provider Gender: Female
License Number: A163693
NPI: 1023506367

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9154

 After Hours Phone: (619)
255-9154

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GOGGIN, SAMANTHA

Provider ID: 185268
Provider Gender: Female
License Number: A163693
NPI: 1023506367

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105
 Phone: (619) 255-9154
 After Hours Phone: (619)
255-9154
 Website: www.lamaestra.org

Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GRAY, SARAH

Provider ID: 206360

Provider Gender: Female

License Number: A151631

NPI: 1508210311


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

D2. Directorio de atención primaria

American Sign Language (ASL): SA 8:30AM-5:00PM

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-7:00PM

TU-TH 8:30AM-6:00PM

F 8:30AM-5:30PM

SA 8:30AM-5:00PM

PEDIATRICS

GRAY, SARAH

Provider ID: 206360

Provider Gender: Female

License Number: A151631

NPI: 1508210311

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO


Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300


 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-7:00PM

TU-TH 8:30AM-6:00PM

F 8:30AM-5:30PM

PEDIATRICS


GUPTA, VARSHA


Provider ID: 206360

Provider Gender: Female

License Number: A164889

NPI: 1891283214

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO


Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


GUPTA, VARSHA


Provider ID: 206360

Provider Gender: Female

License Number: A164889

NPI: 1891283214

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

HENDERSON, TREVOR

Provider ID: 58111

Provider Gender: Male

NPI: 1356449425

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SHARP MARY BIRCH HOSP

FOR WOMEN AND

NEWBORNS, RADY

CHILDRENS HOSPITAL SAN

DIEGO, ALVARADO HOSPITAL
LLC

Board Certified Specialty: No

D2. Directorio de atención primaria

Rady Childrens Health Network

TREVOR H HENDERSON

6699 ALVARADO RD STE
2200

SAN DIEGO, CA 92120

Phone: (619) 265-3400

Fax: (619) 265-3407

After Hours Phone: (619)
265-3400

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

HIBBS, NICOLE

Provider ID: 143979

Provider Gender: Female

NPI: 1164627832

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA

Board Certified Specialty: No

Rady Childrens Health Network

NICOLE M HIBBS

550 WASHINGTON ST STE
300

SAN DIEGO, CA 92103

Phone: (619) 297-5437

Fax: (619) 297-4567

After Hours Phone: (619)

297-5437

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-8:30PM

F 8:00AM-5:00PM

SA 8:00AM-2:00PM

PEDIATRICS

HOANG, VY

Provider ID: 161902

Provider Gender: Female

NPI: 1649575135

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SHARP MARY BIRCH HOSP

FOR WOMEN AND

NEWBORNS, RADY

CHILDRENS HOSPITAL SAN

DIEGO

Board Certified Specialty: No

Rady Childrens Health Network

VY U HOANG

6699 ALVARADO RD

SAN DIEGO, CA 92120

Phone: (619) 265-3400

Fax: (619) 265-3407

After Hours Phone: (619)
265-3400

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

HORMOZDYARAN, SANAYA

Provider ID: 612398

Provider Gender: Female

NPI: 1750887634

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: Yes

Rady Childrens Health Network

SANAYA HORMOZDYARAN

2790 TRUXTUN RD STE

120A

SAN DIEGO, CA 92106

Phone: (619) 222-1253

Fax: (619) 222-1276

After Hours Phone: (619)
222-1253

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

JORDAN, JAMIE

Provider ID: 237831

Provider Gender: Female

NPI: 1275762833

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,

RADY CHILDRENS HOSPITAL

SAN DIEGO

D2. Directorio de atención primaria

Board Certified Specialty: No
Rady Childrens Health Network

JAMIE M JORDAN

12036 SCRIPPS
HIGHLANDS DR STE 102
SAN DIEGO, CA 92131

Phone: (858) 566-4444

Fax: (858) 566-3321

After Hours Phone: (858)
566-4444

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

JUAREZ, PATRICIA

Provider ID: 317641

Provider Gender: Female

NPI: 1205807229

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
RADY CHILDRENS HOSPITAL
SAN DIEGO, SHARP

MEMORIAL HOSPITAL, UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND

Board Certified Specialty: No

Rady Childrens Health Network

PATRICIA P JUAREZ

7910 FROST ST STE 400
SAN DIEGO, CA 92123

Phone: (858) 495-0500

Fax: (858) 560-4279

After Hours Phone: (858)
495-0500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

KARMAKAR, KANKA

Provider ID: 417101

Provider Gender: Female

License Number: C54941

NPI: 1972536654

Provider English Spoken: Y

Provider Language(s)
Spoken: Bengali, Hindi,
Polish, Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No

Operation Samahan

OPERATION SAMAHAN - MIRA
MESA

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

PEDIATRICS

KARMAKAR, KANKA

Provider ID: 417101

Provider Gender: Female

License Number: C54941

NPI: 1972536654

Provider English Spoken: Y

Provider Language(s)
Spoken: Bengali, Hindi,
Polish, Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No

Operation Samahan

OPERATION SAMAHAN - MIRA
MESA

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

PEDIATRICS


KESANAPALLI, DEEPTHI


Provider ID: 235069

Provider Gender: Female

D2. Directorio de atención primaria

NPI: 1487948584

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Telugu

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO, SHARP MARY BIRCH
HOSP FOR WOMEN AND
NEWBORNS

Board Certified Specialty: No

Rady Childrens Health Network

DEEPTHI KESANAPALLI

 7910 FROST ST STE 335
SAN DIEGO, CA 92123

 Phone: (858) 576-8010

Fax: (858) 576-7391

 After Hours Phone: (858)
576-8010


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-6:00PM

F 8:30AM-0:00PM

PEDIATRICS

LAWRIE, ALISA

Provider ID: 660912

Provider Gender: Female

NPI: 1407847908

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SHARP

MEMORIAL HOSPITAL


Board Certified Specialty: No


Rady Childrens Health Network


ALISA J LAWRIE

 550 WASHINGTON ST STE
300

SAN DIEGO, CA 92103

 Phone: (619) 297-4567

 After Hours Phone: (619)
297-4567

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-8:00PM

F 8:00AM-5:00PM


PEDIATRICS


LE, NGUYEN

Provider ID: 44952

Provider Gender: Male

NPI: 1548308109

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SHARP MARY BIRCH HOSP

FOR WOMEN AND

NEWBORNS, RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND, SHARP MEMORIAL

HOSPITAL


Board Certified Specialty: No

Rady Childrens Health Network


NGUYEN L LE

 5507 EL CAJON BLVD STE
B

SAN DIEGO, CA 92115

 Phone: (619) 582-8814

Fax: (619) 582-8813

 After Hours Phone: (619)
582-8814

 Website: N/A

Email:

LANCLEMD@HOTMAIL.COM

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

LIU, JESICA

Provider ID: 206363

Provider Gender: Female

License Number: A166312

NPI: 1184157620

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

LIU, JESICA

Provider ID: 206363

Provider Gender: Female

License Number: A166312

NPI: 1184157620

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 *4725 MARKET ST
SAN DIEGO, CA 92102*

 *Phone: (619) 515-2560*

 *After Hours Phone: (619) 515-2560*

 *Website: www.fhcsd.org*


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

LOPER, KAREN

Provider ID: 490610

Provider Gender: Female

NPI: 1619908936

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR

*Board Certified Specialty: No
Rady Childrens Health Network*

KAREN S LOPER


 *550 WASHINGTON ST STE
300*

SAN DIEGO, CA 92103

 *Phone: (619) 297-5437*

Fax: (619) 297-4567

 *After Hours Phone: (619) 297-5437*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

LUJAN, ARLEEN

Provider ID: 206360

Provider Gender: Female

License Number: A61687

NPI: 1760412431

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

 *1809 NATIONAL AVE
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*

 *After Hours Phone: (619)*

515-2300

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

LUJAN, ARLEEN

Provider ID: 206360

Provider Gender: Female

License Number: A61687

NPI: 1760412431

Provider English Spoken: Y

Cultural Competency: N

*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS*

MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No

Family Health Centers of San Diego

*LOGAN HEIGHTS FAMILY
HEALTH CENTER*

 *1809 NATIONAL AVE
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

D2. Directorio de atención primaria

PEDIATRICS

MADANY, GEORGE

Provider ID: 318924

Provider Gender: Male

NPI: 1811968837

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, French,
Spanish

Cultural Competency: N

Hospital Affiliation: SHARP


MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL CHULA VISTA

Board Certified Specialty: No

Rady Childrens Health Network

GEORGE H MADANY

 7910 FROST ST STE 400
SAN DIEGO, CA 92123

 Phone: (858) 495-0500

Fax: (858) 560-4279

 After Hours Phone: (858)
495-0500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MAHENDRAN, SRIVIDYA

Provider ID: 482070

Provider Gender: Female

License Number: A92173

NPI: 1487843454

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

MAHENDRAN, SRIVIDYA

Provider ID: 482070

Provider Gender: Female

License Number: A92173

NPI: 1487843454

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

MANRIQUEZ-CASTILLO, ERENDIRA

Provider ID: 185268

Provider Gender: Female

License Number: A75533

NPI: 1356397418

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: VALLEY


CHILDRENS HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.or
g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

D2. Directorio de atención primaria

PEDIATRICS


MANRIQUEZ-CASTILLO, ERENDIRA

Provider ID: 185268

Provider Gender: Female

License Number: A75533

NPI: 1356397418

 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: VALLEY CHILDRENS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619) 255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

PEDIATRICS

MARTINEZ-ANDREE, INGRID

Provider ID: 319049

Provider Gender: Female


NPI: 1205807203

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network
INGRID L MARTINEZ-ANDREE

 7910 FROST ST STE 400
SAN DIEGO, CA 92123

 Phone: (858) 495-0500

Fax: (858) 560-4279

 After Hours Phone: (858) 495-0500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


NGUYEN, JANICE


Provider ID: 416831

Provider Gender: Female

License Number: A157335

NPI: 1760916589


 Provider English Spoken: Y

 Provider Language(s) Spoken: Vietnamese


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3514 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM

PEDIATRICS


NGUYEN, JANICE

Provider ID: 416831

Provider Gender: Female

License Number: A157335

NPI: 1760916589

 Provider English Spoken: Y


 Provider Language(s) Spoken: Vietnamese


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

Hours: M-TH 8:00AM-5:00PM


PEDIATRICS

PARK, TARI

Provider ID: 237711

Provider Gender: Female

NPI: 1285669085

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Korean

Cultural Competency: N


Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Board Certified Specialty: No

Rady Childrens Health Network
TARI Y PARK

 12036 SCRIPPS
HIGHLANDS DR STE 102
SAN DIEGO, CA 92131

 Phone: (858) 566-4444

Fax: (858) 566-3321

 After Hours Phone: (858)
566-4444

 Website: N/A


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: GLENDALE


ADVENTIST MED CTR,
GLENDALE MEMORIAL HOSP
AND HEALTH CTR, TRI CITY
MEDICAL CTR, RADY


CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Hours: M 8:30AM-7:00PM

TU-TH 8:30AM-6:00PM

F 8:30AM-5:30PM

SA 8:30AM-5:00PM

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: GLENDALE


ADVENTIST MED CTR,
GLENDALE MEMORIAL HOSP
AND HEALTH CTR, TRI CITY
MEDICAL CTR, RADY


CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

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 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-7:00PM

TU-TH 8:30AM-6:00PM

F 8:30AM-5:30PM

SA 8:30AM-5:00PM

PEDIATRICS

PARKER, SHERINE

Provider ID: 206360

Provider Gender: Female

License Number: G81658

NPI: 1477626513

PEDIATRICS

PARKER, SHERINE

Provider ID: 206360

Provider Gender: Female

License Number: G81658

NPI: 1477626513

PEDIATRICS

PAVLOVICH, WENDY


Provider ID: 416831

Provider Gender: Female

License Number: A126181

NPI: 1740467299


D2. Directorio de atención primaria



 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS




 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

PAVLOVICH, WENDY



Provider ID: 416831
Provider Gender: Female
License Number: A126181
NPI: 1740467299
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS





 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

POWELL, STEPHANIE


Provider ID: 319033
Provider Gender: Female
NPI: 1720059744
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
RADY CHILDRENS HOSPITAL
SAN DIEGO
Board Certified Specialty: No
Rady Childrens Health Network
STEPHANIE J POWELL

 7910 FROST ST STE 400
SAN DIEGO, CA 92123
 Phone: (858) 495-0500
Fax: (858) 560-4279
 After Hours Phone: (858)
495-0500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM



PEDIATRICS

PRESKILL, CATALINA

Provider ID: 403583
Provider Gender: Female
License Number: G29879
NPI: 1598088759
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM

PEDIATRICS

PRESKILL, CATALINA

Provider ID: 403583
Provider Gender: Female
License Number: G29879
NPI: 1598088759
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

D2. Directorio de atención primaria

IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE N

FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500

After Hours Phone: (619)
233-8500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

PEDIATRICS

RODRIGUEZ, JAVIER

Provider ID: 185268

Provider Gender: Male

License Number: A82639

NPI: 1013059385

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619)
255-9155

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

PEDIATRICS

RODRIGUEZ, JAVIER

Provider ID: 185268

Provider Gender: Male

License Number: A82639

NPI: 1013059385

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619)
255-9155

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

RODRIGUEZ, ALDO

Provider ID: 451167

Provider Gender: Male

License Number: A134995

NPI: 1508209651

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

KING CHAVEZ HEALTH
CENTER

950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org
/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

PEDIATRICS

RODRIGUEZ, ALDO

Provider ID: 451167

Provider Gender: Male

License Number: A134995

NPI: 1508209651

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

D2. Directorio de atención primaria

IHP of Southern Cal-PHP
KING CHAVEZ HEALTH
CENTER

950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

PEDIATRICS

RUBENSTEIN, STUART

Provider ID: 521305

Provider Gender: Male

NPI: 1689633844

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS
HOSPITAL SAN DIEGO,

SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network
STUART I RUBENSTEIN

11943 EL CAMINO REAL STE
210
SAN DIEGO, CA 92130

Phone: (858) 793-1011

After Hours Phone: (858)
793-1011

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

SAMPATH, SRIVIDYA

Provider ID: 416831

Provider Gender: Female

License Number: A132576

NPI: 1275892754

Provider English Spoken: Y
Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

3514 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

SAMPATH, SRIVIDYA

Provider ID: 416831

Provider Gender: Female

License Number: A132576

NPI: 1275892754

Provider English Spoken: Y
Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

3514 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

SEBSO, JODI

Provider ID: 416831

Provider Gender: Female

License Number: A103099

NPI: 1538484316

D2. Directorio de atención primaria



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

SEBSO, JODI

Provider ID: 416831
Provider Gender: Female
License Number: A103099
NPI: 1538484316

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH



CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS


SEBSO, JODI

Provider ID: 206360
Provider Gender: Female
License Number: A103099
NPI: 1538484316

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N




 Accessibility: CONTACT
PROVIDER
Hours: M-F 9:00AM-5:00PM


PEDIATRICS

SEBSO, JODI


Provider ID: 206360
Provider Gender: Female
License Number: A103099
NPI: 1538484316

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 9:00AM-5:00PM

PEDIATRICS

SELLERS, JAIME

Provider ID: 206360
Provider Gender: Female

D2. Directorio de atención primaria

License Number: A159494

NPI: 1720512015


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Sharp
Grossmont Hospital, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

SELLERS, JAIME

Provider ID: 206360

Provider Gender: Female

License Number: A159494

NPI: 1720512015

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Sharp
Grossmont Hospital, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No


Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

SHENOY, ASHVIN

Provider ID: 232392

Provider Gender: Male

NPI: 1619262664


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SHARP

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network
ASHVIN B SHENOY

 292 EUCLID AVE STE 220
SAN DIEGO, CA 92114

 Phone: (619) 262-8624

Fax: (619) 262-6639

 After Hours Phone: (619)

262-8624

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

SHETH, HASMUKH

Provider ID: 451167

Provider Gender: Male

License Number: A45942

NPI: 1396812236

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Gujarati, Hindi,
Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


KING CHAVEZ HEALTH

CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

SHETH, HASMUKH

Provider ID: 451167

Provider Gender: Male

License Number: A45942

NPI: 1396812236

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Gujarati, Hindi, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


KING CHAVEZ HEALTH

CENTER

 *950 S EUCLID AVE
SAN DIEGO, CA 92114*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

 *Website: www.syhealth.org/clinics/king-chavez-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

SHIAU, NANCY

Provider ID: 40852

Provider Gender: Female

NPI: 1750352779

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SHARP MARY BIRCH

HOSP FOR WOMEN AND

NEWBORNS, ALVARADO

HOSP MED CTR


Board Certified Specialty: No

Rady Childrens Health Network

NANCY H SHIAU

 *6699 ALVARADO RD STE
2200*

SAN DIEGO, CA 92120

 *Phone: (619) 265-3400*

Fax: (619) 265-3407

 *After Hours Phone: (619)
265-3400*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


SPITZER, MARSHA

Provider ID: 402851

Provider Gender: Female

License Number: A76785

NPI: 1851323315

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No


Family Health Centers of San


Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 *3705 MISSION BLVD
SAN DIEGO, CA 92109*

 *Phone: (619) 515-2444*

 *After Hours Phone: (619)
515-2444*

 *Website: www.fhcsd.org*

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS


SPITZER, MARSHA

Provider ID: 402851

Provider Gender: Female

License Number: A76785

NPI: 1851323315

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

Family Health Centers of San



Diego


FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 *3705 MISSION BLVD
SAN DIEGO, CA 92109*

D2. Directorio de atención primaria

 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444

 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


SPITZER, MARSHA

Provider ID: 206360

Provider Gender: Female

License Number: A76785

NPI: 1851323315

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,


GROSSMONT HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


SPITZER, MARSHA

Provider ID: 417429

Provider Gender: Female

License Number: A76785

NPI: 1851323315

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,


GROSSMONT HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619) 515-2525

 Website: www.fhcsd.org
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

SPITZER, MARSHA

Provider ID: 417429

Provider Gender: Female

License Number: A76785

NPI: 1851323315

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,


GROSSMONT HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619) 515-2525

 Website: www.fhcsd.org
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

SPITZER, MARSHA


Provider ID: 206360

Provider Gender: Female

License Number: A76785

NPI: 1851323315

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,

GROSSMONT HOSPITAL

D2. Directorio de atención primaria

Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

STUMP, CHARI

Provider ID: 587747
Provider Gender: Female
NPI: 1265968788
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
CHARI D STUMP

7910 FROST ST STE 400
SAN DIEGO, CA 92123
Phone: (858) 495-0500
Fax: (858) 560-4279
After Hours Phone: (858) 495-0500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

SUBRAMANIAN, RAMA

Provider ID: 662343
Provider Gender: Female
NPI: 1932593506
Provider English Spoken: Y
Provider Language(s) Spoken: Tamil
Cultural Competency: N
Board Certified Specialty: No
Rady Childrens Health Network
RAMA V SUBRAMANIAN

11943 EL CAMINO REAL STE 210
SAN DIEGO, CA 92130
Phone: (858) 793-1011
After Hours Phone: (858) 793-1011
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

SULEIMAN QAFITI, KHAWLA

Provider ID: 416831
Provider Gender: Female
License Number: A51318
NPI: 1659303121
Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS

3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM

PEDIATRICS

SULEIMAN QAFITI, KHAWLA

Provider ID: 416831
Provider Gender: Female
License Number: A51318
NPI: 1659303121
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH

D2. Directorio de atención primaria

CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:00PM

PEDIATRICS

TAMAYO, MAITHE

Provider ID: 356145

Provider Gender: Female

License Number: A80504

NPI: 1487748430

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No
Family Health Centers of San
Diego

SHERMAN HEIGHTS FAMILY
HLTH CTRS INC

 2391 ISLAND AVE
SAN DIEGO, CA 92102

 Phone: (619) 515-2435

 After Hours Phone: (619)
515-2435

 Website: N/A

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

TAMAYO, MAITHE

Provider ID: 356145

Provider Gender: Female

License Number: A80504

NPI: 1487748430

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No
Family Health Centers of San
Diego

SHERMAN HEIGHTS FAMILY
HLTH CTRS INC

 2391 ISLAND AVE
SAN DIEGO, CA 92102

 Phone: (619) 515-2435

 After Hours Phone: (619)
515-2435

 Website: N/A

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

TAMAYO, MAITHE

Provider ID: 206360

Provider Gender: Female

License Number: A80504

NPI: 1487748430

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

TAMAYO, MAITHE

Provider ID: 206360

Provider Gender: Female

License Number: A80504

NPI: 1487748430

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


D2. Directorio de atención primaria


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619)*
515-2300

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER


PEDIATRICS


WASSON, MINA

Provider ID: 524333

Provider Gender: Female

NPI: 1366753022

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No


Rady Childrens Health Network


MINA K WASSON


 11943 EL CAMINO REAL STE

210

SAN DIEGO, CA 92130

 *Phone: (858) 793-1011*

 *After Hours Phone: (858)*
793-1011

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM


PEDIATRICS

WATERS, ELIZABETH

Provider ID: 153090

Provider Gender: Female

NPI: 1730477621

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL

CHULA VISTA, PARADISE

VALLEY HOSPITAL, SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,

SCRIPPS MERCY HOSPITAL,

RADY CHILDRENS HOSPITAL

SAN DIEGO


Board Certified Specialty: No

Rady Childrens Health Network

ELIZABETH J WATERS

 292 EUCLID AVE STE 220

SAN DIEGO, CA 92114

 *Phone: (619) 262-8624*

Fax: (619) 262-6639

 *After Hours Phone: (619)*

262-8624

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

WEATHERLY, JACOB

Provider ID: 637376

Provider Gender: Male

NPI: 1538520457

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: LUCILE

SALTER PACKARD CHILDRENS

HOSP, Stanford Health Care


Board Certified Specialty: No

Rady Childrens Health Network

JACOB A WEATHERLY

 6699 ALVARADO RD STE
2200

SAN DIEGO, CA 92120

 *Phone: (619) 265-3400*

Fax: (619) 265-3407

 *After Hours Phone: (619)*
265-3400

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:30AM-0:00PM

PEDIATRICS

WONG, YOLANDA

D2. Directorio de atención primaria

Provider ID: 482070

Provider Gender: Female

License Number: A94449

NPI: 1851599872

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PEDIATRICS

WONG, YOLANDA

Provider ID: 482070

Provider Gender: Female

License Number: A94449

NPI: 1851599872

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PEDIATRICS

WONG, YOLANDA

Provider ID: 233532

Provider Gender: Female

License Number: A94449

NPI: 1851599872

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No


IHP of Southern Cal-PHP


MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

WONG, YOLANDA

Provider ID: 233532

Provider Gender: Female

License Number: A94449

NPI: 1851599872

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No


IHP of Southern Cal-PHP


MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS


ZAHEER, AARON


Provider ID: 233532

Provider Gender: Male

License Number: A61238

NPI: 1902882301

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Persian, Spanish*

Cultural Competency: N

Hospital Affiliation: RADY

*CHILDRENS HOSPITAL SAN
DIEGO*


Board Certified Specialty: No


IHP of Southern Cal-PHP


MID-CITY COMMUNITY CLINIC

 *4305 UNIVERSITY AVE STE
150*

SAN DIEGO, CA 92105

 *Phone: (619) 280-2058*

 *After Hours Phone: (619)
280-2058*

 *Website: www.sdfamilycare
.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

PEDIATRICS


ZAHEER, AARON


Provider ID: 233532

Provider Gender: Male

License Number: A61238

NPI: 1902882301

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Persian, Spanish*

Cultural Competency: N

Hospital Affiliation: RADY

*CHILDRENS HOSPITAL SAN
DIEGO*


Board Certified Specialty: No


IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 *4305 UNIVERSITY AVE STE
150*

SAN DIEGO, CA 92105

 *Phone: (619) 280-2058*

 *After Hours Phone: (619)
280-2058*

 *Website: www.sdfamilycare
.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

PEDIATRICS


ZAHEER, AARON


Provider ID: 482070

Provider Gender: Male

License Number: A61238

NPI: 1902882301

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Persian, Spanish*

Cultural Competency: N

Hospital Affiliation: RADY


*CHILDRENS HOSPITAL SAN
DIEGO*


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 *7011 LINDA VISTA RD
SAN DIEGO, CA 92111*

 *Phone: (858) 810-8700*

 *After Hours Phone: (858)
810-8700*


 *Website: www.sdfamilycare
.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

PEDIATRICS

ZAHEER, AARON


Provider ID: 482070

Provider Gender: Male

License Number: A61238

NPI: 1902882301

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Persian, Spanish*

Cultural Competency: N

Hospital Affiliation: RADY


*CHILDRENS HOSPITAL SAN
DIEGO*


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 *7011 LINDA VISTA RD
SAN DIEGO, CA 92111*

 *Phone: (858) 810-8700*

 *After Hours Phone: (858)
810-8700*

 *Website: www.sdfamilycare
.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):





N

 *Accessibility: CONTACT*

D2. Directorio de atención primaria

PROVIDER	<i>Provider ID: 206360</i>	<input type="checkbox"/> <i>Provider English Spoken: Y</i>
	<i>Provider Gender: Female</i>	<input type="checkbox"/> <i>Provider Language(s)</i>
	<i>License Number: A46161</i>	<i>Spoken: Spanish</i>
	<i>NPI: 1356373674</i>	<i>Cultural Competency: N</i>
<u>PEDIATRICS</u>	<input type="checkbox"/> <i>Provider English Spoken: Y</i>	<i>Board Certified Specialty: No</i>
ZAND, FARIBA	<input type="checkbox"/> <i>Provider Language(s)</i>	<i>Family Health Centers of San Diego</i>
<i>Provider ID: 206360</i>	<i>Spoken: Farsi, Persian, Spanish</i>	<i>FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL</i>
<i>Provider Gender: Female</i>	<i>Cultural Competency: N</i>	<input type="checkbox"/> <i>2325 COMMERCIAL ST STE 1400</i>
<i>License Number: A46161</i>	<i>Hospital Affiliation: MERCY GENERAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR</i>	<i>SAN DIEGO, CA 92113</i>
<i>NPI: 1356373674</i>	<i>Board Certified Specialty: No</i>	<input type="phone"/> <i>Phone: (619) 515-2422</i>
<input type="checkbox"/> <i>Provider English Spoken: Y</i>	<i>Family Health Centers of San Diego</i>	<input type="phone"/> <i>After Hours Phone: (619) 515-2422</i>
<input type="checkbox"/> <i>Provider Language(s)</i>	<i>LOGAN HEIGHTS FAMILY HEALTH CENTER</i>	<input type="website"/> <i>Website: www.fhcsd.org</i>
<i>Spoken: Farsi, Persian, Spanish</i>	<input type="checkbox"/> <i>1809 NATIONAL AVE SAN DIEGO, CA 92113</i>	<i>Email: dalvarado@fhcsd.org</i>
<i>Cultural Competency: N</i>	<input type="phone"/> <i>Phone: (619) 515-2300</i>	<i>Medi-Cal Open Panel: Yes</i>
<i>Hospital Affiliation: MERCY GENERAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR</i>	<input type="phone"/> <i>After Hours Phone: (619) 515-2300</i>	<i>Min/Max Age: 0\None</i>
<i>Board Certified Specialty: No</i>	<input type="website"/> <i>Website: www.fhcsd.org</i>	<i>American Sign Language (ASL): N</i>
<i>Family Health Centers of San Diego</i>	<i>Email: dalvarado@fhcsd.org</i>	<input type="checkbox"/> <i>Accessibility: CONTACT PROVIDER</i>
<i>LOGAN HEIGHTS FAMILY HEALTH CENTER</i>	<i>Medi-Cal Open Panel: Yes</i>	<i>Hours: M-F 8:00AM-5:00PM</i>
<i>Board Certified Specialty: No</i>	<i>Min/Max Age: 0\None</i>	<u>PHYSICIANS ASSISTANT</u>
<i>Family Health Centers of San Diego</i>	<i>American Sign Language (ASL): N</i>	ALVARADO, EDMUND
<i>LOGAN HEIGHTS FAMILY HEALTH CENTER</i>	<input type="checkbox"/> <i>Accessibility: CONTACT PROVIDER</i>	<i>Provider ID: 419529</i>
<i>Board Certified Specialty: No</i>		<i>Provider Gender: Male</i>
<i>Family Health Centers of San Diego</i>		<i>License Number: PA20888</i>
<i>LOGAN HEIGHTS FAMILY HEALTH CENTER</i>		<i>NPI: 1720303340</i>
<i>Board Certified Specialty: No</i>		<input type="checkbox"/> <i>Provider English Spoken: Y</i>
<i>Family Health Centers of San Diego</i>		<input type="checkbox"/> <i>Provider Language(s)</i>
<i>LOGAN HEIGHTS FAMILY HEALTH CENTER</i>		<i>Spoken: Spanish</i>
<i>Board Certified Specialty: No</i>		<i>Cultural Competency: N</i>
<i>Family Health Centers of San Diego</i>		<i>Board Certified Specialty: No</i>
<i>LOGAN HEIGHTS FAMILY HEALTH CENTER</i>		<i>Family Health Centers of San Diego</i>
<i>Board Certified Specialty: No</i>		<i>FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL</i>
<i>Family Health Centers of San Diego</i>		<input type="checkbox"/> <i>2325 COMMERCIAL ST STE</i>
<i>LOGAN HEIGHTS FAMILY HEALTH CENTER</i>		

D2. Directorio de atención primaria

1400
SAN DIEGO, CA 92113
 Phone: (619) 515-2422
 After Hours Phone: (619)
515-2422
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT


ARMENTA, JORGE






Provider ID: 185268
Provider Gender: Male
License Number: PA13694
NPI: 1346382611
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619)
255-9155
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT



ARMENTA, JORGE

Provider ID: 185268
Provider Gender: Male
License Number: PA13694
NPI: 1346382611
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619)
255-9155
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

BATISTA, OSVALDO

Provider ID: 206360
Provider Gender: Male
License Number: PA17864
NPI: 1245349224
 Provider English Spoken: Y
 Provider Language(s)





Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

BATISTA, OSVALDO

Provider ID: 206360
Provider Gender: Male
License Number: PA17864
NPI: 1245349224
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org

D2. Directorio de atención primaria


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Diego

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BHAGAN, SHANNA

Provider ID: 206362

Provider Gender: Female

License Number: PA59874

NPI: 1437635943

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San

Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Diego

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BHAGAN, SHANNA

Provider ID: 206362

Provider Gender: Female

License Number: PA59874

NPI: 1437635943

Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San

Diego
NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BHAGAN, SHANNA

Provider ID: 206362

Provider Gender: Female

License Number: PA59874

NPI: 1437635943

Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San

Diego
NORTH PARK FAMILY HEALTH CENTERS

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 Phone: (619) 515-2424

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 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BHAGAN, SHANNA

Provider ID: 206362

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Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San

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 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA

Provider ID: 206362

Provider Gender: Female

License Number: PA17220

NPI: 1376550657

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San

Diego

D2. Directorio de atención primaria

NORTH PARK FAMILY HEALTH CENTERS CASTILLO, PATRICIA

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT CASTILLO, PATRICIA

Provider ID: 206362
Provider Gender: Female
License Number: PA17220
NPI: 1376550657
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

Provider ID: 206362
Provider Gender: Female
License Number: PA17220
NPI: 1376550657
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA
Provider ID: 206362
Provider Gender: Female
License Number: PA17220
NPI: 1376550657
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424

After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CHAN, TIFFANY

Provider ID: 206360
Provider Gender: Female
License Number: PA23258
NPI: 1790111607
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CHAN, TIFFANY

Provider ID: 206360
Provider Gender: Female

D2. Directorio de atención primaria

License Number: PA23258


NPI: 1790111607


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300


 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CONTRERAS, LORETTA

Provider ID: 403583

Provider Gender: Female

License Number: PA54617


NPI: 1679096341


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619) 233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM

TU-W 8:30AM-5:00PM

TH 8:30AM-9:00PM

F 8:30AM-5:00PM

PHYSICIANS ASSISTANT

CONTRERAS, LORETTA

Provider ID: 403583

Provider Gender: Female

License Number: PA54617


NPI: 1679096341


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619) 233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM

TU-W 8:30AM-5:00PM

TH 8:30AM-9:00PM

F 8:30AM-5:00PM

PHYSICIANS ASSISTANT

DAVID, MARVIC

Provider ID: 206360

Provider Gender: Male

License Number: PA53748


NPI: 1750832317


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

PHYSICIANS ASSISTANT

DAVID, MARVIC

Provider ID: 206360

Provider Gender: Male

License Number: PA53748


NPI: 1750832317

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego



LOGAN HEIGHTS FAMILY HEALTH CENTER

D2. Directorio de atención primaria






 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 9:00AM-5:00PM

PHYSICIANS ASSISTANT

DRAME, SALWA



Provider ID: 417987
Provider Gender: Female
License Number: PA59481
NPI: 1093136426
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HEALTH CTR IBARRA






 4874 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 515-2426
 After Hours Phone: (619)
515-2426
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

DRAME, SALWA



Provider ID: 417987
Provider Gender: Female
License Number: PA59481
NPI: 1093136426
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego





FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 515-2426
 After Hours Phone: (619)
515-2426
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

FINK, PATRICK

Provider ID: 402851
Provider Gender: Male
License Number: PA52704
NPI: 1922380328
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-BEACH AREA
 3705 MISSION BLVD

SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

FINK, PATRICK

Provider ID: 402851
Provider Gender: Male
License Number: PA52704
NPI: 1922380328
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-BEACH AREA
 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT

D2. Directorio de atención primaria

PROVIDER
Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

GARCIA, DEANA

Provider ID: 416831
Provider Gender: Female
License Number: PA21042
NPI: 1447567995
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

GARCIA, DEANA

Provider ID: 416831
Provider Gender: Female
License Number: PA21042
NPI: 1447567995
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS


 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

HOXMEIER, KRISTA

Provider ID: 418142
Provider Gender: Female
License Number: PA58505
NPI: 1104203454
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HEALTH CTR SAN DIEGO-OAK PARK






 5160 FEDERAL BLVD
SAN DIEGO, CA 92105
 Phone: (619) 515-2454
 After Hours Phone: (619) 515-2454
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

HOXMEIER, KRISTA

Provider ID: 418142
Provider Gender: Female
License Number: PA58505
NPI: 1104203454
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego


FAMILY HEALTH CTR SAN DIEGO-OAK PARK
 5160 FEDERAL BLVD
SAN DIEGO, CA 92105
 Phone: (619) 515-2454
 After Hours Phone: (619) 515-2454
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

HOXMEIER, KRISTA

Provider ID: 206363
Provider Gender: Female
License Number: PA58505
NPI: 1104203454
 Provider English Spoken: Y



D2. Directorio de atención primaria

 *Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego*
**DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC**



 4725 MARKET ST
SAN DIEGO, CA 92102
 *Phone: (619) 515-2560*
 *After Hours Phone: (619)
515-2560*
 *Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*

PHYSICIANS ASSISTANT

HOXMEIER, KRISTA


*Provider ID: 206363
Provider Gender: Female
License Number: PA58505
NPI: 1104203454*
 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego*
**DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC**




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SAN DIEGO, CA 92102
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 *After Hours Phone: (619)
515-2560*



 *Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*

PHYSICIANS ASSISTANT

LANDIS, SARAH


*Provider ID: 417782
Provider Gender: Female
License Number: PA58826
NPI: 1144733676*
 *Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego*
**DOWNTOWN FAMILY CTR AT
CONNECTIONS**






 1250 6TH AVE STE 100
SAN DIEGO, CA 92101
 *Phone: (619) 515-2430*
 *After Hours Phone: (619)
515-2430*

 *Website: www.fhcsd.org
Email: jinah@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT


LANDIS, SARAH

*Provider ID: 417782
Provider Gender: Female
License Number: PA58826
NPI: 1144733676*
 *Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego*
**DOWNTOWN FAMILY CTR AT
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 1250 6TH AVE STE 100
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT


LAPINA, LORI

*Provider ID: 206362
Provider Gender: Female
License Number: PA23231
NPI: 1245670413*
 *Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego*
NORTH PARK FAMILY HEALTH

D2. Directorio de atención primaria

CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

LAPINA, LORI

Provider ID: 206362

Provider Gender: Female




License Number: PA23231


NPI: 1245670413

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:30PM

F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

LAPINA, LORI

Provider ID: 206362

Provider Gender: Female

License Number: PA23231


NPI: 1245670413

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
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 Phone: (619) 515-2424
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 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

LAPINA, LORI

Provider ID: 417937

Provider Gender: Female

License Number: PA23231

NPI: 1245670413


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San

Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

LAPINA, LORI

Provider ID: 417937

Provider Gender: Female


License Number: PA23231


NPI: 1245670413

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

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HILLCREST

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515-2545

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Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

LAPINA, LORI

Provider ID: 206362

Provider Gender: Female

License Number: PA23231


NPI: 1245670413

 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*


 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:30AM-5:30PM

F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

LLOYD, MATTHEW

Provider ID: 417429

Provider Gender: Male

License Number: PA62752

NPI: 1487307369


 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 *Phone: (619) 515-2525*

 *After Hours Phone: (619) 515-2525*

 *Website: www.fhcsd.org*

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

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American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

LOHNES, ELLIE

Provider ID: 417429

Provider Gender: Female

License Number: PA63071


NPI: 1902580426


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
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Provider ID: 417429

Provider Gender: Female

License Number: PA63071

NPI: 1902580426

 *Provider English Spoken: Y*
Cultural Competency: N

D2. Directorio de atención primaria

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

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Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

LOPEZ, MARIO

Provider ID: 417987

Provider Gender: Male

License Number: PA21385

NPI: 1932335080

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR IBARRA

4874 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 515-2426

After Hours Phone: (619) 515-2426

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

LOPEZ, MARIO

Provider ID: 417987

Provider Gender: Male

License Number: PA21385

NPI: 1932335080

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Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

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Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

LOPEZ, MARIO

Provider ID: 417937

Provider Gender: Male

License Number: PA21385

NPI: 1932335080

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

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Email: fabianm@fhcsd.org

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Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

PHYSICIANS ASSISTANT

MARTINEZ-MURGUIA, IRENE

Provider ID: 185268

Provider Gender: Female

License Number: PA20296

NPI: 1447492889

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

MARTINEZ-MURGUIA, IRENE

Provider ID: 185268

Provider Gender: Female

License Number: PA20296

NPI: 1447492889

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
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 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 185268

Provider Gender: Female

License Number: PA21625

NPI: 1154609790

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic


Cultural Competency: N


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 185268

Provider Gender: Female

License Number: PA21625

NPI: 1154609790

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic


Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

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INC

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 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

D2. Directorio de atención primaria

PHYSICIANS ASSISTANT


MILLER, LAUREL

Provider ID: 206363

Provider Gender: Female

License Number: PA20378

NPI: 1598992133

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego


DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


MILLER, LAUREL

Provider ID: 206363

Provider Gender: Female

License Number: PA20378

NPI: 1598992133

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego


DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

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 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


NUNO, JOSE

Provider ID: 206360

Provider Gender: Male

License Number: PA15227

NPI: 1275543068

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


NUNO, JOSE

Provider ID: 206360

Provider Gender: Male

License Number: PA15227

NPI: 1275543068

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

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Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


PENA, NICHOLAS

Provider ID: 206360

Provider Gender: Male

License Number: PA56636

NPI: 1083176077

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No



Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

D2. Directorio de atención primaria

 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org


Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER




PHYSICIANS ASSISTANT


PENA, NICHOLAS

Provider ID: 206360
Provider Gender: Male
License Number: PA56636
NPI: 1083176077

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300



 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

PHUNG, AIVI


Provider ID: 206046
Provider Gender: Female
License Number: PA53902
NPI: 1639528110

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org



Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
TU 8:00AM-8:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-1:00PM

PHYSICIANS ASSISTANT

PHUNG, AIVI

Provider ID: 206046
Provider Gender: Female
License Number: PA53902
NPI: 1639528110


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N



 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-5:00PM
TU 8:00AM-8:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-1:00PM

PHYSICIANS ASSISTANT

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Provider ID: 206046
Provider Gender: Female
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Spoken: Vietnamese
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CTR

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 Website: www.sdfamilycare.org

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): **PHYSICIANS ASSISTANT**

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-5:00PM

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

PHYSICIANS ASSISTANT


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Provider Gender: Female

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Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

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TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM


POLLEY, SHANNON

Provider ID: 206363

Provider Gender: Female

License Number: PA60864

NPI: 1225608722

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST
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Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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POLLEY, SHANNON

Provider ID: 206363

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License Number: PA60864

NPI: 1225608722

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Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

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Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

QUICK, ELISABETH

Provider ID: 206360

Provider Gender: Female

License Number: PA21591

NPI: 1790055010

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

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 After Hours Phone: (619)
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Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

QUICK, ELISABETH

Provider ID: 206360

Provider Gender: Female

License Number: PA21591

NPI: 1790055010

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 *1809 NATIONAL AVE
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org
Email: dalvarado@fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

RALL, EMILY

Provider ID: 227409

Provider Gender: Female


License Number: PA52141


NPI: 1407855828


*Provider English Spoken: Y
Cultural Competency: N*

Board Certified Specialty: No

*IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC -
OCEAN VIEW*

 *3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: https://www.syhealth.org/locations*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

RALL, EMILY

Provider ID: 227409

Provider Gender: Female

License Number: PA52141


NPI: 1407855828


*Provider English Spoken: Y
Cultural Competency: N*


Board Certified Specialty: No


IHP of Southern Cal-PHP

*SAN YSIDRO HEALTH CHC -
OCEAN VIEW*

 *3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113*

 *Phone: (619) 662-4100*


 *After Hours Phone: (619) 662-4100*

 *Website: https://www.syhealth.org/locations*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

RASMUSSEN, DALE

Provider ID: 417429

Provider Gender: Male

License Number: PA54022

NPI: 1962880864

*Provider English Spoken: Y
Cultural Competency: N*


Hospital Affiliation: MERCY


HOSPITAL OF FOLSOM


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 *1550 BROADWAY STE 2
SAN DIEGO, CA 92101*

 *Phone: (619) 515-2525*

 *After Hours Phone: (619) 515-2525*

 *Website: www.fhcsd.org
Email: janeta@fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

RASMUSSEN, DALE

Provider ID: 417429

Provider Gender: Male

License Number: PA54022

NPI: 1962880864

*Provider English Spoken: Y
Cultural Competency: N*

Hospital Affiliation: MERCY

D2. Directorio de atención primaria

HOSPITAL OF FOLSOM
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619) 515-2525

Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

SCHELLIE, SCOTT

Provider ID: 417429

Provider Gender: Male

License Number: PA53288

NPI: 1699053843

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619) 515-2525

Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

SCHELLIE, SCOTT

Provider ID: 417429

Provider Gender: Male

License Number: PA53288

NPI: 1699053843

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO- CITY COLLEGE

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619) 515-2525

Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 517403

Provider Gender: Female

License Number: PA20490

NPI: 1619100237

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH 25TH ST

FAMILY MEDICINE

316 25TH ST
SAN DIEGO, CA 92102

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 517403

Provider Gender: Female

License Number: PA20490

NPI: 1619100237

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH 25TH ST

FAMILY MEDICINE

316 25TH ST
SAN DIEGO, CA 92102

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

D2. Directorio de atención primaria

N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

Provider ID: 206363

Provider Gender: Female


License Number: PA58081

NPI: 1215264452


Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

Provider ID: 206363

Provider Gender: Female


License Number: MT2061555

NPI: 1215264452

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San

Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

Provider ID: 206363

Provider Gender: Female


License Number: MT2061555

NPI: 1215264452

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

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 Phone: (619) 515-2560
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 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

Provider ID: 206363

Provider Gender: Female


License Number: PA58081

NPI: 1215264452

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

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 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TREUNER, JULIE

Provider ID: 206360

Provider Gender: Female

License Number: PA17478

NPI: 1922013614

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

D2. Directorio de atención primaria

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

PHYSICIANS ASSISTANT

TREUNER, JULIE

Provider ID: 206360

Provider Gender: Female

License Number: PA17478

NPI: 1922013614

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
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Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

PHYSICIANS ASSISTANT

TURNER, SHEREENA

Provider ID: 206360

Provider Gender: Female

License Number: PA20396

NPI: 1992934988

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TURNER, SHEREENA

Provider ID: 206360

Provider Gender: Female

License Number: PA20396

NPI: 1992934988

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

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Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

UDOH, EKAETE

Provider ID: 418535

Provider Gender: Male

License Number: PA19664

NPI: 1841472776

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN
RANCHO PENASQUITOS

9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

D2. Directorio de atención primaria

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT


UDOH, EKAETE

Provider ID: 418535

Provider Gender: Male

License Number: PA19664

NPI: 1841472776

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Operation Samahan


OPERATION SAMAHAN


RANCHO PENASQUITOS


 9995 CARMEL MOUNTAIN

RD STE B10 AND B11

SAN DIEGO, CA 92129

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT


VARGAS, ROBERT

Provider ID: 206360

Provider Gender: Male

License Number: PA11194

NPI: 1972528081

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San


Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

PHYSICIANS ASSISTANT


VARGAS, ROBERT


Provider ID: 206360

Provider Gender: Male

License Number: PA11194

NPI: 1972528081

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI


Provider ID: 206362

Provider Gender: Female

License Number: PA18746

NPI: 1932297595

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish,

Vietnamese


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


YOUNG-PEN, TONI


Provider ID: 206362

Provider Gender: Female

License Number: PA18746

NPI: 1932297595

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish,
Vietnamese


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424


 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


YOUNG-PEN, TONI


Provider ID: 206362

Provider Gender: Female

License Number: PA18746

NPI: 1932297595

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish,
Vietnamese


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


YOUNG-PEN, TONI


Provider ID: 206362

Provider Gender: Female

License Number: PA18746

NPI: 1932297595

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish,
Vietnamese


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


YOUNG-PEN, TONI


Provider ID: 233597

Provider Gender: Female

License Number: PA18746

NPI: 1932297595

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish,
Vietnamese


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619)
563-0250

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

D2. Directorio de atención primaria

YOUNG-PEN, TONI

Provider ID: 233597

Provider Gender: Female

License Number: PA18746

NPI: 1932297595

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

4290 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 563-0250

After Hours Phone: (619)
563-0250

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

PODIATRIST

JUAREZ, LETICIA

Provider ID: 206360

Provider Gender: Female

License Number: DPM5661

NPI: 1508393778

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San

Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PODIATRIST

JUAREZ, LETICIA

Provider ID: 206360

Provider Gender: Female

License Number: DPM5661

NPI: 1508393778

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PODIATRIST

LE, DIANA

Provider ID: 206360

Provider Gender: Female

License Number: DPM5734

NPI: 1184112864

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR

Board Certified Specialty: No

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PODIATRIST

LE, DIANA

Provider ID: 206360

Provider Gender: Female

License Number: DPM5734



NPI: 1184112864






D2. Directorio de atención primaria

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
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 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PODIATRIST



LE, DIANA

Provider ID: 206363
Provider Gender: Female
License Number: DPM5734
NPI: 1184112864
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR
Board Certified Specialty: No
Family Health Centers of San
Diego
DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PODIATRIST








LE, DIANA

Provider ID: 206363
Provider Gender: Female
License Number: DPM5734
NPI: 1184112864
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR
Board Certified Specialty: No
Family Health Centers of San
Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER


PODIATRIST

MANCHEL, BRUCE


Provider ID: 631494
Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
PRECISION PARK
 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PODIATRIST



MANCHEL, BRUCE

Provider ID: 631494
Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
 Provider English Spoken: Y

D2. Directorio de atención primaria

 *Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
PRECISION PARK*


 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619)
662-4100*




 *Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT
PROVIDER**



PODIATRIST

SCHNEIDER, SARAH

*Provider ID: 206360
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237*

 *Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER*


 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619)
515-2300*




 *Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT
PROVIDER**


PODIATRIST

SCHNEIDER, SARAH

*Provider ID: 206360
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237*

 *Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER*

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619)
515-2300*

 *Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

PODIATRIST



SCHNEIDER, SARAH

*Provider ID: 402851
Provider Gender: Female
License Number: DPM4819*

NPI: 1326282237

 *Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-BEACH AREA*

 3705 MISSION BLVD
SAN DIEGO, CA 92109


 *Phone: (619) 515-2444*
 *After Hours Phone: (619)
515-2444*


 *Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT
PROVIDER**



PODIATRIST

SCHNEIDER, SARAH

*Provider ID: 417429
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237*


 *Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE*

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 *Phone: (619) 515-2525*
 *After Hours Phone: (619)
515-2525*


 *Website: www.fhcsd.org*

D2. Directorio de atención primaria

Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 417429
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101
 Phone: (619) 515-2525
 After Hours Phone: (619) 515-2525
 Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PODIATRIST

SCHNEIDER, SARAH




Provider ID: 402851
Provider Gender: Female


License Number: DPM4819
NPI: 1326282237
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PREVENTATIVE MEDICINE

GENERAL

HILL, LINDA







Provider ID: 206046
Provider Gender: Female
License Number: G41532
NPI: 1467434811
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE CTR
 6973 LINDA VISTA RD

SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE


GENERAL

HILL, LINDA

Provider ID: 206046
Provider Gender: Female
License Number: G41532
NPI: 1467434811
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE CTR
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

D2. Directorio de atención primaria

N



 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE


GENERAL


HILL, LINDA

Provider ID: 482070
Provider Gender: Female
License Number: G41532
NPI: 1467434811


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: French, Spanish*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified Specialty: No IHP of Southern Cal-PHP SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 *Phone: (858) 810-8700*
 *After Hours Phone: (858) 810-8700*

 *Website: www.sdfamilycare.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N



 *Accessibility: CONTACT PROVIDER*
Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE


GENERAL

HILL, LINDA

Provider ID: 206046
Provider Gender: Female
License Number: G41532
NPI: 1467434811


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: French, Spanish*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified Specialty: No IHP of Southern Cal-PHP LINDA VISTA HEALTH CARE CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*
 *After Hours Phone: (858) 279-0925*

 *Website: www.sdfamilycare.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N



 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

HILL, LINDA

Provider ID: 482070
Provider Gender: Female
License Number: G41532
NPI: 1467434811

 *Provider English Spoken: Y*
 *Provider Language(s)*


Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified Specialty: No IHP of Southern Cal-PHP SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 *Phone: (858) 810-8700*
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N



 *Accessibility: CONTACT PROVIDER*
Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

HILL, LINDA

Provider ID: 206046
Provider Gender: Female
License Number: G41532
NPI: 1467434811

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: French, Spanish*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified Specialty: No IHP of Southern Cal-PHP LINDA VISTA HEALTH CARE

D2. Directorio de atención primaria


CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

RISSER, JOSEPH

Provider ID: 206046

Provider Gender: Male

License Number: G70886


NPI: 1952386765

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: Yes
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 279-0377

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

RISSER, JOSEPH

Provider ID: 482070

Provider Gender: Male

License Number: G70886


NPI: 1952386765


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

RISSER, JOSEPH

Provider ID: 206046

Provider Gender: Male

License Number: G70886


NPI: 1952386765

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: Yes
IHP of Southern Cal-PHP


LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
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 Phone: (858) 279-0925

Fax: (858) 279-0377


 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

RISSER, JOSEPH

Provider ID: 206046

Provider Gender: Male

License Number: G70886


NPI: 1952386765

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: Yes
IHP of Southern Cal-PHP


LINDA VISTA HEALTH CARE
CTR


 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 279-0377

D2. Directorio de atención primaria

 After Hours Phone: (858) 279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE GENERAL

RISSER, JOSEPH

Provider ID: 482070

Provider Gender: Male

License Number: G70886


NPI: 1952386765


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858) 810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE GENERAL

RISSER, JOSEPH

Provider ID: 206046

Provider Gender: Male

License Number: G70886


NPI: 1952386765

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: Yes
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 279-0377

 After Hours Phone: (858) 279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE GENERAL



ROMERO, CAMILA

Provider ID: 206046

Provider Gender: Female

License Number: A93812

NPI: 1508912130

 Provider English Spoken: Y
 Provider Language(s)

Spoken: French, Spanish
Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR


WOMEN AND NEWBORNS

Board Certified Specialty: No


IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 279-0377

 After Hours Phone: (858) 279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PREVENTATIVE MEDICINE GENERAL

ROMERO, CAMILA


Provider ID: 206046

Provider Gender: Female

License Number: A93812

NPI: 1508912130

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS

Board Certified Specialty: No

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE

D2. Directorio de atención primaria

CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 Fax: (858) 279-0377
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PREVENTATIVE MEDICINE

GENERAL

ROMERO, CAMILA

Provider ID: 206046

Provider Gender: Female

License Number: A93812

NPI: 1508912130

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP


MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS


Board Certified Specialty: No
IHP of Southern Cal-PHP


LINDA VISTA HEALTH CARE

CTR

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 Fax: (858) 279-0377

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PREVENTATIVE MEDICINE

GENERAL

ROMERO, CAMILA

Provider ID: 206046

Provider Gender: Female

License Number: A93812

NPI: 1508912130

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP


MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS


Board Certified Specialty: No
IHP of Southern Cal-PHP


LINDA VISTA HEALTH CARE


CTR

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 Phone: (858) 279-0925

 Fax: (858) 279-0377

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL

THERAPIST

BLOCKER, NIRIT

Provider ID: 206360

Provider Gender: Female

License Number: PT30272

NPI: 1457689309

Provider English Spoken: Y

Provider Language(s)
Spoken: Hebrew


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

REGISTERED PHYSICAL

THERAPIST

BLOCKER, NIRIT

Provider ID: 206360

Provider Gender: Female

License Number: PT30272

NPI: 1457689309

Provider English Spoken: Y

Provider Language(s)
Spoken: Hebrew


Cultural Competency: N


D2. Directorio de atención primaria

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

REGISTERED PHYSICAL

THERAPIST


CHAVARRIA, JESSICA

Provider ID: 417937

Provider Gender: Female

License Number: PT292351

NPI: 1407391808

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

REGISTERED PHYSICAL

THERAPIST


CHAVARRIA, JESSICA

Provider ID: 417937

Provider Gender: Female

License Number: PT292351

NPI: 1407391808

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

REGISTERED PHYSICAL

THERAPIST

CONCORS, ANDREW


Provider ID: 417937

Provider Gender: Male

License Number: PT12930

NPI: 1578706743

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org


Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

REGISTERED PHYSICAL

THERAPIST

CONCORS, ANDREW


Provider ID: 417937

Provider Gender: Male

License Number: PT12930

NPI: 1578706743

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

D2. Directorio de atención primaria

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL

THERAPIST

CUMMINGS, GEORGE

Provider ID: 417937

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

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Phone: (619) 515-2545

After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL

THERAPIST

CUMMINGS, GEORGE

Provider ID: 417937

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

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HILLCREST

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Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL

THERAPIST

DAHMS, MADELYNN

Provider ID: 206360

Provider Gender: Female

License Number: PT295463

NPI: 1245712702

Provider English Spoken: Y

Provider Language(s)
Spoken: Sign Language

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL

THERAPIST

DAHMS, MADELYNN

Provider ID: 206360

Provider Gender: Female

License Number: PT295463

NPI: 1245712702

Provider English Spoken: Y

Provider Language(s)
Spoken: Sign Language

Cultural Competency: N


Board Certified Specialty: No

D2. Directorio de atención primaria


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

FIELDING, JOSEPH

Provider ID: 417937

Provider Gender: Male

License Number: PT40975


NPI: 1235577560


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545


 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

FIELDING, JOSEPH

Provider ID: 417937

Provider Gender: Male

License Number: PT40975


NPI: 1235577560


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST


HAPKE, ELENA

Provider ID: 417937

Provider Gender: Female

License Number: PT292613


NPI: 1003354895


 Provider English Spoken: Y


Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

HAPKE, ELENA

Provider ID: 417937

Provider Gender: Female

License Number: PT292613


NPI: 1003354895


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1518028547

N

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST


HERMES, MARY

Provider ID: 206360

Provider Gender: Female

License Number: PT24707

NPI: 1518028547

 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1003088063

N

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST


HERMES, MARY

Provider ID: 206360

Provider Gender: Female

License Number: PT24707

NPI: 1518028547

 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


REGISTERED PHYSICAL THERAPIST

IRIZARRY, NICOLE

Provider ID: 206360

Provider Gender: Female

License Number: PT33914

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

IRIZARRY, NICOLE

Provider ID: 206360

Provider Gender: Female

License Number: PT33914

NPI: 1003088063


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

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 Phone: (619) 515-2300


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 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

REGISTERED PHYSICAL THERAPIST


MAHONEY, KAITLYN

Provider ID: 417937

Provider Gender: Female

License Number: PT296559

NPI: 1114583176


 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST


MAHONEY, KAITLYN

Provider ID: 417937

Provider Gender: Female

License Number: PT296559

NPI: 1114583176

 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San


Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE

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 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST


MIGNEA, DAVID

Provider ID: 417937

Provider Gender: Male

License Number: PT293536

NPI: 1043736879


 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

Provider ID: 417937

Provider Gender: Male

License Number: PT293536

NPI: 1043736879


 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego


FAMILY HLTH CTR SD

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Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

SCHMIDT, BRYAN

Provider ID: 417937

D2. Directorio de atención primaria

Provider Gender: Male

License Number: PT28061

NPI: 1780685032

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL

THERAPIST

SCHMIDT, BRYAN

Provider ID: 417937

Provider Gender: Male

License Number: PT28061

NPI: 1780685032

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
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Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL

THERAPIST

VAN DYKE, JASON

Provider ID: 417937

Provider Gender: Male

License Number: PT25155

NPI: 1487658720

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

VAN DYKE, JASON

Provider ID: 417937

Provider Gender: Male

License Number: PT25155

NPI: 1487658720

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SD

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Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

RHEUMATOLOGY

OGANDO, SHEENA

Provider ID: 206363

Provider Gender: Female

D2. Directorio de atención primaria

License Number: A142743
NPI: 1649564295
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: JOHN
MUIR MEDICAL CENTER
WALNUT CREEK CAMPUS
Board Certified Specialty: No
Family Health Centers of San
Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

RHEUMATOLOGY

OGANDO, SHEENA

Provider ID: 206363
Provider Gender: Female
License Number: A142743
NPI: 1649564295
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: JOHN
MUIR MEDICAL CENTER

WALNUT CREEK CAMPUS
Board Certified Specialty: No
Family Health Centers of San
Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

RHEUMATOLOGY

REDDY, DANA

Provider ID: 206363
Provider Gender: Female
License Number: A115598
NPI: 1144538778
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Board Certified Specialty: No
Family Health Centers of San

Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM


RHEUMATOLOGY

REDDY, DANA

Provider ID: 206363
Provider Gender: Female
License Number: A115598
NPI: 1144538778
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Board Certified Specialty: No
Family Health Centers of San
Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

D2. Directorio de atención primaria


 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

RHEUMATOLOGY


REDDY, DANA


Provider ID: 403583

Provider Gender: Female

License Number: A115598

NPI: 1144538778

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No


IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)

233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

RHEUMATOLOGY


REDDY, DANA

Provider ID: 403583

Provider Gender: Female

License Number: A115598

NPI: 1144538778

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No


IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)

233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SPEECH PATHOLOGIST

MILLER, WILLIAM

Provider ID: 206360

Provider Gender: Male

License Number: SP35150

NPI: 1972002210

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

SPEECH PATHOLOGIST

MILLER, WILLIAM

Provider ID: 206360


Provider Gender: Male

License Number: SP35150




NPI: 1972002210


 Provider English Spoken: Y

D2. Directorio de atención primaria


 *Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego*

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619)
515-2300*

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
*Medi-Cal Open Panel: Yes
Min/Max Age: 0\None*


*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*




SPEECH PATHOLOGIST


WILLIAMS, JESSICA

*Provider ID: 206360
Provider Gender: Female
License Number: SP27677
NPI: 1932680006*

 *Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego*

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619)
515-2300*

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org


*Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*




SPEECH PATHOLOGIST


WILLIAMS, JESSICA

*Provider ID: 206360
Provider Gender: Female
License Number: SP27677
NPI: 1932680006*

 *Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego*

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619)
515-2300*

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
*Medi-Cal Open Panel: Yes
Min/Max Age: 0\None*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

SAN MARCOS



CERTIFIED NURSE




PRACTITIONER


BINETTE, DONYA

*Provider ID: 206426
Provider Gender: Female*

*License Number: NP95001653
NPI: 1427325166*

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE*

 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
 *After Hours Phone: (760)
736-6767*

 *Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N*



 *Accessibility: CONTACT
PROVIDER*




CERTIFIED NURSE

PRACTITIONER

BINETTE, DONYA

*Provider ID: 206426
Provider Gender: Female
License Number: NP95001653
NPI: 1427325166*

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE*

 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
 *After Hours Phone: (760)
736-6767*

 *Website: www.ihpsocal.org*

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

BINETTE, DONYA

Provider ID: 206426

Provider Gender: Female

License Number: NP95001653

NPI: 1427325166

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

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 Phone: (760) 736-6767


 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

BINETTE, DONYA

Provider ID: 206426

Provider Gender: Female

License Number: NP95001653

NPI: 1427325166

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

BINETTE, DONYA

Provider ID: 206426

Provider Gender: Female

License Number: NP95001653

NPI: 1427325166

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

BINETTE, DONYA

Provider ID: 206426

Provider Gender: Female

License Number: NP95001653

NPI: 1427325166

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767


 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

FODDA, RAMI

Provider ID: 614511

Provider Gender: Male

License Number: NP18788

NPI: 1164660452

Provider English Spoken: Y

Provider Language(s)

D2. Directorio de atención primaria

Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

FODDA, RAMI

Provider ID: 614511

Provider Gender: Male

License Number: NP18788

NPI: 1164660452

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider Language(s)
Spoken: Arabic

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

CERTIFIED NURSE

PRACTITIONER

FODDA, RAMI

Provider ID: 614511

Provider Gender: Male

License Number: NP18788

NPI: 1164660452

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

FODDA, RAMI

Provider ID: 614511

Provider Gender: Male

License Number: NP18788

NPI: 1164660452

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
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Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

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Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


FODDA, RAMI

Provider ID: 614511

Provider Gender: Male

License Number: NP18788

NPI: 1164660452

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No
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 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


FREEMAN, WANDA

Provider ID: 206426

Provider Gender: Female

License Number: NP95003903

NPI: 1659504264

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


FREEMAN, WANDA

Provider ID: 206426

Provider Gender: Female

License Number: NP95003903

NPI: 1659504264

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

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Min/Max Age: 0\None

American Sign Language (ASL):

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 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

FREEMAN, WANDA

Provider ID: 206426

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NPI: 1659504264

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

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American Sign Language (ASL):

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 Accessibility: CONTACT
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Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

D2. Directorio de atención primaria

 After Hours Phone: (760) 736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


FREEMAN, WANDA




Provider ID: 206426


Provider Gender: Female

License Number: NP95003903

NPI: 1659504264

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

FREEMAN, WANDA

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Cultural Competency: N

Board Certified Specialty: No
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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER



HENLEY, MEARA

Provider ID: 206426

Provider Gender: Female

License Number: NP95002545

NPI: 1538319645


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER



HENLEY, MEARA

Provider ID: 206426

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 Provider Language(s)
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Board Certified Specialty: No
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 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER



HENLEY, MEARA

Provider ID: 206426

Provider Gender: Female



License Number: NP95002545

NPI: 1538319645

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

D2. Directorio de atención primaria



Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
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 Phone: (760) 736-6767
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736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

CERTIFIED NURSE

PRACTITIONER

HENLEY, MEARA

Provider ID: 206426
Provider Gender: Female
License Number: NP95002545
NPI: 1538319645
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE



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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*

PROVIDER





CERTIFIED NURSE

PRACTITIONER

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Spoken: Spanish



Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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American Sign Language (ASL):
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PROVIDER

CERTIFIED NURSE





PRACTITIONER

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IHP of Southern Cal-PHP
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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

CERTIFIED NURSE

PRACTITIONER

KOUSARI, JHALEH


Provider ID: 206426
Provider Gender: Female
License Number: NP20893
NPI: 1811262405
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Farsi, Persian,
Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

PRACTITIONER


KOUSARI, JHALEH


Provider ID: 206426

Provider Gender: Female

License Number: NP20893

NPI: 1811262405

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Farsi, Persian,
Spanish*


Cultural Competency: N


*Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL*

*Board Certified Specialty: No
IHP of Southern Cal-PHP*

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

 *After Hours Phone: (760)
736-6767*

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

PRACTITIONER


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Provider ID: 206426

Provider Gender: Female

License Number: NP20893

NPI: 1811262405

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Farsi, Persian,
Spanish*


Cultural Competency: N


*Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL*

*Board Certified Specialty: No
IHP of Southern Cal-PHP*

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

 *After Hours Phone: (760)
736-6767*

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

PRACTITIONER


KOUSARI, JHALEH


Provider ID: 206426

Provider Gender: Female

License Number: NP20893

NPI: 1811262405

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Farsi, Persian,
Spanish*

Cultural Competency: N


*Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL*


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

 *After Hours Phone: (760)
736-6767*

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

PRACTITIONER

KOUSARI, JHALEH


Provider ID: 206426

Provider Gender: Female

License Number: NP20893

NPI: 1811262405

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Farsi, Persian,
Spanish*


Cultural Competency: N


*Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL*

*Board Certified Specialty: No
IHP of Southern Cal-PHP*

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

 *After Hours Phone: (760)
736-6767*

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

D2. Directorio de atención primaria

- N
 Accessibility: CONTACT PROVIDER
- CERTIFIED NURSE PRACTITIONER**
KOUSARI, JHALEH
Provider ID: 206426
Provider Gender: Female
License Number: NP20893
NPI: 1811262405
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
- CERTIFIED NURSE PRACTITIONER**
MACIAS, ALISSA
Provider ID: 206426
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE
 150 VALPRED A RD
- NPI: 1952658445
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE
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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
- CERTIFIED NURSE PRACTITIONER**
MACIAS, ALISSA
Provider ID: 206426
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
-  Accessibility: CONTACT PROVIDER
- CERTIFIED NURSE PRACTITIONER**
MACIAS, ALISSA
Provider ID: 206426
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
- CERTIFIED NURSE PRACTITIONER**
MACIAS, ALISSA
Provider ID: 206426
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE
 150 VALPRED A RD

D2. Directorio de atención primaria

SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

MACIAS, ALISSA

Provider ID: 206426
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

MACIAS, ALISSA

Provider ID: 206426

Provider Gender: Female
License Number: NP21368
NPI: 1952658445
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 206426
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

150 VALPRED A RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

CERTIFIED REGISTERED

NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 206426
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

CERTIFIED REGISTERED

NURSE MIDWIFE

BELANGER, TANYA

D2. Directorio de atención primaria

Provider ID: 206426

Provider Gender: Female

License Number: NM235844


NPI: 1407287469


Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
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 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

CERTIFIED REGISTERED

NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 206426

Provider Gender: Female

License Number: NM235844


NPI: 1407287469


Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
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American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

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CERTIFIED REGISTERED

NURSE MIDWIFE

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Board Certified Specialty: No
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TRUECARE

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Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

CERTIFIED REGISTERED

NURSE MIDWIFE

KELLY, KATHERINE

Provider ID: 206426

Provider Gender: Female

License Number: NM235997

NPI: 1801134275

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

D2. Directorio de atención primaria

Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP TRUECARE


 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED REGISTERED NURSE MIDWIFE

KELLY, KATHERINE

Provider ID: 206426
Provider Gender: Female
License Number: NM235997
NPI: 1801134275
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP TRUECARE



 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED REGISTERED NURSE MIDWIFE

KELLY, KATHERINE

Provider ID: 206426
Provider Gender: Female
License Number: NM235997
NPI: 1801134275
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP TRUECARE

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED REGISTERED NURSE MIDWIFE

KELLY, KATHERINE

Provider ID: 206426
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NPI: 1801134275
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
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CERTIFIED REGISTERED NURSE MIDWIFE

KELLY, KATHERINE

Provider ID: 206426
Provider Gender: Female
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NPI: 1801134275
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Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069



D2. Directorio de atención primaria






 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE



KELLY, KATHERINE

Provider ID: 206426
Provider Gender: Female
License Number: NM235997
NPI: 1801134275
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CHIROPRACTOR



LOVERN, JENNIFER






Provider ID: 206426
Provider Gender: Female
License Number: DC29074
NPI: 1235469396
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Italian,
Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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 Phone: (760) 736-6767
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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-5:00PM

CHIROPRACTOR



LOVERN, JENNIFER






Provider ID: 206426
Provider Gender: Female
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Hours: M-F 8:00AM-6:00PM

D2. Directorio de atención primaria

SA 8:00AM-5:00PM

CHIROPRACTOR

LOVERN, JENNIFER

Provider ID: 206426

Provider Gender: Female

License Number: DC29074

NPI: 1235469396

Provider English Spoken: Y


Provider Language(s)
Spoken: French, Italian,
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Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

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SA 8:00AM-5:00PM

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NPI: 1235469396

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Provider Language(s)
Spoken: French, Italian,
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Cultural Competency: N

Board Certified Specialty: No
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PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-5:00PM

FAMILY PRACTICE

MATIAS, JULIE

Provider ID: 206426

Provider Gender: Female

License Number: 20A15159

NPI: 1083094510

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
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Min/Max Age: 0\None

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N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MATIAS, JULIE

Provider ID: 206426

Provider Gender: Female

License Number: 20A15159

NPI: 1083094510

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

D2. Directorio de atención primaria


Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE


MATIAS, JULIE

Provider ID: 206426

Provider Gender: Female

License Number: 20A15159

NPI: 1083094510

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

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PROVIDER*

FAMILY PRACTICE


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IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 206426

Provider Gender: Male

D2. Directorio de atención primaria

License Number: C54157
NPI: 1275630618
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Bengali
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 206426
Provider Gender: Male
License Number: C54157
NPI: 1275630618
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Bengali
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 206426
Provider Gender: Male
License Number: C54157
NPI: 1275630618
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Bengali
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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 Phone: (760) 736-6767
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FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 206426

Provider Gender: Male
License Number: C54157
NPI: 1275630618
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Bengali
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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 Website: www.ihpsocal.org
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 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
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FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 206426
Provider Gender: Male
License Number: C54157
NPI: 1275630618
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Bengali
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE



150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)

D2. Directorio de atención primaria

736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 614511
Provider Gender: Male
License Number: C54157
NPI: 1275630618
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Bengali
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP



TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NATH, DEVARSHI



Provider ID: 614511

Provider Gender: Male
License Number: C54157
NPI: 1275630618
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Bengali
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE



 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
 Phone: (760) 736-6767
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 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NATH, DEVARSHI



Provider ID: 614511
Provider Gender: Male
License Number: C54157
NPI: 1275630618
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Bengali
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE





 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
 Phone: (760) 736-6767
Fax: (760) 736-6744
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736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NATH, DEVARSHI

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Provider Gender: Male
License Number: C54157
NPI: 1275630618
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Bengali
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER


FAMILY PRACTICE


NATH, DEVARSHI

Provider ID: 614511
Provider Gender: Male
License Number: C54157

D2. Directorio de atención primaria

NPI: 1275630618

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Bengali

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

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American Sign Language (ASL):

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FAMILY PRACTICE


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FAMILY PRACTICE


NATH, DEVARSHI


Provider ID: 206426

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 Provider Language(s)
Spoken: Bengali


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

FAMILY PRACTICE

SAFI, ROOZCHEHR

Provider ID: 206426

Provider Gender: Female

License Number: A116562

NPI: 1659563641

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
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 Phone: (760) 736-6767

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 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SAFI, ROOZCHEHR


Provider ID: 206426

Provider Gender: Female

License Number: A116562

NPI: 1659563641

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

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736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

SAFI, ROOZCHEHR

Provider ID: 206426

Provider Gender: Female

License Number: A116562

NPI: 1659563641

Provider English Spoken: Y

Provider Language(s) Spoken: Farsi


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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FAMILY PRACTICE

SAFI, ROOZCHEHR

Provider ID: 206426

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Provider English Spoken: Y

Provider Language(s) Spoken: Farsi


Cultural Competency: N


Board Certified Specialty: No

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FAMILY PRACTICE

SAFI, ROOZCHEHR

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FAMILY PRACTICE

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

WILLIE, KADEN

Provider ID: 206426

Provider Gender: Male

License Number: 20A17306

NPI: 1790133767

Provider English Spoken: Y

Provider Language(s) Spoken: Portuguese


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

 *After Hours Phone: (760)*

D2. Directorio de atención primaria

736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

WILLIE, KADEN

Provider ID: 206426
Provider Gender: Male
License Number: 20A17306
NPI: 1790133767
Provider English Spoken: Y
Provider Language(s)
Spoken: Portuguese
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

150 VALPRED A RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760)
736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

WILLIE, KADEN

Provider ID: 206426
Provider Gender: Male
License Number: 20A17306
NPI: 1790133767

Provider English Spoken: Y N
Provider Language(s)
Spoken: Portuguese
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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SAN MARCOS, CA 92069
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Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
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Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

WILLIE, KADEN

Provider ID: 206426
Provider Gender: Male
License Number: 20A17306
NPI: 1790133767
Provider English Spoken: Y N
Provider Language(s)
Spoken: Portuguese
Cultural Competency: N

Board Certified Specialty: No
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Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

WILLIE, KADEN

Provider ID: 206426
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License Number: 20A17306
NPI: 1790133767
Provider English Spoken: Y
Provider Language(s)
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Cultural Competency: N
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FAMILY PRACTICE

WILLIE, KADEN

Provider ID: 206426
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NPI: 1790133767
Provider English Spoken: Y
Provider Language(s)
Spoken: Portuguese
Cultural Competency: N
Board Certified Specialty: No

D2. Directorio de atención primaria

IHP of Southern Cal-PHP
TRUECARE

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SAN MARCOS, CA 92069
Phone: (760) 736-6767
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736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

FQHC

TRUECARE,

Provider ID: 206426
NPI: 1245246917
Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
TRUECARE
150 VALPRED A RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760)
736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

FQHC

TRUECARE,

Provider ID: 206426

NPI: 1598484255

Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
TRUECARE
150 VALPRED A RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760)
736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

FQHC

TRUECARE,

Provider ID: 206426
NPI: 1245246917
Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
TRUECARE
150 VALPRED A RD
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Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760)
736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

FQHC

TRUECARE,

Provider ID: 206426
NPI: 1811617939
Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
TRUECARE
150 VALPRED A RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760)
736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER



Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

FQHC

TRUECARE,


Provider ID: 614511
NPI: 1811617939
Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
TRUECARE
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760)
736-6767

D2. Directorio de atención primaria

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC


TRUECARE,

Provider ID: 206426
NPI: 1598484255
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Cultural Competency: N
IHP of Southern Cal-PHP
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FQHC


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PROVIDER
Hours: M-F 8:00AM-5:00PM

D2. Directorio de atención primaria

FQHC

TRUECARE,

Provider ID: 614511


NPI: 1598484255

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

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N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

GENERAL PRACTICE


WITCZAK, IZABELA

Provider ID: 206426

Provider Gender: Female

License Number: A71311

NPI: 1184735201

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Polish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL


ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

GENERAL PRACTICE

WITCZAK, IZABELA

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NPI: 1184735201

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 Provider Language(s)
Spoken: Polish

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Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL


ENCINITAS


Board Certified Specialty: No

IHP of Southern Cal-PHP

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American Sign Language (ASL):
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PROVIDER

GENERAL PRACTICE

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Provider ID: 206426

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 Provider Language(s)
Spoken: Polish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS





Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE



 150 VALPRED A RD
SAN MARCOS, CA 92069





D2. Directorio de atención primaria

 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

GENERAL PRACTICE



WITCZAK, IZABELA

Provider ID: 206426
Provider Gender: Female
License Number: A71311
NPI: 1184735201
 Provider English Spoken: Y
 Provider Language(s) Spoken: Polish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
IHP of Southern Cal-PHP TRUEECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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 Accessibility: CONTACT PROVIDER

GENERAL PRACTICE



WITCZAK, IZABELA

Provider ID: 206426
Provider Gender: Female
License Number: A71311
NPI: 1184735201
 Provider English Spoken: Y
 Provider Language(s) Spoken: Polish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
IHP of Southern Cal-PHP TRUEECARE

 150 VALPRED A RD
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 Phone: (760) 736-6767
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GENERAL PRACTICE



WITCZAK, IZABELA





Provider ID: 206426
Provider Gender: Female
License Number: A71311
NPI: 1184735201
 Provider English Spoken: Y
 Provider Language(s) Spoken: Polish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No

IHP of Southern Cal-PHP TRUEECARE
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 206426
Provider Gender: Male
License Number: G74757
NPI: 1467485078
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP TRUEECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069
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INTERNAL MEDICINE

D2. Directorio de atención primaria


PONIACHIK, SAMUEL


Provider ID: 206426

Provider Gender: Male

License Number: G74757

NPI: 1467485078

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

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Min/Max Age: 0\None

American Sign Language (ASL):

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 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE


PONIACHIK, SAMUEL

Provider ID: 206426

Provider Gender: Male

License Number: G74757

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 Provider Language(s)
Spoken: Spanish


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Board Certified Specialty: No

IHP of Southern Cal-PHP

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PROVIDER

INTERNAL MEDICINE


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License Number: G74757

NPI: 1467485078

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 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

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INTERNAL MEDICINE

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Provider Gender: Male

License Number: G74757

NPI: 1467485078

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Cultural Competency: N


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PROVIDER

INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 206426

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Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

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 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY


MOSTOFIAN, EIMANEH

Provider ID: 206426

Provider Gender: Female

License Number: A97181

NPI: 1154477628

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Farsi, Spanish*


Cultural Competency: N


Hospital Affiliation: PALOMAR MEDICAL CENTER

Board Certified Specialty: No IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

 *After Hours Phone: (760) 736-6767*


 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


MOSTOFIAN, EIMANEH

Provider ID: 206426

Provider Gender: Female

License Number: A97181

NPI: 1154477628

 *Provider English Spoken: Y*

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Cultural Competency: N


Hospital Affiliation: PALOMAR MEDICAL CENTER

Board Certified Specialty: No IHP of Southern Cal-PHP

TRUECARE

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Medi-Cal Open Panel: Yes

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OBSTETRICS / GYNECOLOGY


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OBSTETRICS / GYNECOLOGY

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Cultural Competency: N


Hospital Affiliation: PALOMAR MEDICAL CENTER

Board Certified Specialty: No IHP of Southern Cal-PHP

TRUECARE

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

D2. Directorio de atención primaria

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

Provider ID: 206426

Provider Gender: Female

License Number: A97181

NPI: 1154477628

Provider English Spoken: Y


Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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Hours: M-F 8:00AM-5:00PM
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OBSTETRICS / GYNECOLOGY

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Provider Language(s)
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Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
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 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 206426

Provider Gender: Female

License Number: A93248

NPI: 1174703680

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 206426

Provider Gender: Female

License Number: A93248

NPI: 1174703680

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 206426

Provider Gender: Female

D2. Directorio de atención primaria

License Number: A93248

NPI: 1174703680

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 206426

Provider Gender: Female

License Number: A93248

NPI: 1174703680

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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Min/Max Age: 0\None

American Sign Language (ASL):

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 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 206426

Provider Gender: Female

License Number: A93248

NPI: 1174703680

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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PROVIDER

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 206426

Provider Gender: Female

License Number: A93248

NPI: 1174703680

Provider English Spoken: Y


Provider Language(s)
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Cultural Competency: N

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SCHWEIKERT, SUZANNE

Provider ID: 206426

Provider Gender: Female

License Number: A60958

NPI: 1477560142

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, TRI

D2. Directorio de atención primaria

CITY MEDICAL CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
PALOMAR MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

150 VALPRED A RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760)
736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY **SCHWEIKERT, SUZANNE**

Provider ID: 206426
Provider Gender: Female
License Number: A60958
NPI: 1477560142

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
PALOMAR MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
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Accessibility: CONTACT
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SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY **SCHWEIKERT, SUZANNE**

Provider ID: 206426
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Provider Language(s)
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Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, SHARP
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PALOMAR MEDICAL CENTER
Board Certified Specialty: No
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PROVIDER
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SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY **SCHWEIKERT, SUZANNE**

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NPI: 1477560142

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Provider Language(s)
Spoken: Spanish

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Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
PALOMAR MEDICAL CENTER
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Min/Max Age: 0\None
American Sign Language (ASL):
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Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

D2. Directorio de atención primaria

OBSTETRICS / GYNECOLOGY

SCHWEIKERT, SUZANNE

Provider ID: 206426

Provider Gender: Female

License Number: A60958

NPI: 1477560142

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, TRI

CITY MEDICAL CTR, SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,

PALOMAR MEDICAL CENTER

Board Certified Specialty: No

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SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

SCHWEIKERT, SUZANNE

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License Number: A60958

NPI: 1477560142

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Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, TRI

CITY MEDICAL CTR, SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,

PALOMAR MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP

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Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

PEDIATRICS

MALHOTRA, ARATI

Provider ID: 206426

Provider Gender: Female

License Number: A63903

NPI: 1215135306

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

MALHOTRA, ARATI

Provider ID: 206426

Provider Gender: Female

License Number: A63903

NPI: 1215135306

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

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After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):


N



Accessibility: CONTACT

D2. Directorio de atención primaria


<p><i>PROVIDER</i></p> <p><u>PEDIATRICS</u></p> <p>MALHOTRA, ARATI</p> <p><i>Provider ID: 206426</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: A63903</i></p> <p><i>NPI: 1215135306</i></p> <p><input type="checkbox"/> <i>Provider English Spoken: Y</i></p> <p><input type="checkbox"/> <i>Provider Language(s) Spoken: Hindi, Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER</i></p> <p><i>Board Certified Specialty: No IHP of Southern Cal-PHP TRUECARE</i></p> <p><input type="checkbox"/> 150 VALPRED A RD SAN MARCOS, CA 92069</p> <p><input type="checkbox"/> <i>Phone: (760) 736-6767</i></p> <p><input type="checkbox"/> <i>After Hours Phone: (760) 736-6767</i></p> <p><input type="checkbox"/> <i>Website: www.ihpsocal.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p><input type="checkbox"/> <i>Accessibility: CONTACT PROVIDER</i></p>	<p><i>Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER</i></p> <p><i>Board Certified Specialty: No IHP of Southern Cal-PHP TRUECARE</i></p> <p><input type="checkbox"/> 150 VALPRED A RD SAN MARCOS, CA 92069</p> <p><input type="checkbox"/> <i>Phone: (760) 736-6767</i></p> <p><input type="checkbox"/> <i>After Hours Phone: (760) 736-6767</i></p> <p><input type="checkbox"/> <i>Website: www.ihpsocal.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p><input type="checkbox"/> <i>Accessibility: CONTACT PROVIDER</i></p> <p><u>PEDIATRICS</u></p> <p>MALHOTRA, ARATI</p> <p><i>Provider ID: 206426</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: A63903</i></p> <p><i>NPI: 1215135306</i></p> <p><input type="checkbox"/> <i>Provider English Spoken: Y</i></p> <p><input type="checkbox"/> <i>Provider Language(s) Spoken: Hindi, Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER</i></p> <p><i>Board Certified Specialty: No IHP of Southern Cal-PHP TRUECARE</i></p> <p><input type="checkbox"/> 150 VALPRED A RD SAN MARCOS, CA 92069</p> <p><input type="checkbox"/> <i>Phone: (760) 736-6767</i></p> <p><input type="checkbox"/> <i>After Hours Phone: (760) 736-6767</i></p> <p><input type="checkbox"/> <i>Website: www.ihpsocal.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p><input type="checkbox"/> <i>Accessibility: CONTACT PROVIDER</i></p>	<p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p><input type="checkbox"/> <i>Accessibility: CONTACT PROVIDER</i></p> <p><u>PEDIATRICS</u></p> <p>MALHOTRA, ARATI</p> <p><i>Provider ID: 206426</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: A63903</i></p> <p><i>NPI: 1215135306</i></p> <p><input type="checkbox"/> <i>Provider English Spoken: Y</i></p> <p><input type="checkbox"/> <i>Provider Language(s) Spoken: Hindi, Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER</i></p> <p><i>Board Certified Specialty: No IHP of Southern Cal-PHP TRUECARE</i></p> <p><input type="checkbox"/> 150 VALPRED A RD SAN MARCOS, CA 92069</p> <p><input type="checkbox"/> <i>Phone: (760) 736-6767</i></p> <p><input type="checkbox"/> <i>After Hours Phone: (760) 736-6767</i></p> <p><input type="checkbox"/> <i>Website: www.ihpsocal.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p><input type="checkbox"/> <i>Accessibility: CONTACT PROVIDER</i></p> <p><u>PEDIATRICS</u></p> <p>MALHOTRA, ARATI</p> <p><i>Provider ID: 110242</i></p> <p><i>Provider Gender: Female</i></p> <p><i>NPI: 1215135306</i></p> <p><input type="checkbox"/> <i>Provider English Spoken: Y</i></p>
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D2. Directorio de atención primaria


 *Provider Language(s)*
Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
Rady Childrens Health Network
ARATI MALHOTRA

 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
Fax: (760) 566-1501

 *After Hours Phone: (760)*
736-6767

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-6:00PM


PEDIATRICS


MATIAS, JULIE

Provider ID: 661065

Provider Gender: Female

NPI: 1083094510

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

Rady Childrens Health Network


JULIE M MATIAS

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

Fax: (760) 736-6744

 *After Hours Phone: (760)*
736-6767

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M 8:00AM-6:00PM

TU 8:00AM-5:00PM

W-F 8:00AM-6:00PM

SA 8:00AM-5:00PM


PEDIATRICS

MONAHAN, CAROLYN

Provider ID: 50425

Provider Gender: Female

NPI: 1619973666

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER


Board Certified Specialty: Yes

Rady Childrens Health Network

CAROLYN O MONAHAN


 1582 W SAN MARCOS BLVD
STE 203

SAN MARCOS, CA 92078

 *Phone: (760) 744-6710*

Fax: (760) 744-6156

 *After Hours Phone: (760)*
744-6710

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

POSADAS, EMERITO


Provider ID: 206426

Provider Gender: Male

License Number: A48980

NPI: 1720093198

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR


MEDICAL CENTER


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

 *After Hours Phone: (760)*
736-6767

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER

PEDIATRICS

POSADAS, EMERITO

Provider ID: 206426

Provider Gender: Male

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NPI: 1720093198

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY



D2. Directorio de atención primaria

MEDICAL CTR, PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE



 150 VALPRED A RD
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

PEDIATRICS

POSADAS, EMERITO



Provider ID: 206426
Provider Gender: Male
License Number: A48980
NPI: 1720093198
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
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Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
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IHP of Southern Cal-PHP
TRUECARE





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Min/Max Age: 0\None

American Sign Language (ASL):  N
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PROVIDER

PEDIATRICS


POSADAS, EMERITO


Provider ID: 206426
Provider Gender: Male
License Number: A48980
NPI: 1720093198
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
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PEDIATRICS

POSADAS, EMERITO





Provider ID: 206426
Provider Gender: Male
License Number: A48980
NPI: 1720093198
 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE




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American Sign Language (ASL):
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PEDIATRICS

POSADAS, EMERITO








Provider ID: 206426
Provider Gender: Male
License Number: A48980
NPI: 1720093198
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767

D2. Directorio de atención primaria

 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER





PEDIATRICS


POSADAS, EMERITO

Provider ID: 303661
Provider Gender: Male
NPI: 1720093198
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified Specialty: No
Rady Childrens Health Network
EMERITO D POSADAS
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 566-1501
 After Hours Phone: (760) 736-6767
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-6:00PM

PEDIATRICS



QUINTERO, CAROLYN

Provider ID: 614767
Provider Gender: Female
NPI: 1023033156
 Provider English Spoken: Y
 Provider Language(s) Spoken: Afar, Spanish
Cultural Competency: N
Board Certified Specialty: No
Rady Childrens Health Network
CAROLYN S QUINTERO
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 736-6744




 After Hours Phone: (760) 736-6767
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-5:00PM

PEDIATRICS

SEBIANE, MARIA







Provider ID: 206426
Provider Gender: Female
License Number: G71182
NPI: 1740295229
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

SEBIANE, MARIA

Provider ID: 206426
Provider Gender: Female
License Number: G71182
NPI: 1740295229
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS


SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER

Board Certified Specialty: No IHP of Southern Cal-PHP

TRUECARE

 *150 VALPRED A RD
SAN MARCOS, CA 92069*

 *Phone: (760) 736-6767*

 *After Hours Phone: (760) 736-6767*


 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS


SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 *150 VALPRED A RD
SAN MARCOS, CA 92069*

 *Phone: (760) 736-6767*

 *After Hours Phone: (760) 736-6767*

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

PEDIATRICS


SEBIANE, MARIA


Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

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 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

PEDIATRICS


SEBIANE, MARIA


Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 *150 VALPRED A RD
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 *Phone: (760) 736-6767*


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 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

D2. Directorio de atención primaria

PEDIATRICS

SOCHA, TRACI

Provider ID: 428861

Provider Gender: Female

NPI: 1669478616

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

Rady Childrens Health Network

TRACI E SOCHA

1582 W SAN MARCOS BLVD
STE 203

SAN MARCOS, CA 92078

Phone: (760) 744-6710

Fax: (760) 744-6156

After Hours Phone: (760)
744-6710

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:45PM

PHYSICIANS ASSISTANT

BERNARDO, RACHELLE

Provider ID: 614511

Provider Gender: Female

License Number: PA17718

NPI: 1821237678

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

BERNARDO, RACHELLE

Provider ID: 614511

Provider Gender: Female

License Number: PA17718

NPI: 1821237678

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

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Provider Language(s)
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Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

1595 GRAND AVE STE 106
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Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

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NPI: 1821237678

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

D2. Directorio de atención primaria

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

1595 GRAND AVE STE 106
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Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

BERNARDO, RACHELLE

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Provider Gender: Female

License Number: PA17718

NPI: 1821237678

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP

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Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

PHYSICIANS ASSISTANT

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Provider ID: 614511

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Provider Language(s)
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Cultural Competency: N

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IHP of Southern Cal-PHP

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Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 206426

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP
TRUECARE

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 206426

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

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Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

PHYSICIANS ASSISTANT

D2. Directorio de atención primaria

CHISWICK, GARY

Provider ID: 206426

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767


 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 206426

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

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736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 206426

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes

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American Sign Language (ASL):
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PHYSICIANS ASSISTANT

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Provider ID: 206426

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

KOSEL, MATTHEW

Provider ID: 206426

Provider Gender: Male

License Number: PA17101


NPI: 1316947302


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

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 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

D2. Directorio de atención primaria

N
 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT


KOSEL, MATTHEW

Provider ID: 206426


Provider Gender: Male


License Number: PA17101


NPI: 1316947302

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
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 *Phone: (760) 736-6767*

 *After Hours Phone: (760) 736-6767*

 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT


KOSEL, MATTHEW

Provider ID: 206426


Provider Gender: Male


License Number: PA17101


NPI: 1316947302

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT


KOSEL, MATTHEW

Provider ID: 206426


Provider Gender: Male


License Number: PA17101


NPI: 1316947302

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Board Certified Specialty: No
IHP of Southern Cal-PHP
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 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

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 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT


KOSEL, MATTHEW

Provider ID: 206426


Provider Gender: Male


License Number: PA17101


NPI: 1316947302

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069


 *Phone: (760) 736-6767*

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 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

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KOSEL, MATTHEW

Provider ID: 206426


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Cultural Competency: N
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IHP of Southern Cal-PHP
TRUECARE

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SAN MARCOS, CA 92069


 *Phone: (760) 736-6767*

 *After Hours Phone: (760) 736-6767*

 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

D2. Directorio de atención primaria

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 206426

Provider Gender: Female

License Number: PA53036


NPI: 1922471192


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 206426

Provider Gender: Female

License Number: PA53036


NPI: 1922471192

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
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 Phone: (760) 736-6767

 After Hours Phone: (760)

736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 206426

Provider Gender: Female

License Number: PA53036


NPI: 1922471192


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

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PHYSICIANS ASSISTANT


RUSSO, KRISTA

Provider ID: 206426

Provider Gender: Female

License Number: PA53036


NPI: 1922471192


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

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736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

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PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 206426

Provider Gender: Female

License Number: PA53036


NPI: 1922471192


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

D2. Directorio de atención primaria

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 206426

Provider Gender: Female

License Number: PA53036


NPI: 1922471192


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
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 Phone: (760) 736-6767

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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT

SPENCE, JAMIE

Provider ID: 206426

Provider Gender: Female

License Number: PA21723

NPI: 1518133032

Provider English Spoken: Y

Provider Language(s)


Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069


 Phone: (760) 736-6767

 After Hours Phone: (760)
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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

SPENCE, JAMIE

Provider ID: 206426

Provider Gender: Female

License Number: PA21723

NPI: 1518133032

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

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American Sign Language (ASL):
N

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PROVIDER

PHYSICIANS ASSISTANT

SPENCE, JAMIE

Provider ID: 206426

Provider Gender: Female

License Number: PA21723

NPI: 1518133032

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

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Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

SPENCE, JAMIE

Provider ID: 206426

Provider Gender: Female

License Number: PA21723

NPI: 1518133032

Provider English Spoken: Y





Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP



TRUECARE






D2. Directorio de atención primaria

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

SPENCE, JAMIE



Provider ID: 206426
Provider Gender: Female
License Number: PA21723
NPI: 1518133032
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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 Website: www.ihpsocal.org
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N
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PROVIDER

PHYSICIANS ASSISTANT

SPENCE, JAMIE



Provider ID: 206426


Provider Gender: Female
License Number: PA21723
NPI: 1518133032
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE


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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH



Provider ID: 206426
Provider Gender: Female
License Number: PA51867
NPI: 1295147387
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE






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SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH

Provider ID: 206426
Provider Gender: Female
License Number: PA51867
NPI: 1295147387
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH

Provider ID: 206426
Provider Gender: Female

D2. Directorio de atención primaria

License Number: PA51867

NPI: 1295147387

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

150 VALPRED A RD

SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH

Provider ID: 206426

Provider Gender: Female

License Number: PA51867

NPI: 1295147387

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

150 VALPRED A RD

SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH

Provider ID: 206426

Provider Gender: Female

License Number: PA51867

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Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No

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Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH

Provider ID: 206426

Provider Gender: Female

License Number: PA51867

NPI: 1295147387

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

PODIATRIST

DASGUPTA, DEBORSHI

Provider ID: 614511

Provider Gender: Male

License Number: DPM5542

NPI: 1598129223

Provider English Spoken: Y

Provider Language(s)
Spoken: Bengali, Hindi,
Spanish

Cultural Competency: N

Hospital Affiliation: CLOVIS

COMMUNITY HOSPITAL,

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,


FRESNO HEART AND


D2. Directorio de atención primaria


SURGICAL HOSPITAL

*Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE*

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078


 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PODIATRIST

DASGUPTA, DEBORSHI

Provider ID: 614511

Provider Gender: Male

License Number: DPM5542

NPI: 1598129223

Provider English Spoken: Y

Provider Language(s)
Spoken: Bengali, Hindi,
Spanish

Cultural Competency: N


Hospital Affiliation: CLOVIS

COMMUNITY HOSPITAL,
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
FRESNO HEART AND
SURGICAL HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PODIATRIST

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Provider Language(s)
Spoken: Bengali, Hindi,
Spanish

Cultural Competency: N


Hospital Affiliation: CLOVIS


COMMUNITY HOSPITAL,
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
FRESNO HEART AND
SURGICAL HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

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 Website: www.ihpsocal.org
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Min/Max Age: 0\None

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

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Provider Gender: Male

License Number: DPM5542

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Provider English Spoken: Y

Provider Language(s)
Spoken: Bengali, Hindi,
Spanish

Cultural Competency: N


Hospital Affiliation: CLOVIS


COMMUNITY HOSPITAL,
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
FRESNO HEART AND
SURGICAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

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 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PODIATRIST

DASGUPTA, DEBORSHI

Provider ID: 614511

D2. Directorio de atención primaria

Provider Gender: Male
License Number: DPM5542
NPI: 1598129223

Provider English Spoken: Y
 Provider Language(s)
Spoken: Bengali, Hindi,
Spanish

Cultural Competency: N
Hospital Affiliation: CLOVIS
COMMUNITY HOSPITAL,
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
FRESNO HEART AND
SURGICAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PODIATRIST

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Provider ID: 614511
Provider Gender: Male
License Number: DPM5542
NPI: 1598129223

Provider English Spoken: Y
 Provider Language(s)
Spoken: Bengali, Hindi,
Spanish

Cultural Competency: N
Hospital Affiliation: CLOVIS
COMMUNITY HOSPITAL,
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
FRESNO HEART AND
SURGICAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
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Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

SAN YSIDRO

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 206292
Provider Gender: Female
License Number: C52581
NPI: 1053300251

Provider English Spoken: Y
 Provider Language(s)
Spoken: Cambodian, Hindi,
Spanish, Telugu

Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
/clinics/san-ysidro-health
-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 206292
Provider Gender: Female
License Number: C52581
NPI: 1053300251

Provider English Spoken: Y
 Provider Language(s)
Spoken: Cambodian, Hindi,
Spanish, Telugu

Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
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YSIDRO HEALTH CENTER

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662-4100
 Website: www.syhealth.org
/clinics/san-ysidro-health
-center

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 206292

N

 Accessibility: CONTACT PROVIDER

CARDIOVASCULAR DISEASE


PONCE, SONIA

Provider ID: 206292

Provider Gender: Female

License Number: A145008

NPI: 1164659033

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


CARDIOVASCULAR DISEASE

PONCE, SONIA

Provider Gender: Female

License Number: A145008

NPI: 1164659033

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


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YSIDRO HEALTH CENTER

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 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

CELIZ, ADRIANA

Provider ID: 227469

Provider Gender: Female

License Number: NP95004315

NPI: 1972956514

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 3364 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

CELIZ, ADRIANA

Provider ID: 227469

Provider Gender: Female

License Number: NP95004315

NPI: 1972956514

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS



 3364 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


D2. Directorio de atención primaria




 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER



CERTIFIED NURSE

PRACTITIONER

CHAUSSE CASTRO, EKATERINA

Provider ID: 227469
Provider Gender: Female
License Number: NP95018617
NPI: 1154040418
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100


 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE



PRACTITIONER

CHAUSSE CASTRO,

EKATERINA

Provider ID: 227469
Provider Gender: Female
License Number: NP95018617
NPI: 1154040418
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS



 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100





 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

GARCIA, TEDAYSHIA



Provider ID: 206292
Provider Gender: Female
License Number: NP95003355
NPI: 1659730778
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

GARCIA, TEDAYSHIA

Provider ID: 206292
Provider Gender: Female
License Number: NP95003355
NPI: 1659730778
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

GUADARRAMA, IGNACIO

Provider ID: 227469

Provider Gender: Male

License Number: NP95003671

NPI: 1821331174

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 *3364 BEYER BLVD
SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*


 *Website: <https://www.syhealth.org/locations>*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

GUADARRAMA, IGNACIO

Provider ID: 227469

Provider Gender: Male

License Number: NP95003671

NPI: 1821331174

Provider English Spoken: Y

Provider Language(s)

*Spoken: Spanish
Cultural Competency: N*


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 *3364 BEYER BLVD
SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: <https://www.syhealth.org/locations>*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

HACINAS, REYNALDO

Provider ID: 206292

Provider Gender: Male

License Number: NP95003024

NPI: 1215304860

Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 *4004 BEYER BLVD
SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org/clinics/san-ysidro-health-center*

- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

HACINAS, REYNALDO

Provider ID: 206292

Provider Gender: Male

License Number: NP95003024

NPI: 1215304860

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 *4004 BEYER BLVD
SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org/clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA

Provider ID: 206292

Provider Gender: Female

License Number: NP12112

NPI: 1114957289

D2. Directorio de atención primaria

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

IBARRA, MARTHA

Provider ID: 206292

Provider Gender: Female

License Number: NP12112

NPI: 1114957289

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

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662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
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Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

IBARRA, MARTHA

Provider ID: 227469

Provider Gender: Female

License Number: NP12112

NPI: 1114957289

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

3364 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

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Provider ID: 227469

Provider Gender: Female

License Number: NP12112

NPI: 1114957289

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

3364 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 206292

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

KANTAS, PARIS

Provider ID: 206292

Provider Gender: Male


License Number: NP18661


NPI: 1114329612


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

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SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

KANTAS, PARIS

Provider Gender: Male

License Number: NP18661

NPI: 1114329612


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR


Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

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 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

ORDINANZA, MYLENE

Provider ID: 227469

Provider Gender: Female

License Number: NP95019995

NPI: 1265019061

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

ORDINANZA, MYLENE

Provider ID: 227469

Provider Gender: Female

License Number: NP95019995


NPI: 1265019061

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

D2. Directorio de atención primaria

N


 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

PITTMAN, LILIANA

Provider ID: 227469
Provider Gender: Female
License Number: NP95017732
NPI: 1326599002
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
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 *Phone: (619) 662-4100*
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 *Website: <https://www.syhealth.org/locations>*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

PITTMAN, LILIANA

Provider ID: 227469
Provider Gender: Female
License Number: NP95017732
NPI: 1326599002
 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

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 *Website: <https://www.syhealth.org/locations>*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

SANCHEZ, MYRNA

Provider ID: 227469
Provider Gender: Female
License Number: NP95003721
NPI: 1548614506
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS


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 *After Hours Phone: (619) 662-4100*
 *Website: <https://www.syhealth.org/locations>*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

SANCHEZ, MYRNA

Provider ID: 227469
Provider Gender: Female
License Number: NP95003721
NPI: 1548614506
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
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 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: <https://www.syhealth.org/locations>*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

VAZQUEZ-ERLBECK, MARTHA

Provider ID: 227469
Provider Gender: Female
License Number: NP95001960
NPI: 1669865960
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N

D2. Directorio de atención primaria

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

VAZQUEZ-ERLBECK, MARTHA

Provider ID: 227469
Provider Gender: Female
License Number: NP95001960
NPI: 1669865960

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

OCHOA, RAUL

Provider ID: 206292
Provider Gender: Male
License Number: DC33693
NPI: 1518401827

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

OCHOA, RAUL

Provider ID: 206292
Provider Gender: Male
License Number: DC33693
NPI: 1518401827

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

CRUZ, MICHAEL

Provider ID: 206292
Provider Gender: Male
License Number: A138772
NPI: 1265851133


Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100

D2. Directorio de atención primaria


 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES


CRUZ, MICHAEL

Provider ID: 206292

Provider Gender: Male

License Number: A138772

NPI: 1265851133

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SHARP


MEMORIAL HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE

ALGHAMDI, ASMA

Provider ID: 227469

Provider Gender: Female

License Number: A167529


NPI: 1316310840


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ALGHAMDI, ASMA

Provider ID: 227469

Provider Gender: Female

License Number: A167529

NPI: 1316310840


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


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662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 227411

Provider Gender: Male

License Number: A157505

NPI: 1588197826

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY


HOSPITAL, PARADISE VALLEY
HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD

HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center


Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 227411

Provider Gender: Male

License Number: A157505

NPI: 1588197826

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, PARADISE VALLEY

HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD


HEALTH CTR

 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinic/s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 206292

Provider Gender: Male

License Number: A157505

NPI: 1588197826

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, PARADISE VALLEY

HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 206292

Provider Gender: Male

License Number: A157505

NPI: 1588197826

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, PARADISE VALLEY

HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ARRIETA, NOEMI

Provider ID: 206292

Provider Gender: Female

License Number: 20A11153

NPI: 1912223496

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

D2. Directorio de atención primaria

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

ARRIETA, NOEMI

Provider ID: 206292

Provider Gender: Female

License Number: 20A11153

NPI: 1912223496

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

BAUM, PETER

Provider ID: 227411

Provider Gender: Male

License Number: 20A14949

NPI: 1174919971

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

MATERNAL AND CHILD

HEALTH CTR

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE

BAUM, PETER

Provider ID: 227411

Provider Gender: Male

License Number: 20A14949

NPI: 1174919971

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

MATERNAL AND CHILD

HEALTH CTR

4050 BEYER BLVD
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Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE

BORSAN, COSMIN

Provider ID: 206292

Provider Gender: Male

License Number: 20A17643

NPI: 1679060255


Provider English Spoken: Y

Provider Language(s)
Spoken: Romanian

D2. Directorio de atención primaria



Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

BORSAN, COSMIN

Provider ID: 206292
Provider Gender: Male
License Number: 20A17643
NPI: 1679060255
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Romanian
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org

/clinics/san-ysidro-health
-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM





FAMILY PRACTICE

CAMPOS, MELISSA

Provider ID: 227411
Provider Gender: Female
License Number: A138474
NPI: 1427475318
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):



N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE





CAMPOS, MELISSA

Provider ID: 227411
Provider Gender: Female
License Number: A138474
NPI: 1427475318

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
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 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CARRIEDO-CENICEROS,

MARIA

D2. Directorio de atención primaria

Provider ID: 206292

Provider Gender: Female

License Number: A78373

NPI: 1295746618

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)

662-4100

 Website: [www.syhealth.org](http://www.syhealth.org/clinics/san-ysidro-health-center)

/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CARRIEDO-CENICEROS,

MARIA

Provider ID: 206292

Provider Gender: Female

License Number: A78373

NPI: 1295746618

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)

662-4100

 Website: [www.syhealth.org](http://www.syhealth.org/clinics/san-ysidro-health-center)


/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CASTILLO, STEPHANIE

Provider ID: 206292

Provider Gender: Female

License Number: A159673

NPI: 1902330723

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

 Website: [www.syhealth.org](http://www.syhealth.org/clinics/san-ysidro-health-center)

/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

CASTILLO, STEPHANIE

Provider ID: 206292

Provider Gender: Female

License Number: A159673

NPI: 1902330723

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP

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/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

CEVALLOS, JAMES

Provider ID: 206292


Provider Gender: Male

License Number: A55469



NPI: 1720181829

Provider English Spoken: Y


D2. Directorio de atención primaria

 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA*

*Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER*

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 *After Hours Phone: (619)
662-4100*

 *Website: www.syhealth.org
/clinics/san-ysidro-health
-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE


CEVALLOS, JAMES


Provider ID: 206292

Provider Gender: Male

License Number: A55469

NPI: 1720181829

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N

*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA*


*Board Certified Specialty: No
IHP of Southern Cal-PHP*


*SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER*

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SAN YSIDRO, CA 92173

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/clinics/san-ysidro-health
-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE


CORONADO, MYRNA

Provider ID: 227411

Provider Gender: Female

License Number: A112627

NPI: 1710147566

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

*SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR*

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

 *Website: syhealth.org/clinic
s/maternal-child-health-c
enter*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE

CORONADO, MYRNA

Provider ID: 206292

Provider Gender: Female

License Number: A112627

NPI: 1710147566

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

*SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER*

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

 *Website: www.syhealth.org
/clinics/san-ysidro-health
-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE

CORONADO, MYRNA








Provider ID: 227411

Provider Gender: Female

License Number: A112627






NPI: 1710147566



D2. Directorio de atención primaria

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE








CORONADO, MYRNA

Provider ID: 206292
Provider Gender: Female
License Number: A112627
NPI: 1710147566
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)

662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER








FAMILY PRACTICE

DALUGDUGAN, ESTHER

Provider ID: 206292
Provider Gender: Female
License Number: A112511
NPI: 1962662718
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


FAMILY PRACTICE

DALUGDUGAN, ESTHER

Provider ID: 206292
Provider Gender: Female
License Number: A112511
NPI: 1962662718
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER





FAMILY PRACTICE

DAVIS, CHARLES

Provider ID: 206292
Provider Gender: Male
License Number: G41219
NPI: 1194840231
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

D2. Directorio de atención primaria


SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

DAVIS, CHARLES

Provider ID: 206292

Provider Gender: Male


License Number: G41219



NPI: 1194840231


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE


ESTRADA, JOHANNA

Provider ID: 206292

Provider Gender: Female

License Number: A127188

NPI: 1255698155

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS GREEN

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL



Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

ESTRADA, JOHANNA

Provider ID: 206292

Provider Gender: Female

License Number: A127188

NPI: 1255698155

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS GREEN

HOSPITAL, SCRIPPS


MEMORIAL HOSPITAL



Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

HEINRICI, ALEKA



Provider ID: 206292

Provider Gender: Female

License Number: A125329

NPI: 1780979120

D2. Directorio de atención primaria


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE



HEINRICI, ALEKA

Provider ID: 206292

Provider Gender: Female

License Number: A125329

NPI: 1780979120


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE



HENDRIX, JEFFERSON

Provider ID: 227469

Provider Gender: Male

License Number: A32571

NPI: 1235142738


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE



HENDRIX, JEFFERSON

Provider ID: 227469

Provider Gender: Male

License Number: A32571

NPI: 1235142738


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

HERNANDEZ, RALPH

Provider ID: 227469

Provider Gender: Male






License Number: C42207

NPI: 1285782151

 Provider English Spoken: Y
 Provider Language(s)



D2. Directorio de atención primaria

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS


 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

HERNANDEZ, RALPH



Provider ID: 227469
Provider Gender: Male
License Number: C42207
NPI: 1285782151
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

HERNANDEZ, RALPH








Provider ID: 206292
Provider Gender: Male
License Number: C42207
NPI: 1285782151
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE




HERNANDEZ, RALPH

Provider ID: 206292
Provider Gender: Male
License Number: C42207
NPI: 1285782151



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


FAMILY PRACTICE

KAUFHOLD, ANNE

Provider ID: 206292
Provider Gender: Female
License Number: A88893
NPI: 1164508073
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173

D2. Directorio de atención primaria


 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


KAUFHOLD, ANNE

Provider ID: 206292

Provider Gender: Female

License Number: A88893

NPI: 1164508073

 Provider English Spoken: Y

 Provider Language(s) Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


LARA, LESLEY

Provider ID: 206292

Provider Gender: Female

License Number: A173435

NPI: 1184112682

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: SU 10:00AM-4:00PM

M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

FAMILY PRACTICE

LARA, LESLEY

Provider ID: 206292

Provider Gender: Female

License Number: A173435

NPI: 1184112682

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: SU 10:00AM-4:00PM

M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

FAMILY PRACTICE

LEE, JOSEPH

Provider ID: 206292

Provider Gender: Male

License Number: A164201

NPI: 1417480948

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: ST

ELIZABETH HOSP

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD

D2. Directorio de atención primaria

SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100
Fax: (619) 205-6341
🕒 After Hours Phone: (619)
662-4100
🌐 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

LEE, JOSEPH

Provider ID: 206292

Provider Gender: Male

License Number: A164201

NPI: 1417480948

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ST

ELIZABETH HOSP

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100
Fax: (619) 205-6341

🕒 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1417480948
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

LEE, JOSEPH

Provider ID: 227469

Provider Gender: Male

License Number: A164201

NPI: 1417480948

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ST

ELIZABETH HOSP

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

📍 3364 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619)
662-4100

🌐 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LEE, JOSEPH

Provider ID: 227469

Provider Gender: Male

License Number: A164201

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ST

ELIZABETH HOSP

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

📍 3364 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619)
662-4100

🌐 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LEPEZ, DAVID

Provider ID: 206292

Provider Gender: Male

License Number: A130348

NPI: 1205196029

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N





















Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

D2. Directorio de atención primaria

<p> 4004 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p>	<p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p>	<p><u>FAMILY PRACTICE</u> LEUTE, ERIC Provider ID: 206292 Provider Gender: Male License Number: A80832 NPI: 1720171507</p>
<p> Website: www.syhealth.org/clinics/san-ysidro-health-center</p> <p>Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p>	<p><u>FAMILY PRACTICE</u> LEUTE, ERIC Provider ID: 206292 Provider Gender: Male License Number: A80832 NPI: 1720171507</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA</p>	<p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p>
<p><u>FAMILY PRACTICE</u> LEPEZ, DAVID Provider ID: 206292 Provider Gender: Male License Number: A130348 NPI: 1205196029</p>	<p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA</p>	<p>Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p>
<p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL CHULA VISTA</p> <p>Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p>	<p>Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p>	<p> 4004 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p> Website: www.syhealth.org/clinics/san-ysidro-health-center</p> <p>Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N</p>
<p> 4004 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p>	<p> 4004 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p> Website: www.syhealth.org/clinics/san-ysidro-health-center</p> <p>Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N</p>	<p> Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:30PM SA 8:30AM-2:00PM</p>
<p> Website: www.syhealth.org/clinics/san-ysidro-health-center</p> <p>Medi-Cal Open Panel: Yes Min/Max Age: 0\None</p>	<p> Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:30PM SA 8:30AM-2:00PM</p>	<p><u>FAMILY PRACTICE</u> MOYA, MARY Provider ID: 206292 Provider Gender: Female License Number: A80185</p>

D2. Directorio de atención primaria

NPI: 1093844417



Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MOYA, MARY

Provider ID: 206292

Provider Gender: Female

License Number: A80185

NPI: 1093844417


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish



Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NAVARRO, VANESSA MARIA

Provider ID: 227469

Provider Gender: Female

License Number: A113624

NPI: 1952563421





Provider English Spoken: Y
 Provider Language(s)
Spoken: Filipino, Spanish,
Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NAVARRO, VANESSA MARIA

Provider ID: 227469

Provider Gender: Female

License Number: A113624

NPI: 1952563421



Provider English Spoken: Y
 Provider Language(s)
Spoken: Filipino, Spanish,
Tagalog


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
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 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

NGUYEN, CARIE

Provider ID: 206292

Provider Gender: Female

License Number: A106103


NPI: 1174781132


 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL


Board Certified Specialty: No IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 *4004 BEYER BLVD
SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org/clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE


NGUYEN, CARIE

Provider ID: 206292

Provider Gender: Female

License Number: A106103

NPI: 1174781132

 *Provider English Spoken: Y*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL


Board Certified Specialty: No IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 *4004 BEYER BLVD
SAN YSIDRO, CA 92173*

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 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org/clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

NIKZAD, JASON

Provider ID: 206292

Provider Gender: Male

License Number: 20A12653

NPI: 1508121674

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Farsi, Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL


Board Certified Specialty: No IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 *4004 BEYER BLVD*

SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*


 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org/clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

NIKZAD, JASON

Provider ID: 206292

Provider Gender: Male

License Number: 20A12653

NPI: 1508121674

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Farsi, Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL


Board Certified Specialty: No IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

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 *Phone: (619) 662-4100*

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 *Website: www.syhealth.org/clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

D2. Directorio de atención primaria

American Sign Language (ASL): **ORTEGA, LUIS**

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE


ORTEGA, LUIS

Provider ID: 206292

Provider Gender: Male

License Number: A180886

NPI: 1558924936

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM


FAMILY PRACTICE

Provider ID: 206292

Provider Gender: Male

License Number: A180886

NPI: 1558924936

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
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 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE


ORTIZ, KENNETH

Provider ID: 206292

Provider Gender: Male

License Number: A156607

NPI: 1356761571

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ORTIZ, KENNETH

Provider ID: 206292

Provider Gender: Male

License Number: A156607

NPI: 1356761571

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

D2. Directorio de atención primaria

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ORTIZ ILIZALITURRI, ANA

Provider ID: 206292

Provider Gender: Female

License Number: A178949

NPI: 1316407026

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ORTIZ ILIZALITURRI, ANA

Provider ID: 227411

Provider Gender: Female

License Number: A178949

NPI: 1316407026

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD

HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE

ORTIZ ILIZALITURRI, ANA

Provider ID: 206292

Provider Gender: Female

License Number: A178949

NPI: 1316407026

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ORTIZ ILIZALITURRI, ANA

Provider ID: 227411

Provider Gender: Female

License Number: A178949

NPI: 1316407026

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish





Cultural Competency: N

Hospital Affiliation: SCRIPPS

D2. Directorio de atención primaria

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE


RAJAIPOUR, NEGIN

Provider ID: 206292

Provider Gender: Female

License Number: A145480

NPI: 1508286709

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Persian

Cultural Competency: N

Hospital Affiliation: CHULA
VISTA COMM HOSP

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE


RAJAIPOUR, NEGIN

Provider ID: 206292

Provider Gender: Female

License Number: A145480

NPI: 1508286709

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi, Persian



Cultural Competency: N


Hospital Affiliation: CHULA
VISTA COMM HOSP

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

RAJAIPOUR, NEGIN

Provider ID: 227469

Provider Gender: Female

License Number: A145480

NPI: 1508286709

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Persian



Cultural Competency: N

Hospital Affiliation: CHULA
VISTA COMM HOSP

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RAJAIPOUR, NEGIN

Provider ID: 227469

Provider Gender: Female

D2. Directorio de atención primaria

License Number: A145480
NPI: 1508286709
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Farsi, Persian
Cultural Competency: N
Hospital Affiliation: CHULA
VISTA COMM HOSP
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
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662-4100
🌐 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RITTER, STEVEN

Provider ID: 206292
Provider Gender: Male
License Number: 20A7435
NPI: 1356556021
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100
🌐 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RITTER, STEVEN

Provider ID: 206292
Provider Gender: Male
License Number: 20A7435
NPI: 1356556021
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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YSIDRO HEALTH CENTER

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ROJAS, STEVEN

Provider ID: 206292

Provider Gender: Male
License Number: A132982
NPI: 1801230297
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
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🕒 After Hours Phone: (619)
662-4100
🌐 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

ROJAS, SARAH

Provider ID: 206292
Provider Gender: Female
License Number: A139169
NPI: 1245645076
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN

D2. Directorio de atención primaria

YSIDRO HEALTH CENTER


 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider Gender: Male

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE


ROJAS, SARAH

Provider ID: 206292

Provider Gender: Female

License Number: A139169

NPI: 1245645076

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider Gender: Male

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM


FAMILY PRACTICE

ROJAS, STEVEN

Provider ID: 206292

License Number: A132982

NPI: 1801230297

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish





Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
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 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider Gender: Male

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

ROSENBAUM, HERBERT

Provider ID: 206292

License Number: A169694

NPI: 1922532712

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

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 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

ROSENBAUM, HERBERT


Provider ID: 206292

Provider Gender: Male

License Number: A169694

NPI: 1922532712

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

D2. Directorio de atención primaria

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center


Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N





 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

SALEM, RAMSEY

Provider ID: 206292
Provider Gender: Male
License Number: A158364
NPI: 1245401298
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
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662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center




Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SALEM, RAMSEY

Provider ID: 206292
Provider Gender: Male
License Number: A158364
NPI: 1245401298
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SHAHTAJI, ALAN

Provider ID: 206292
Provider Gender: Male
License Number: 20A11087
NPI: 1972751089
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER


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 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SHAHTAJI, ALAN

Provider ID: 206292
Provider Gender: Male
License Number: 20A11087
NPI: 1972751089
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
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D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


SNYDER, CHRISTOPHER


Provider ID: 206292

Provider Gender: Male

License Number: 20A7502

NPI: 1922041235

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

Hospital - Downey, JOHN F
KENNEDY MEMORIAL HOSP,

CEDARS SINAI MEDICAL

CENTER, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

EISENHOWER MEDICAL CTR,


GROSSMONT HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


SNYDER, CHRISTOPHER


Provider ID: 206292

Provider Gender: Male

License Number: 20A7502

NPI: 1922041235

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

Hospital - Downey, JOHN F

KENNEDY MEMORIAL HOSP,

CEDARS SINAI MEDICAL

CENTER, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

EISENHOWER MEDICAL CTR,


GROSSMONT HOSPITAL


Board Certified Specialty: No


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662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

STALEY, MICHAELA

Provider ID: 206292

Provider Gender: Female

License Number: A157772

NPI: 1912438250

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


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YSIDRO HEALTH CENTER

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SAN YSIDRO, CA 92173

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662-4100

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

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Provider ID: 206292

Provider Gender: Female

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 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER



 4004 BEYER BLVD
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 Phone: (619) 662-4100

D2. Directorio de atención primaria





 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM


FAMILY PRACTICE

SWEET, PATRICK

Provider ID: 206292
Provider Gender: Male
License Number: A101827
NPI: 1457407702
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: HOAG HOSPITAL IRVINE, SCRIPPS MERCY HOSPITAL CHULA VISTA, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, DESERT REGIONAL MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, PIONEERS MEMORIAL HOSPITAL, PIONEERS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
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FAMILY PRACTICE

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Cultural Competency: N
Hospital Affiliation: HOAG HOSPITAL IRVINE, SCRIPPS MERCY HOSPITAL CHULA VISTA, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, DESERT REGIONAL MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, PIONEERS MEMORIAL HOSPITAL, PIONEERS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
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 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

FAMILY PRACTICE

TALAVERA, GREGORY

Provider ID: 206292
Provider Gender: Male
License Number: A40061
NPI: 1740337161
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
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 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM

D2. Directorio de atención primaria

FAMILY PRACTICE

TALAVERA, GREGORY

Provider ID: 206292

Provider Gender: Male

License Number: A40061

NPI: 1740337161

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

FAMILY PRACTICE

TAN, LO FU

Provider ID: 227469

Provider Gender: Male

License Number: C170935

NPI: 1356314835

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS

 3364 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TAN, LO FU

Provider ID: 227469

Provider Gender: Male

License Number: C170935

NPI: 1356314835

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TREJO, RAUL

Provider ID: 206292

Provider Gender: Male

License Number: A77936

NPI: 1174534184

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA
VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TREJO, RAUL

Provider ID: 206292

Provider Gender: Male

License Number: A77936

NPI: 1174534184

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

D2. Directorio de atención primaria

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

UTZ, JACK

Provider ID: 206292

Provider Gender: Male

License Number: A183145

NPI: 1194353094

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

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YSIDRO HEALTH CENTER

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SAN YSIDRO, CA 92173

Phone: (619) 662-4100
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Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

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PROVIDER

FAMILY PRACTICE

UTZ, JACK

Provider ID: 206292

Provider Gender: Male

License Number: A183145

NPI: 1194353094

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Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

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Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

VANHOLLEBEKE, RACHEL

Provider ID: 206292

Provider Gender: Female

License Number: A177337

NPI: 1497217756

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

VANHOLLEBEKE, RACHEL

Provider ID: 206292

Provider Gender: Female

License Number: A177337

NPI: 1497217756

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

D2. Directorio de atención primaria

MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
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Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

VELASQUEZ, SHARON

Provider ID: 206292

Provider Gender: Female

License Number: A71304

NPI: 1972732584

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP

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After Hours Phone: (619)
662-4100



Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N



Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

VELASQUEZ, SHARON

Provider ID: 206292

Provider Gender: Female

License Number: A71304

NPI: 1972732584

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP

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After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N



Accessibility: CONTACT
PROVIDER

FQHC

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR,

Provider ID: 227411

NPI: 1558852947

Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-1967

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR,

Provider ID: 227411

NPI: 1558852947

Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

D2. Directorio de atención primaria

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-1967

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER,

Provider ID: 206292

NPI: 1952364747

Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FQHC

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER,

Provider ID: 206292

NPI: 1952364747

Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FQHC

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS,

Provider ID: 227469

NPI: 1801438239

Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

3364 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 600-4870

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

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Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

D2. Directorio de atención primaria

PROVIDER
Hours: M-F 8:00AM-5:00PM

GENERAL PRACTICE


REYNAGA, JOSUE

Provider ID: 206292

Provider Gender: Male

License Number: A181644

NPI: 1356929111

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

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 *Phone: (619) 662-4100*

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 *Website: www.syhealth.org/clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

GENERAL PRACTICE


REYNAGA, JOSUE

Provider ID: 206292

Provider Gender: Male

License Number: A181644

NPI: 1356929111

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


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 *Website: www.syhealth.org/clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

GENERAL PRACTICE


TEJEDA, FRANCISCO


Provider ID: 206292

Provider Gender: Male

License Number: A66885

NPI: 1407940075

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 *4004 BEYER BLVD*

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662-4100*

 *Website: www.syhealth.org/clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

GENERAL PRACTICE

TEJEDA, FRANCISCO


Provider ID: 206292

Provider Gender: Male

License Number: A66885

NPI: 1407940075

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 *4004 BEYER BLVD*

SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

 *Website: www.syhealth.org/clinics/san-ysidro-health-center*

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

GYNECOLOGY


CALDERON, JORGE

Provider ID: 206292

Provider Gender: Male

License Number: A40480

NPI: 1407800881

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, PARADISE VALLEY

HOSPITAL, LOMPOC VALLEY

MEDICAL CENTER

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

GYNECOLOGY


CALDERON, JORGE

Provider ID: 206292

Provider Gender: Male

License Number: A40480

NPI: 1407800881

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, PARADISE VALLEY

HOSPITAL, LOMPOC VALLEY

MEDICAL CENTER

Board Certified Specialty: No


IHP of Southern Cal-PHP


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 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INFECTIOUS DISEASE

PROMER, KATHERINE

Provider ID: 206292

Provider Gender: Female

License Number: A131952

NPI: 1306280607

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, SCRIPPS MEMORIAL

HOSPITAL, PALOMAR

MEDICAL CENTER

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

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SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

INFECTIOUS DISEASE

PROMER, KATHERINE


Provider ID: 206292

Provider Gender: Female

License Number: A131952

NPI: 1306280607





 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

D2. Directorio de atención primaria

Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, PALOMAR MEDICAL CENTER



Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM


INTERNAL MEDICINE

ALDOUS, JEANNETTE

Provider ID: 206292
Provider Gender: Female
License Number: A101017
NPI: 1073650339
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified Specialty: No







IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


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 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE


ALDOUS, JEANNETTE

Provider ID: 206292
Provider Gender: Female
License Number: A101017
NPI: 1073650339
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
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 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center


Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

CARPENTER III, ROBERT

Provider ID: 206292
Provider Gender: Male
License Number: 20A10964
NPI: 1356343040
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

INTERNAL MEDICINE

CARPENTER III, ROBERT

Provider ID: 206292

D2. Directorio de atención primaria

Provider Gender: Male
License Number: 20A10964
NPI: 1356343040
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619)
662-4100
🌐 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

INTERNAL MEDICINE

CHEN, TSUH-YIN

Provider ID: 206292
Provider Gender: Female
License Number: C55563
NPI: 1093803520
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Portuguese,
Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100
Fax: (619) 205-6341
🕒 After Hours Phone: (619)
662-4100
🌐 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CHEN, TSUH-YIN

Provider ID: 206292
Provider Gender: Female
License Number: C55563
NPI: 1093803520
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Portuguese,
Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173

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662-4100
🌐 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CHOW, MAN HUNG

Provider ID: 227469
Provider Gender: Female
License Number: G66745
NPI: 1225149115
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
📍 3364 BEYER BLVD
SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619)
662-4100
🌐 Website: <https://www.syhealth.org/locations>

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


CHOW, MAN HUNG

Provider ID: 227469

Provider Gender: Female

License Number: G66745

NPI: 1225149115

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 3364 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


DE LA ROSA, JOSE

Provider ID: 206292

Provider Gender: Male

License Number: A49267

NPI: 1689646572

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

DE LA ROSA, JOSE

Provider ID: 206292

Provider Gender: Male

License Number: A49267

NPI: 1689646572

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

DILLON, BENEDICT


Provider ID: 227411

Provider Gender: Male

License Number: A111118

NPI: 1710142708

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, CHULA VISTA

COMM HOSP

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH




MATERNAL AND CHILD

HEALTH CTR

 4050 BEYER BLVD

SAN YSIDRO, CA 92173

D2. Directorio de atención primaria

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


DILLON, BENEDICT

Provider ID: 227411

Provider Gender: Male

License Number: A111118

NPI: 1710142708

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, CHULA VISTA COMM HOSP

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD

HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


HURST, MICHAEL


Provider ID: 206292

Provider Gender: Male

License Number: 20A8081

NPI: 1205893104

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SUTTER

TRACY COMMUNITY HOSP,

SCRIPPS MEMORIAL


HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-8:00PM

SA 8:00AM-2:00PM

INTERNAL MEDICINE


HURST, MICHAEL


Provider ID: 206292

Provider Gender: Male

License Number: 20A8081

NPI: 1205893104

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SUTTER

TRACY COMMUNITY HOSP,

SCRIPPS MEMORIAL

HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-8:00PM

SA 8:00AM-2:00PM

INTERNAL MEDICINE

KAUFER, DAVID


Provider ID: 206292

Provider Gender: Male

License Number: G80107

D2. Directorio de atención primaria

NPI: 1710082789

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

INTERNAL MEDICINE

KAUFER, DAVID

Provider ID: 206292

Provider Gender: Male

License Number: G80107

NPI: 1710082789

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


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YSIDRO HEALTH CENTER

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 After Hours Phone: (619)
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 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

INTERNAL MEDICINE


KAUFER, DAVID

Provider ID: 227469

Provider Gender: Male

License Number: G80107

NPI: 1710082789

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

KAUFER, DAVID

Provider ID: 227469

Provider Gender: Male

License Number: G80107

NPI: 1710082789

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

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 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 206292

Provider Gender: Female

License Number: G71855

NPI: 1124176102

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish





Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

D2. Directorio de atención primaria

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER


 4004 BEYER BLVD
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 Phone: (619) 662-4100
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662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE


LAMANTIA, MICHELE

Provider ID: 206292

Provider Gender: Female

License Number: G71855

NPI: 1124176102

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN


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662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE


MAY, LOUIS

Provider ID: 206292

Provider Gender: Male

License Number: A138568

NPI: 1720497514

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

MAY, LOUIS

Provider ID: 206292

Provider Gender: Male

License Number: A138568

NPI: 1720497514

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP


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 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

PARK, DANIEL

Provider ID: 206292

Provider Gender: Male

License Number: A99433

NPI: 1538371844

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD

D2. Directorio de atención primaria


SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

INTERNAL MEDICINE


PARK, DANIEL

Provider ID: 206292

Provider Gender: Male

License Number: A99433

NPI: 1538371844

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER


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 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

INTERNAL MEDICINE


POAST, JENNIFER

Provider ID: 206292

Provider Gender: Female

License Number: 20A8245

NPI: 1164435681

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER


 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

POAST, JENNIFER

Provider ID: 206292

Provider Gender: Female

License Number: 20A8245

NPI: 1164435681

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER


 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

RAMIREZ SANCHEZ, CLAUDIA

Provider ID: 206292

Provider Gender: Female

License Number: A160493

NPI: 1659720555

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD


SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

D2. Directorio de atención primaria

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


RAMIREZ SANCHEZ, CLAUDIA

Provider ID: 206292

Provider Gender: Female

License Number: A160493

NPI: 1659720555

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


REDDY, SAMATHHA


Provider ID: 227469

Provider Gender: Female

License Number: A120797

NPI: 1659620854

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Gujarati, Hindi,
Punjabi, Spanish, Telugu


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
ALVARADO HOSPITAL LLC,
GROSSMONT HOSPITAL,
SHARP CHULA VISTA MED
CTR, ST AGNES MEDICAL
CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


REDDY, SAMATHHA


Provider ID: 227469

Provider Gender: Female

License Number: A120797

NPI: 1659620854

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Gujarati, Hindi,
Punjabi, Spanish, Telugu


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
ALVARADO HOSPITAL LLC,
GROSSMONT HOSPITAL,
SHARP CHULA VISTA MED
CTR, ST AGNES MEDICAL
CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


SALERNO, MARIANA


Provider ID: 206292

Provider Gender: Female

License Number: A131021


NPI: 1598921645


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

D2. Directorio de atención primaria

Cultural Competency: N
Hospital Affiliation: Providence
St. Joseph Hospital Eureka
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100



 Website: www.syhealth.org/clinics/san-ysidro-health-center



Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


INTERNAL MEDICINE

SALERNO, MARIANA

Provider ID: 206292
Provider Gender: Female
License Number: A131021
NPI: 1598921645
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Providence
St. Joseph Hospital Eureka
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100



 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N




 Accessibility: CONTACT PROVIDER


INTERNAL MEDICINE

SCHNEIDER-MUNOZ, MARGARITA

Provider ID: 206292
Provider Gender: Female
License Number: G81461
NPI: 1821299520
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100



 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


INTERNAL MEDICINE

SCHNEIDER-MUNOZ, MARGARITA

Provider ID: 206292
Provider Gender: Female
License Number: G81461
NPI: 1821299520
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100



 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


SHEIKH MOHAMED, AMIRA

Provider ID: 227469
Provider Gender: Female
License Number: A153975
NPI: 1831583079
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, French,
Hindi, Italian, Urdu
Cultural Competency: N
Hospital Affiliation: SCRIPPS

D2. Directorio de atención primaria


MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [https://www.syhe
alth.org/locations](https://www.syhealth.org/locations)


Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

SHEIKH MOHAMED, AMIRA

Provider ID: 227469
Provider Gender: Female
License Number: A153975
NPI: 1831583079
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, French,
Hindi, Italian, Urdu
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS


 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [https://www.syhe
alth.org/locations](https://www.syhealth.org/locations)

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

SY, RAMON

Provider ID: 227469
Provider Gender: Male
License Number: A51843
NPI: 1982617403
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL,
PARADISE VALLEY HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [https://www.syhe
alth.org/locations](https://www.syhealth.org/locations)

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

SY, RAMON

Provider ID: 227469
Provider Gender: Male
License Number: A51843
NPI: 1982617403
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL,
PARADISE VALLEY HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [https://www.syhe
alth.org/locations](https://www.syhealth.org/locations)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

D2. Directorio de atención primaria

INTERNAL MEDICINE


VELAZQUEZ CAMARENA, MARIA

Provider ID: 206292

Provider Gender: Female

License Number: A56153

NPI: 1518965714


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-
PHP
SAN YSIDRO HEALTH
SAN YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE


VELAZQUEZ CAMARENA, MARIA

Provider ID: 206292

Provider Gender: Female

License Number: A56153

NPI: 1518965714


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-
PHP
SAN YSIDRO HEALTH
SAN YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

WEN, AKI YEN CHANG

Provider ID: 227411

Provider Gender: Male


License Number: 20A12555

NPI: 1205126505


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-
PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

WEN, AKI YEN CHANG

Provider ID: 227411


Provider Gender: Male


License Number: 20A12555


NPI: 1205126505


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-
PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

D2. Directorio de atención primaria

INTERNAL MEDICINE

GERIATRIC MEDICINE


PANDIT, IVY

Provider ID: 206292

Provider Gender: Female

License Number: C53735

NPI: 1891796165

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: KAISER

FOUNDATION HOSPITAL

RIVERSIDE, RIVERSIDE

COUNTY REGIONAL MED CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 205-1950

 After Hours Phone: (619)

205-1950

 Website: [www.syhealth.org](http://www.syhealth.org/clinics/san-ysidro-health-center)

/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

INTERNAL MEDICINE

GERIATRIC MEDICINE


PANDIT, IVY

Provider ID: 206292

Provider Gender: Female

License Number: C53735

NPI: 1891796165

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: KAISER

FOUNDATION HOSPITAL

RIVERSIDE, RIVERSIDE

COUNTY REGIONAL MED CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 205-1950

 After Hours Phone: (619) 205-1950

 Website: [www.syhealth.org](http://www.syhealth.org/clinics/san-ysidro-health-center)
/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

OBSTETRICS / GYNECOLOGY


ANDERSON, MANDY

Provider ID: 227411

Provider Gender: Female

License Number: A113914

NPI: 1982812392

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH


MATERNAL AND CHILD

HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

ANDERSON, MANDY

Provider ID: 227411

Provider Gender: Female

License Number: A113914

NPI: 1982812392

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH























MATERNAL AND CHILD

HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

D2. Directorio de atención primaria

<p> After Hours Phone: (619) 662-4100</p> <p> Website: syhealth.org/clinics/maternal-child-health-center</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Hours: M-F 8:30AM-5:00PM</p>	<p>s/maternal- child- health- center</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Hours: M-F 8:30AM-5:00PM</p>	<p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Hours: M-F 8:30AM-5:00PM</p>
<u>OBSTETRICS / GYNECOLOGY</u>		
BERGGREN, ERICA		
<p>Provider ID: 227411</p> <p>Provider Gender: Female</p> <p>License Number: C158543</p> <p>NPI: 1912159674</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL</p> <p>Board Certified Specialty: No</p> <p>IHP of Southern Cal-PHP SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR</p> <p> 4050 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p> Website: syhealth.org/clinics/maternal-child-health-center</p>	<p><u>OBSTETRICS / GYNECOLOGY</u></p> <p>BERGGREN, ERICA</p> <p>Provider ID: 227411</p> <p>Provider Gender: Female</p> <p>License Number: C158543</p> <p>NPI: 1912159674</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL</p> <p>Board Certified Specialty: No</p> <p>IHP of Southern Cal-PHP SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR</p> <p> 4050 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p> Website: syhealth.org/clinics/maternal-child-health-center</p> <p>Medi-Cal Open Panel: Yes</p>	<p><u>OBSTETRICS / GYNECOLOGY</u></p> <p>CARR, MIANDA</p> <p>Provider ID: 227411</p> <p>Provider Gender: Female</p> <p>License Number: A104660</p> <p>NPI: 1083815823</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: ST JOSEPHS MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL</p> <p>Board Certified Specialty: No</p> <p>IHP of Southern Cal-PHP SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR</p> <p> 4050 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p> Website: syhealth.org/clinics/maternal-child-health-center</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p>

D2. Directorio de atención primaria

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


CARR, MIANDA

Provider ID: 206292

Provider Gender: Female

License Number: A104660

NPI: 1083815823

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: ST


JOSEPHS MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


CARR, MIANDA

Provider ID: 206292

Provider Gender: Female

License Number: A104660

NPI: 1083815823

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: ST


JOSEPHS MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CARR, MIANDA

Provider ID: 227411

Provider Gender: Female

License Number: A104660

NPI: 1083815823

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: ST


JOSEPHS MEDICAL CENTER,


SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

CARSON, LATISA

Provider ID: 206292

Provider Gender: Female

License Number: A72235

NPI: 1245229129

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP




CHULA VISTA MED CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP



SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD

D2. Directorio de atención primaria

 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY **CARSON, LATISA**

Provider ID: 206292
Provider Gender: Female
License Number: A72235
NPI: 1245229129
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER



OBSTETRICS / GYNECOLOGY

DANESHMAND, SHAHRAM

Provider ID: 227411
Provider Gender: Male
License Number: A63844
NPI: 1891867412
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 205-1948
 After Hours Phone: (619)


662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM


OBSTETRICS / GYNECOLOGY **DANESHMAND, SHAHRAM**


Provider ID: 206292
Provider Gender: Male
License Number: A63844
NPI: 1891867412
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No


D2. Directorio de atención primaria

*IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER*

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

OBSTETRICS / GYNECOLOGY

DANESHMAND, SHAHRAM

Provider ID: 206292
Provider Gender: Male
License Number: A63844
NPI: 1891867412

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,

*SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, SCRIPPS GREEN
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA*

Board Certified Specialty: No

*IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER*

 4004 BEYER BLVD
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662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

OBSTETRICS / GYNECOLOGY

DANESHMAND, SHAHRAM

Provider ID: 227411
Provider Gender: Male
License Number: A63844
NPI: 1891867412


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL


*HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, SCRIPPS GREEN
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA*


Board Certified Specialty: No


*IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR*

 4050 BEYER BLVD
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100

 Fax: (619) 205-1948

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM


OBSTETRICS / GYNECOLOGY

DINH, MY


Provider ID: 227411
Provider Gender: Female
License Number: 20A9907


D2. Directorio de atención primaria


NPI: 1316146996

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


DINH, MY


Provider ID: 227411


Provider Gender: Female


License Number: 20A9907

NPI: 1316146996

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

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SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


DINH, MY

Provider ID: 206292


Provider Gender: Female


License Number: 20A9907


NPI: 1316146996

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


DINH, MY

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Provider Gender: Female


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Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY



GOLDSTEIN, EDWARD

Provider ID: 227411

Provider Gender: Male

License Number: G20087

NPI: 1982617494

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP

D2. Directorio de atención primaria

SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

4050 BEYER BLVD
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Phone: (619) 662-4100

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After Hours Phone: (619)
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Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

GOLDSTEIN, EDWARD

Provider ID: 227411

Provider Gender: Male

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Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA

Provider ID: 206292

Provider Gender: Female

License Number: A175006

NPI: 1255878997

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

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SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA

Provider ID: 227411

Provider Gender: Female

License Number: A175006

NPI: 1255878997

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA


Provider ID: 206292

Provider Gender: Female

License Number: A175006

D2. Directorio de atención primaria

NPI: 1255878997

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

OBSTETRICS / GYNECOLOGY


GOMEZ, DANIELA

Provider ID: 227411

Provider Gender: Female

License Number: A175006

NPI: 1255878997

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD


HEALTH CTR

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 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY


JENKINS, ENCHANTA

Provider ID: 227411

Provider Gender: Female

License Number: C143625

NPI: 1285604702

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD


HEALTH CTR

 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

enter

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

JENKINS, ENCHANTA

Provider ID: 227411

Provider Gender: Female

License Number: C143625

NPI: 1285604702

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD


HEALTH CTR

 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

D2. Directorio de atención primaria

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

Provider ID: 227411

Provider Gender: Male

License Number: A47906

NPI: 1437181922

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: MERCY

GENERAL HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, BAKERSFIELD

MEMORIAL HOSP, SHARP

MEMORIAL HOSPITAL,

Adventist Health Bakersfield,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, KERN

MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

MATERNAL AND CHILD

HEALTH CTR

4050 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinic/s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

Provider ID: 227411

Provider Gender: Male

License Number: A47906

NPI: 1437181922

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: MERCY

GENERAL HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, BAKERSFIELD

MEMORIAL HOSP, SHARP

MEMORIAL HOSPITAL,

Adventist Health Bakersfield,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, KERN

MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

MATERNAL AND CHILD

HEALTH CTR

4050 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinic/s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI

Provider ID: 206292

Provider Gender: Male

License Number: G59670

NPI: 1902993660

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SHARP CORONADO HOSP

AND HEALTHCARE CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N






Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI






Provider ID: 206292

D2. Directorio de atención primaria

Provider Gender: Male
License Number: G59670
NPI: 1902993660
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER





OBSTETRICS / GYNECOLOGY **SHORT, ABIADÉ**

Provider ID: 206292
Provider Gender: Male
License Number: A114893
NPI: 1750559589
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
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662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY **SHORT, ABIADÉ**

Provider ID: 206292
Provider Gender: Male
License Number: A114893
NPI: 1750559589
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY

HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
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662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OPHTHALMOLOGY **MANI, NASRIN**

Provider ID: 227469
Provider Gender: Female
License Number: A40473
NPI: 1023061314
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Faroese,
Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR, SHARP CHULA
VISTA MED CTR, GROSSMONT
HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

D2. Directorio de atención primaria


 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

MANI, NASRIN

Provider ID: 227469

Provider Gender: Female

License Number: A40473

NPI: 1023061314

Provider English Spoken: Y


Provider Language(s)
Spoken: Arabic, Faroese,
Farsi, Persian, Spanish



Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR, SHARP CHULA
VISTA MED CTR, GROSSMONT
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
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662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OPHTHALMOLOGY

SKAF, AYHAM

Provider ID: 227469

Provider Gender: Male

License Number: A120584

NPI: 1285888628

Provider English Spoken: Y



Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N


Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

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 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OPHTHALMOLOGY

SKAF, AYHAM

Provider ID: 227469

Provider Gender: Male

License Number: A120584

NPI: 1285888628

Provider English Spoken: Y



Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N

Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

ACEVEDO, SUSANA

Provider ID: 227411

Provider Gender: Female

License Number: A74960


NPI: 1801971569


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


D2. Directorio de atención primaria

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS


ACEVEDO, SUSANA

Provider ID: 227411

Provider Gender: Female

License Number: A74960

NPI: 1801971569

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

MATERNAL AND CHILD

HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS


BARBADILLO, FERDINAND

Provider ID: 206292

Provider Gender: Male

License Number: A49307

NPI: 1982662193

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TU 8:30AM-5:30PM

PEDIATRICS

BARBADILLO, FERDINAND


Provider ID: 227411

Provider Gender: Male

License Number: A49307

NPI: 1982662193

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

MATERNAL AND CHILD


HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1948

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

BARBADILLO, FERDINAND


Provider ID: 227411

Provider Gender: Male

License Number: A49307





NPI: 1982662193


 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish, Tagalog

D2. Directorio de atención primaria




Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR


 4050 BEYER BLVD
SAN YSIDRO, CA 92173
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662-4100
 Website: syhealth.org/clinics/maternal-child-health-center


Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

PEDIATRICS

BARBADILLO, FERDINAND

Provider ID: 206292
Provider Gender: Male
License Number: A49307
NPI: 1982662193
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD



SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
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662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

Hours: M-TU 8:30AM-5:30PM





PEDIATRICS

CABARLO, JEHRIB


Provider ID: 227411
Provider Gender: Male
License Number: 20A8516
NPI: 1770661340
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish, Tagalog
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR



 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER





PEDIATRICS


CABARLO, JEHRIB

Provider ID: 227411
Provider Gender: Male
License Number: 20A8516
NPI: 1770661340
 *Provider English Spoken: Y*
 *Provider Language(s)*
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Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

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SAN YSIDRO HEALTH
MATERNAL AND CHILD
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 Phone: (619) 662-4100
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662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

PEDIATRICS

CHAIT LLAMAS, LWBBA

D2. Directorio de atención primaria

Provider ID: 227411

Provider Gender: Female

License Number: A138938

NPI: 1134567530

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD

HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinic/s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

CHAIT LLAMAS, LWBBA

Provider ID: 227411

Provider Gender: Female

License Number: A138938

NPI: 1134567530

Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


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MATERNAL AND CHILD
HEALTH CTR

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SAN YSIDRO, CA 92173

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 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinic/s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

FUJII, CINDY

Provider ID: 227411

Provider Gender: Female

License Number: G52183

NPI: 1871664821

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD

HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinic/s/maternal-child-health-center


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

FUJII, CINDY

Provider ID: 227411

Provider Gender: Female

License Number: G52183

NPI: 1871664821

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD

HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinic/s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

GHAHREMANI, SIMIN








Provider ID: 206292

Provider Gender: Female

License Number: C51110



NPI: 1508904657

D2. Directorio de atención primaria

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Faroese, Farsi*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org /clinics/san-ysidro-health-center*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM SA 8:30AM-2:00PM

PEDIATRICS



GHAHREMANI, SIMIN



Provider ID: 206292
Provider Gender: Female
License Number: C51110
NPI: 1508904657
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Faroese, Farsi*
Cultural Competency: N
Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org /clinics/san-ysidro-health-center*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM SA 8:30AM-2:00PM

PEDIATRICS




HERMAN, ANDREA

Provider ID: 227411
Provider Gender: Female
License Number: A72721
NPI: 1518970037
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No

IHP of Southern Cal-PHP
 SAN YSIDRO HEALTH
 MATERNAL AND CHILD
 HEALTH CTR
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
Fax: (619) 205-1948
 *After Hours Phone: (619) 662-4100*
 *Website: syhealth.org/clinics/maternal-child-health-center*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

HERMAN, ANDREA

Provider ID: 227411
Provider Gender: Female
License Number: A72721
NPI: 1518970037
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 4050 BEYER BLVD

D2. Directorio de atención primaria

SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100
Fax: (619) 205-1948
🕒 After Hours Phone: (619) 662-4100
🌐 Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

NISSAN, BETI

Provider ID: 206292
Provider Gender: Female
License Number: A64487
NPI: 1396705299
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Farsi, Persian
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, HOLLYWOOD PRESBYTERIAN MED CTR, SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
📍 4004 BEYER BLVD SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM SA 8:30AM-2:00PM

PEDIATRICS

NISSAN, BETI

Provider ID: 206292
Provider Gender: Female
License Number: A64487
NPI: 1396705299
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Farsi, Persian
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, HOLLYWOOD PRESBYTERIAN MED CTR, SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
📍 4004 BEYER BLVD SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

PROVIDER
Hours: M-F 8:00AM-5:30PM SA 8:30AM-2:00PM

PEDIATRICS

PIANSAY, MARIACORAZON

Provider ID: 206292
Provider Gender: Female
License Number: A93785
NPI: 1669680351
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
📍 4004 BEYER BLVD SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

PEDIATRICS


PIANSAY, MARIACORAZON


Provider ID: 206292
Provider Gender: Female

D2. Directorio de atención primaria

License Number: A93785

NPI: 1669680351

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


RODRIGUEZ, ALDO


Provider ID: 227411

Provider Gender: Male

License Number: A134995

NPI: 1508209651

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD


HEALTH CTR

 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


RODRIGUEZ, ALDO

Provider ID: 227411

Provider Gender: Male

License Number: A134995

NPI: 1508209651

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD

HEALTH CTR


 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


RUELAS, ROBERTO

Provider ID: 227411

Provider Gender: Male

License Number: A170141

NPI: 1194257386

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD


HEALTH CTR

 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

RUELAS, ROBERTO

Provider ID: 227411

D2. Directorio de atención primaria

Provider Gender: Male


License Number: A170141


NPI: 1194257386


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


SAHMS, TIMOTHY

Provider ID: 206292

Provider Gender: Male

License Number: G51462

NPI: 1780697276

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-7:30PM
SA 8:30AM-2:00PM

PEDIATRICS

SAHMS, TIMOTHY


Provider ID: 227411

Provider Gender: Male

License Number: G51462

NPI: 1780697276

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
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Fax: (619) 205-1948

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 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


SAHMS, TIMOTHY

Provider ID: 227411

Provider Gender: Male

License Number: G51462

NPI: 1780697276

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

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SAN YSIDRO, CA 92173

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Fax: (619) 205-1948

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS


SAHMS, TIMOTHY


Provider ID: 206292

Provider Gender: Male

License Number: G51462

NPI: 1780697276

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 *4004 BEYER BLVD
SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org/clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-7:30PM

SA 8:30AM-2:00PM

PEDIATRICS

SHAHIDYAZDANI, TINA

Provider ID: 227411

Provider Gender: Female

License Number: A94813

NPI: 1891924858

 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD

HEALTH CTR

 *4050 BEYER BLVD
SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: syhealth.org/clinics/maternal-child-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

SHAHIDYAZDANI, TINA

Provider ID: 227411

Provider Gender: Female

License Number: A94813

NPI: 1891924858

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

MATERNAL AND CHILD


HEALTH CTR

 *4050 BEYER BLVD
SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

662-4100

 *Website: syhealth.org/clinics/maternal-child-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

SULLIVAN, ELISSA

Provider ID: 227411

Provider Gender: Female

License Number: A169577

NPI: 1790216422

 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD

HEALTH CTR

 *4050 BEYER BLVD
SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*


 *After Hours Phone: (619) 662-4100*

 *Website: syhealth.org/clinics/maternal-child-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:00PM

PEDIATRICS

SULLIVAN, ELISSA

D2. Directorio de atención primaria

Provider ID: 227411

Provider Gender: Female


License Number: A169577


NPI: 1790216422


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

PEDIATRICS



TAYLOR, TASHA

Provider ID: 227411

Provider Gender: Female

License Number: A82187

NPI: 1528144433


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1948

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS



TAYLOR, TASHA

Provider ID: 227411

Provider Gender: Female

License Number: A82187

NPI: 1528144433

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP


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MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
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 Phone: (619) 662-4100

Fax: (619) 205-1948

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

BUCKNER, JOSEPH

Provider ID: 206292

Provider Gender: Male

License Number: PA18363


NPI: 1215909205


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

BUCKNER, JOSEPH

Provider ID: 206292




Provider Gender: Male



D2. Directorio de atención primaria

License Number: PA18363
NPI: 1215909205
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

GI, HUNG

Provider ID: 206292
Provider Gender: Male
License Number: PA16994
NPI: 1023207404
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, French,
Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)

662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER






PHYSICIANS ASSISTANT

GI, HUNG

Provider ID: 206292
Provider Gender: Male
License Number: PA16994
NPI: 1023207404
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, French,
Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER



PHYSICIANS ASSISTANT

HARMIS, NATASHA

Provider ID: 227469
Provider Gender: Female
License Number: PA58672
NPI: 1013516996
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

HARMIS, NATASHA



Provider ID: 227469
Provider Gender: Female
License Number: PA58672
NPI: 1013516996
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100

D2. Directorio de atención primaria

 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT



KAMOTO, LYNN

Provider ID: 206292
Provider Gender: Female
License Number: PA17162
NPI: 1447326459
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


KAMOTO, LYNN





Provider ID: 206292
Provider Gender: Female
License Number: PA17162
NPI: 1447326459
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


PORTO MADURSKI, KRISTINE






Provider ID: 227411
Provider Gender: Female
License Number: PA16269
NPI: 1053403782
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP
SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

PORTO MADURSKI, KRISTINE

Provider ID: 227411
Provider Gender: Female
License Number: PA16269
NPI: 1053403782
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP
SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 4050 BEYER BLVD
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 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

PHYSICIANS ASSISTANT

ROSS, COLLIN

Provider ID: 206292

Provider Gender: Male

License Number: PA16058

NPI: 1629182050

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

ROSS, COLLIN

Provider ID: 206292

Provider Gender: Male

License Number: PA16058

NPI: 1629182050


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 206292

Provider Gender: Female

License Number: PA20490

NPI: 1619100237


Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 206292

Provider Gender: Female

License Number: PA20490

NPI: 1619100237


Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

SMITH, DOUGLAS

Provider ID: 206292

Provider Gender: Male

License Number: PA12304

NPI: 1902016611

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN

D2. Directorio de atención primaria

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


SMITH, DOUGLAS

Provider ID: 206292

Provider Gender: Male

License Number: PA12304

NPI: 1902016611

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


SUNA-SITTO, MOHEEN

Provider ID: 227469

Provider Gender: Female

License Number: PA22855

NPI: 1497196729

 Provider English Spoken: Y



Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/locations

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


SUNA-SITTO, MOHEEN

Provider ID: 227469

Provider Gender: Female

License Number: PA22855

NPI: 1497196729

 Provider English Spoken: Y

Cultural Competency: N




Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [https://www.syhealth.org/locations](http://www.syhealth.org/locations)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TRUJILLO, MIGUEL


Provider ID: 206292

Provider Gender: Male

License Number: PA15656

NPI: 1285806794

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

D2. Directorio de atención primaria

TRUJILLO, MIGUEL

Provider ID: 206292

Provider Gender: Male

License Number: PA15656

NPI: 1285806794

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PODIATRIST

MANCHEL, BRUCE

Provider ID: 227469

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

3364 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PODIATRIST

MANCHEL, BRUCE

Provider ID: 227469

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR

Board Certified Specialty: No

IHP of Southern Cal-PHP

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PACE SENIOR HLTH SVS

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SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PODIATRIST

MANCHEL, BRUCE

Provider ID: 206292

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND
HEALTHCARE CTR

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6341

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PODIATRIST

D2. Directorio de atención primaria

MANCHEL, BRUCE

Provider ID: 206292

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER


 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL

THERAPIST

SHAUF, JOANN

Provider ID: 206292

Provider Gender: Female

License Number: PT296607

NPI: 1134732522

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL

THERAPIST

SHAUF, JOANN

Provider ID: 206292

Provider Gender: Female

License Number: PT296607

NPI: 1134732522

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


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YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

SPEECH PATHOLOGIST

HILL, CARLA

Provider ID: 206292

Provider Gender: Female

License Number: SP9075

NPI: 1043950751

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

SPEECH PATHOLOGIST

HILL, CARLA

Provider ID: 206292

Provider Gender: Female

License Number: SP9075

NPI: 1043950751

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

D2. Directorio de atención primaria

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

SURGERY GENERAL

OKWUOSA, CHRIS

Provider ID: 206292

Provider Gender: Male

License Number: A170738

NPI: 1114336260

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Providence
St Mary Medical Center

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): **ARLATA, TAMANTHA**
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

SURGERY GENERAL

OKWUOSA, CHRIS

Provider ID: 206292

Provider Gender: Male

License Number: A170738

NPI: 1114336260

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Providence
St Mary Medical Center

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

SANTEE

PEDIATRICS

Provider ID: 615945

Provider Gender: Female

NPI: 1568721934

Provider English Spoken: Y
Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Board Certified Specialty: No

Rady Childrens Health Network
TAMANTHA S ARLATA

9600 CUYAMACA ST STE
101
SANTEE, CA 92071

Phone: (619) 749-2150
Fax: (619) 456-9744

After Hours Phone: (619)
749-2150

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MANGINE, REGINA

Provider ID: 366456

Provider Gender: Female

NPI: 1417177577

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

D2. Directorio de atención primaria

CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS
Board Certified Specialty: No
Rady Childrens Health Network
REGINA M MANGINE

9600 CUYAMACA ST STE
101
SANTEE, CA 92071

Phone: (619) 749-2150

Fax: (619) 456-9744

After Hours Phone: (619)
749-2150

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SPRING VALLEY

CERTIFIED NURSE

PRACTITIONER

LEONARD, BEVERLY

Provider ID: 206361

Provider Gender: Female

License Number: NP10943

NPI: 1285772392

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

LEONARD, BEVERLY

Provider ID: 206361

Provider Gender: Female

License Number: NP10943

NPI: 1285772392

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY

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515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 206361

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY

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SPRING VALLEY, CA 91977

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Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 206361


Provider Gender: Female

License Number: NP95013978

NPI: 1881727386


Provider English Spoken: Y


D2. Directorio de atención primaria


 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
*Family Health Centers of San
Diego*

*GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC*

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 *Phone: (619) 515-2555*

 *After Hours Phone: (619)
515-2555*


 *Website: www.fhcsd.org*

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE


BACHARACH, REBECCA

Provider ID: 206361

Provider Gender: Female


License Number: 20A15459


NPI: 1225442643

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
*Family Health Centers of San
Diego*

*GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC*

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 *Phone: (619) 515-2555*

 *After Hours Phone: (619)
515-2555*

 *Website: www.fhcsd.org*

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE


BACHARACH, REBECCA

Provider ID: 206361

Provider Gender: Female


License Number: 20A15459


NPI: 1225442643

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
*Family Health Centers of San
Diego*

*GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC*

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 *Phone: (619) 515-2555*

 *After Hours Phone: (619)
515-2555*

 *Website: www.fhcsd.org*

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE


CARDONES, ARTHUR


Provider ID: 206361

Provider Gender: Male

License Number: A55932


NPI: 1962436451


 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Tagalog*
Cultural Competency: N
Board Certified Specialty: No
*Family Health Centers of San
Diego*

*GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC*

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 *Phone: (619) 515-2555*

 *After Hours Phone: (619)
515-2555*


 *Website: www.fhcsd.org*

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE



CARDONES, ARTHUR

Provider ID: 206361

Provider Gender: Male


License Number: A55932


NPI: 1962436451

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Tagalog*
Cultural Competency: N
Board Certified Specialty: No
*Family Health Centers of San
Diego*

*GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC*

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 *Phone: (619) 515-2555*

 *After Hours Phone: (619)
515-2555*

D2. Directorio de atención primaria

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


CONSTANTINO, STEPHANIE

Provider ID: 206361

Provider Gender: Female

License Number: A149063

NPI: 1366824971

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555


 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

FAMILY PRACTICE


CONSTANTINO, STEPHANIE

Provider ID: 206361

Provider Gender: Female

License Number: A149063

NPI: 1366824971

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

FAMILY PRACTICE

ROSE, PATRICIA

Provider ID: 206361

Provider Gender: Female

License Number: A76059


NPI: 1588677314


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

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SPRING VALLEY, CA 91977

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 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

FAMILY PRACTICE

ROSE, PATRICIA

Provider ID: 206361

Provider Gender: Female

License Number: A76059


NPI: 1588677314

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego


GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

D2. Directorio de atención primaria


 After Hours Phone: (619) 515-2555

 Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

FQHC

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC,

Provider ID: 206361


NPI: 1508801069

 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego


GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

Fax: (619) 462-5584


 After Hours Phone: (619) 515-2555

 Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FQHC

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC,

Provider ID: 206361


NPI: 1508801069

 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

Fax: (619) 462-5584

 After Hours Phone: (619) 515-2555

 Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


ALIMONOS, LYSISTRATI

Provider ID: 206361

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No

Family Health Centers of San


Diego

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555


 After Hours Phone: (619) 515-2555

 Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206361

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No


Family Health Centers of San


Diego

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619) 515-2555

D2. Directorio de atención primaria

515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206361

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS


Board Certified Specialty: No


Family Health Centers of San Diego

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206361

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS


Board Certified Specialty: No


Family Health Centers of San Diego

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206361

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR


Board Certified Specialty: No


Family Health Centers of San Diego

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

D2. Directorio de atención primaria

Provider ID: 206361

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

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After Hours Phone: (619)
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Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 206361

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

8788 JAMACHA RD
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Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 206361

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

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Phone: (619) 515-2555

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515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 206361

Provider Gender: Male

License Number: A108228

NPI: 1629277322

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT

D2. Directorio de atención primaria

PROVIDER		
<u>OBSTETRICS / GYNECOLOGY</u> DE MIK, TRAVIS Provider ID: 206361 Provider Gender: Male License Number: A108228 NPI: 1629277322 Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No Family Health Centers of San Diego GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD SPRING VALLEY, CA 91977 Phone: (619) 515-2555 After Hours Phone: (619) 515-2555 Website: www.fhcsd.org Email: angelad@fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER	Grossmont Hospital Board Certified Specialty: No Family Health Centers of San Diego GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD SPRING VALLEY, CA 91977 Phone: (619) 515-2555 After Hours Phone: (619) 515-2555 Website: www.fhcsd.org Email: angelad@fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER	After Hours Phone: (619) 515-2555 Website: www.fhcsd.org Email: angelad@fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER
<u>OBSTETRICS / GYNECOLOGY</u> DORUELO, ASHLEY Provider ID: 206361 Provider Gender: Female License Number: A178499 NPI: 1033613732 Provider English Spoken: Y Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD SPRING VALLEY, CA 91977 Phone: (619) 515-2555 After Hours Phone: (619) 515-2555 Website: www.fhcsd.org Email: angelad@fhcsd.org	<u>OBSTETRICS / GYNECOLOGY</u> DORUELO, ASHLEY Provider ID: 206361 Provider Gender: Female License Number: A178499 NPI: 1033613732 Provider English Spoken: Y Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital Board Certified Specialty: No Family Health Centers of San Diego GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD SPRING VALLEY, CA 91977 Phone: (619) 515-2555	<u>OBSTETRICS / GYNECOLOGY</u> FOLCH TORRES-AGUIAR, BEATRIZ Provider ID: 206361 Provider Gender: Female License Number: A148014 NPI: 1457794752 Provider English Spoken: Y Provider Language(s) Spoken: Spanish, Yue Chinese Cultural Competency: N Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA Board Certified Specialty: No Family Health Centers of San Diego GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD SPRING VALLEY, CA 91977 Phone: (619) 515-2555 After Hours Phone: (619) 515-2555 Website: www.fhcsd.org Email: angelad@fhcsd.org

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


FOLCH TORRES-AGUIAR, BEATRIZ


Provider ID: 206361

Provider Gender: Female

License Number: A148014

NPI: 1457794752

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish, Yue Chinese

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,

Sharp Grossmont Hospital,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No


Family Health Centers of San


Diego

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

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515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


HANLEY, LAUREN


Provider ID: 206361

Provider Gender: Female

License Number: C174771

NPI: 1053392035

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206361

Provider Gender: Female

License Number: C174771

NPI: 1053392035

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego

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Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA


Provider ID: 206361

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

D2. Directorio de atención primaria

MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206361
Provider Gender: Female
License Number: A72005
NPI: 1649208711
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San

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Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206361
Provider Gender: Female
License Number: A116680
NPI: 1700073962
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
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American Sign Language (ASL):
N
Accessibility: CONTACT
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W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206361
Provider Gender: Female
License Number: A116680
NPI: 1700073962
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
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After Hours Phone: (619)
515-2555

D2. Directorio de atención primaria

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Hours: M-F 8:30AM-5:30PM

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 206361

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No


Family Health Centers of San


Diego

GROSSMONT SPRING VALLEY

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 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): **OBSTETRICS / GYNECOLOGY**
SAPRA, SONIA

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 206361

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No


Family Health Centers of San


Diego

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Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 206361

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s)

Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No


Family Health Centers of San


Diego

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 Website: www.fhcsd.org


Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 206361

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s)

Spoken: Hindi

Cultural Competency: N

D2. Directorio de atención primaria

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206361

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San
Diego

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Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206361

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

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Board Certified Specialty: No

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 206361

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Board Certified Specialty: No

Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
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Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 206361

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

D2. Directorio de atención primaria

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No
Family Health Centers of San
Diego
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PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206361
Provider Gender: Male
License Number: G78814
NPI: 1699790634
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
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515-2555
 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206361
Provider Gender: Male
License Number: G78814
NPI: 1699790634
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,

SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 9:00AM-5:00PM


PEDIATRICS


JI, AMANDA

Provider ID: 206361
Provider Gender: Female
License Number: A169342
NPI: 1750745493
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

D2. Directorio de atención primaria

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org


Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


JI, AMANDA

Provider ID: 206361

Provider Gender: Female

License Number: A169342

NPI: 1750745493

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL


Board Certified Specialty: No


Family Health Centers of San
Diego

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

LOPEZ, MARIO

Provider ID: 206361

Provider Gender: Male

License Number: PA21385

NPI: 1932335080

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

W-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT


LOPEZ, MARIO

Provider ID: 206361

Provider Gender: Male

License Number: PA21385

NPI: 1932335080

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

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American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

W-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

TRAN, TU-UYEN

Provider ID: 206361

Provider Gender: Female

License Number: PA54588

NPI: 1598293748

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY

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Email: angelad@fhcsd.org

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

TRAN, TU-UYEN

Provider ID: 206361

Provider Gender: Female

License Number: PA54588

NPI: 1598293748

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

GROSSMONT SPRING VALLEY

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT


TURNER, ERIC

Provider ID: 206361

Provider Gender: Male

License Number: PA55067

NPI: 1669756128

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

GROSSMONT SPRING VALLEY

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Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT


TURNER, ERIC

Provider ID: 206361

Provider Gender: Male

License Number: PA55067

NPI: 1669756128

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

GROSSMONT SPRING VALLEY

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Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

VALLEY CENTER

CLINIC OUTPATIENT

NEIGHBORHOOD

HEALTHCARE,

Provider ID: 519918

NPI: 1437335148

 Provider English Spoken: Y


Cultural Competency: N

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

Fax: (360) 462-2750

 After Hours Phone: (760)
742-9919


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

Hours: M-F 8:00AM-5:00PM

CLINIC OUTPATIENT

NEIGHBORHOOD

HEALTHCARE,

Provider ID: 519918

NPI: 1437335148


Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

Fax: (360) 462-2750


 After Hours Phone: (760)
742-9919

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

AYON MARTINEZ, CARLOS

Provider ID: 519918

Provider Gender: Male

License Number: A114419

NPI: 1154583128

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

 After Hours Phone: (760)
742-9919

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

AYON MARTINEZ, CARLOS

Provider ID: 519918

Provider Gender: Male

License Number: A114419

NPI: 1154583128

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

 After Hours Phone: (760)
742-9919

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CASTANER, ZALYA

Provider ID: 519918

Provider Gender: Female

License Number: A139490

NPI: 1487072179

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9912

 After Hours Phone: (760)
742-9912

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

CASTANER, ZALYA

Provider ID: 519918

Provider Gender: Female

License Number: A139490

NPI: 1487072179

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE

D2. Directorio de atención primaria

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
 Phone: (760) 742-9912
 After Hours Phone: (760)
742-9912
 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


SCHULTZ, JAMES


Provider ID: 519918

Provider Gender: Male

License Number: G61829

NPI: 1356376164

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi, Greek,
Spanish

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
PALOMAR MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
 Phone: (760) 742-9919
 After Hours Phone: (760)
742-9919

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


SCHULTZ, JAMES


Provider ID: 519918

Provider Gender: Male

License Number: G61829

NPI: 1356376164

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi, Greek,
Spanish

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
PALOMAR MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
 Phone: (760) 742-9919
 After Hours Phone: (760)
742-9919

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FQHC

NEIGHBORHOOD

HEALTHCARE,

Provider ID: 519918

NPI: 1437335148


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

Fax: (360) 462-2750

 After Hours Phone: (760)
742-9919

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD

HEALTHCARE,

Provider ID: 519918

NPI: 1437335148


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

Fax: (360) 462-2750

 After Hours Phone: (760)
742-9919

 Website: N/A

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): License Number: PA18708

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM


PEDIATRICS

CRAYCHEE, LEO

Provider ID: 71887

Provider Gender: Male

NPI: 1265432710

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No

Rady Childrens Health Network

LEO C CRAYCHEE

 28714 VALLEY CENTER RD
STE L

VALLEY CENTER, CA 92082

 Phone: (760) 749-7770

Fax: (760) 751-9988

 After Hours Phone: (760)
749-7770

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

PHYSICIANS ASSISTANT


AGUEY, OMAR

Provider ID: 519918

Provider Gender: Male

License Number: PA18708

NPI: 1851479372

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

 After Hours Phone: (760)
742-9919

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

AGUEY, OMAR


Provider ID: 519918

Provider Gender: Male

License Number: PA18708

NPI: 1851479372

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE

 28477 LIZARD ROCKS RD

VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

 After Hours Phone: (760)
742-9919

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

VISTA

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 400339

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

GRAPEVINE

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

D2. Directorio de atención primaria

PROVIDER
Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER



HALGEDAHL, YI TING

Provider ID: 400339
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907

Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
GRAPEVINE


 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 400339



Provider Gender: Female
License Number: NP95003447
NPI: 1245695006

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
GRAPEVINE

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 400339
Provider Gender: Female
License Number: NP95003447
NPI: 1245695006



Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
GRAPEVINE

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER



WILLIAMS, JINA

Provider ID: 400339
Provider Gender: Female
License Number: NP95020624
NPI: 1225500259

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
GRAPEVINE

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000


D2. Directorio de atención primaria

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, JINA

Provider ID: 400339

Provider Gender: Female

License Number: NP95020624


NPI: 1225500259


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC
GRAPEVINE

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CHIROPRACTOR


JU, NATHANIEL


Provider ID: 400339

Provider Gender: Male

License Number: DC32054

NPI: 1972883882


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Chinese

Cultural Competency: N
Board Certified Specialty: No

IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
GRAPEVINE

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

CHIROPRACTOR


JU, NATHANIEL


Provider ID: 400339

Provider Gender: Male

License Number: DC32054

NPI: 1972883882

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Chinese


Cultural Competency: N
Board Certified Specialty: No


IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
GRAPEVINE

 134 GRAPEVINE RD

VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH

Provider ID: 400339

Provider Gender: Female

License Number: 20A12958

NPI: 1003172016

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL


ENCINITAS, TRI CITY MEDICAL
CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC
GRAPEVINE

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


ESPINOSA-SILVA, YAMINAH

Provider ID: 400339

Provider Gender: Female

License Number: 20A12958

NPI: 1003172016

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


ENCINITAS, TRI CITY MEDICAL
CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC
GRAPEVINE

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


KETCHEL, CLINT


Provider ID: 400339

Provider Gender: Male

License Number: A135564

NPI: 1699038125

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,

SCRIPPS MEMORIAL


HOSPITAL ENCINITAS, TRI CITY
MEDICAL CTR, WHITTIER


HOSPITAL MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC
GRAPEVINE

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

FAMILY PRACTICE


KETCHEL, CLINT


Provider ID: 400339

Provider Gender: Male

License Number: A135564

NPI: 1699038125

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,

SCRIPPS MEMORIAL


HOSPITAL ENCINITAS, TRI CITY
MEDICAL CTR, WHITTIER


HOSPITAL MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC
GRAPEVINE

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

FQHC

D2. Directorio de atención primaria

VCC DURIAN,

Provider ID: 411518


NPI: 1851300123

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

VCC DURIAN

 105 DURIAN ST STE A
VISTA, CA 92083

 Phone: (844) 308-5003

Fax: (760) 414-3892

 After Hours Phone: (844)
308-5003

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

FQHC

VCC DURIAN,


Provider ID: 411518


NPI: 1851300123

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

VCC DURIAN

 105 DURIAN ST STE A
VISTA, CA 92083

 Phone: (844) 308-5003

Fax: (760) 414-3892

 After Hours Phone: (844)
308-5003

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

FQHC

VISTA COMMUNITY CLINIC GRAPEVINE,

Provider ID: 400339


NPI: 1851300123

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC
GRAPEVINE

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

FQHC

VISTA COMMUNITY CLINIC GRAPEVINE,

Provider ID: 400339


NPI: 1851300123

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC GRAPEVINE

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

PEDIATRICS

AMBO, STANLEY

Provider ID: 52269

Provider Gender: Male

NPI: 1891735676

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS


HOSPITAL SAN DIEGO

Board Certified Specialty: No

Rady Childrens Health Network

STANLEY G AMBO

 2067 W VISTA WAY STE 180
VISTA, CA 92083

 Phone: (760) 945-3434

Fax: (760) 945-6761

D2. Directorio de atención primaria

☎ After Hours Phone: (760)
945-3434

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ASSELIN, LYNETTE

Provider ID: 65507

Provider Gender: Female

NPI: 1053484568

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No

Rady Childrens Health Network

LYNETTE M ASSELIN

📍 2067 W VISTA WAY STE 280
VISTA, CA 92083

☎ Phone: (760) 941-3630

Fax: (760) 941-1214

☎ After Hours Phone: (760)
941-3630

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-6:00PM
SA 9:00AM-1:00PM

PEDIATRICS

BEDROSIAN, DIANE

Provider ID: 80272

Provider Gender: Female

NPI: 1447323951

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No

Rady Childrens Health Network

DIANE H BEDROSIAN

📍 2067 W VISTA WAY STE 280
VISTA, CA 92083

☎ Phone: (760) 941-3630

Fax: (760) 941-1214

☎ After Hours Phone: (760)
941-3630

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-6:00PM
SA 9:00AM-1:00PM

PEDIATRICS

CASTRO, JORGE

Provider ID: 100779

Provider Gender: Male

NPI: 1326082868

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

Rady Childrens Health Network

JORGE L CASTRO

📍 2067 W VISTA WAY STE 180
VISTA, CA 92083

☎ Phone: (760) 945-3434

Fax: (760) 945-6761

☎ After Hours Phone: (760)
945-3434

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

HARTFORD, NICOLE

Provider ID: 411518

Provider Gender: Female

License Number: 20A14390

NPI: 1346530466

☐ Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

VCC DURIAN

📍 105 DURIAN ST STE A
VISTA, CA 92083

☎ Phone: (844) 308-5003

☎ After Hours Phone: (844)
308-5003

🌐 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

D2. Directorio de atención primaria

American Sign Language (ASL): MICHAEL W KARP

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

HARTFORD, NICOLE

Provider ID: 411518


Provider Gender: Female


License Number: 20A14390

NPI: 1346530466

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
VCC DURIAN

 105 DURIAN ST STE A
VISTA, CA 92083

 Phone: (844) 308-5003

 After Hours Phone: (844)
308-5003

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

KARP, MICHAEL

Provider ID: 95672

Provider Gender: Male

NPI: 1295808632


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
Rady Childrens Health Network

 2067 W VISTA WAY STE 280 N

VISTA, CA 92083

 Phone: (760) 941-3630

Fax: (760) 941-1214

 After Hours Phone: (760)
941-3630

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-6:00PM
SA 9:00AM-1:00PM


PEDIATRICS


KRAK, MICHAEL

Provider ID: 23455

Provider Gender: Male

NPI: 1003989419

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL
CTR


Board Certified Specialty: Yes

Rady Childrens Health Network

MICHAEL D KRAK


 2067 W VISTA WAY STE 280 N

VISTA, CA 92083

 Phone: (760) 941-3630

Fax: (760) 941-1214

 After Hours Phone: (760)
941-3630


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-6:00PM
SA 9:00AM-1:00PM

PEDIATRICS

LUSCHWITZ, BRIAN

Provider ID: 400339

Provider Gender: Male

License Number: A60517

NPI: 1205868510

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR


Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC
GRAPEVINE

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

PEDIATRICS

D2. Directorio de atención primaria

LUSCHWITZ, BRIAN

Provider ID: 400339

Provider Gender: Male

License Number: A60517

NPI: 1205868510

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC
GRAPEVINE

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

PEDIATRICS

NAUDIN, VERONICA

Provider ID: 84118

Provider Gender: Female

NPI: 1093755878

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

Rady Childrens Health Network

VERONICA L NAUDIN

2067 W VISTA WAY STE 180
VISTA, CA 92083

Phone: (760) 945-3434

Fax: (760) 945-6761

After Hours Phone: (760)
945-3434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

PEDIATRICS

PERTL, URSULA

Provider ID: 593894

Provider Gender: Female

NPI: 1609947464

Provider English Spoken: Y

Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS

HOSPITAL SAN DIEGO,

CHILDRENS HOSP OF LOS

ANGELES

Board Certified Specialty: No

Rady Childrens Health Network

URSULA G PERTL

2067 W VISTA WAY STE 180
VISTA, CA 92083

Phone: (760) 945-3434

Fax: (760) 945-6761

After Hours Phone: (760)
945-3434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-2:00PM

M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

PEDIATRICS

RONAN, KEVIN

Provider ID: 400339

Provider Gender: Male

License Number: G77176

NPI: 1225017353

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

GRAPEVINE


134 GRAPEVINE RD


VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)






D2. Directorio de atención primaria


 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM

PEDIATRICS






RONAN, KEVIN

Provider ID: 400339
Provider Gender: Male
License Number: G77176
NPI: 1225017353
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC GRAPEVINE
 134 GRAPEVINE RD VISTA, CA 92083
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT








WEAVER, APRIL

Provider ID: 400339
Provider Gender: Female
License Number: PA20775
NPI: 1063552800
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC GRAPEVINE
 134 GRAPEVINE RD VISTA, CA 92083
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 9:00AM-2:00PM
F 8:00AM-5:00PM
SA 8:00AM-4:00PM

PHYSICIANS ASSISTANT

WEAVER, APRIL

Provider ID: 400339

Provider Gender: Female
License Number: PA20775
NPI: 1063552800
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC GRAPEVINE
 134 GRAPEVINE RD VISTA, CA 92083
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 9:00AM-2:00PM
F 8:00AM-5:00PM
SA 8:00AM-4:00PM

D3. Directorio de proveedores especialistas

ALPINE

OPTOMETRIST

AOTO, KIM

Provider ID: 268720

Board Certified Specialty: No
KIM N AOTO

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

☎ Phone: (800) 898-2020

Fax: (844) 897-3788

🕒 After Hours Phone: (800)
898-2020

Provider Gender: Female

NPI: 1780935650

🗨 Provider English Spoken: Y

🗨 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:00PM

🌐 Website: N/A

PSYCHOLOGIST

TORRES, RANDALL

Provider ID: 306854

Board Certified Specialty: No
RANDALL P TORRES

📍 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1871696435

🗨 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CARLSBAD

CERTIFIED NURSE

PRACTITIONER

HOOPER, BONNIE

Provider ID: 275252

Board Certified Specialty: No
BONNIE J HOOPER

📍 6010 HIDDEN VALLEY RD
STE 120

CARLSBAD, CA 92011

☎ Phone: (760) 884-5990

Fax: (760) 448-4404

🕒 After Hours Phone: (760)
884-5990

Provider Gender: Female

NPI: 1821062878

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

RICE, ELIZABETH

Provider ID: 304664

Board Certified Specialty: No
ELIZABETH M RICE

📍 6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

☎ Phone: (760) 631-3000

Fax: (760) 631-3016

🕒 After Hours Phone: (760)
631-3000

Provider Gender: Female

NPI: 1902470537

🗨 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

DERMATOLOGY

ZUBAIR, RAHEEL

Provider ID: 306519

Board Certified Specialty: No
RAHEEL A ZUBAIR

📍 6010 HIDDEN VALLEY RD
STE 120

CARLSBAD, CA 92011

☎ Phone: (760) 448-4484

Fax: (760) 448-4404

🕒 After Hours Phone: (760)
448-4484

Provider Gender: Male

NPI: 1326493024

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*


FAMILY PRACTICE

CHAVEZ SANTOS, MARIA

Provider ID: 307651

*Board Certified Specialty: No
MARIA J CHAVEZ SANTOS*

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008


 *Phone: (760) 736-6767*

Fax: (760) 736-6744

 *After Hours Phone: (760)
736-6767*

Provider Gender: Female

NPI: 1780061440

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

HEARING AID DEALER / SUPPLIER


DAVIS, KELLE

Provider ID: 268654


*Board Certified Specialty: No
KELLE L DAVIS*

 1820 MARRON RD STE 102

CARLSBAD, CA 92008


 *Phone: (760) 434-0125*

Fax: (760) 434-4531

 *After Hours Phone: (760)
434-0125*

Provider Gender: Female

NPI: 1902853344

 *Provider English Spoken: Y*

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:30AM-5:00PM*


 *Website: N/A*


NEUROLOGY

DROKER, BRIAN


Provider ID: 306953

*Board Certified Specialty: No
BRIAN S DROKER*

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011


 *Phone: (760) 631-3000*


Fax: (760) 270-9534

 *After Hours Phone: (760)
631-3000*

Provider Gender: Male

NPI: 1801112669

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT*

PROVIDER

 *Hours: M 8:00AM-5:00PM
W 8:00AM-5:00PM*


 *Website: N/A*


NEUROLOGY

YOSHII-CONTRERAS, JUNE

Provider ID: 296589

*Board Certified Specialty: No
JUNE YOSHII-CONTRERAS*

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

 *Phone: (760) 631-3000*

Fax: (760) 631-3016

 *After Hours Phone: (760)
631-3000*

Provider Gender: Female

NPI: 1437441763

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

*Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL*

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL,

PALOMAR MEDICAL CENTER,

TRI CITY MEDICAL CTR,


SCRIPPS MERCY HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

OTOLARYNGOLOGY

DONALDSON, CHADWICK

D3. Directorio de proveedores especialistas

Provider ID: 268146

Board Certified Specialty: No
CHADWICK J DONALDSON

2390 FARADAY AVE
CARLSBAD, CA 92008

Phone: (858) 909-0770

Fax: (858) 909-0880

After Hours Phone: (858)
909-0770

Provider Gender: Male

NPI: 1891743910

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
TEMECULA VALLEY HOSPITAL

INC, SCRIPPS MEMORIAL

HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SHARP CHULA VISTA MED

CTR, SHARP CHULA VISTA

MED CTR, Sharp Grossmont

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

HERMANSON, KATHLEEN

Provider ID: 269004

Board Certified Specialty: No
KATHLEEN H HERMANSON

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)
631-3000

Provider Gender: Female

NPI: 1598160343

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-4:00PM

Website: N/A

PHYSICIANS ASSISTANT

INOCELDA, ANDREW

Provider ID: 269089

Board Certified Specialty: No

ANDREW G INOCELDA

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)
631-3000

Provider Gender: Male

NPI: 1497950208

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SHIMIZU, KELSIE

Provider ID: 296819

Board Certified Specialty: No

KELSIE SHIMIZU

2390 FARADAY AVE
CARLSBAD, CA 92008

Phone: (858) 909-0770

Fax: (858) 909-0880

After Hours Phone: (858)
909-0770

Provider Gender: Female

NPI: 1972107811

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: KECK

HOSPITAL OF USC, USC

KENNETH NORRIS JR CANCER

HOSPITAL, USC VERDUGO

HILLS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

WILAND, WINONA

Provider ID: 296809

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
WINONA L WILAND

2390 FARADAY AVE
CARLSBAD, CA 92008

Phone: (858) 909-0770

Fax: (858) 909-0880

After Hours Phone: (858)
909-0770

Provider Gender: Female

NPI: 1043967383

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

AMBROSE, CHRISTOPHER

Provider ID: 248010

Board Certified Specialty: No

CHRISTOPHER S AMBROSE

3070 MADISON ST
CARLSBAD, CA 92008

Phone: (760) 434-6100

Fax: (760) 471-5139

After Hours Phone: (760)
591-7750

Provider Gender: Male

NPI: 1114977535

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 8\125

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 7:00AM-7:00PM

TU 7:00AM-5:00PM

W 7:00AM-7:00PM

TH 7:00AM-5:00PM

F 7:00AM-7:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

MCGEE, JACQUELINE

Provider ID: 252472

Board Certified Specialty: No

JACQUELINE M MCGEE

3070 MADISON ST
CARLSBAD, CA 92008

Phone: (760) 434-6100

Fax: (760) 434-4583

After Hours Phone: (760)
434-6100

Provider Gender: Female

NPI: 1194217133

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 8\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
7:00AM-6:00PM

Website: N/A

SURGERY NEUROLOGICAL

BEN-HAIM, SHARONA

Provider ID: 244069

Board Certified Specialty: No

SHARONA BEN-HAIM

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1942469663

Provider English Spoken: Y

Provider Language(s)

Spoken: Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY NEUROLOGICAL

BLASKIEWICZ, DONALD

Provider ID: 270283

Board Certified Specialty: No

DONALD J BLASKIEWICZ

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1215176839

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

D3. Directorio de proveedores especialistas

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY NEUROLOGICAL

MURTHY, NIKHIL


Provider ID: 299996

Board Certified Specialty: No

NIKHIL K MURTHY

 6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1710371273


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

SURGERY NEUROLOGICAL

PHAM, MARTIN


Provider ID: 203510


Board Certified Specialty: No

MARTIN H PHAM

 6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

 Phone: (619) 543-5540

 After Hours Phone: (619)
543-5540

Provider Gender: Male

NPI: 1609130921

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CHULA VISTA


ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON

Provider ID: 299879

Board Certified Specialty: No
BRANDON DAIRO

 340 4TH AVE STE 19
CHULA VISTA, CA 91910

 Phone: (619) 761-5308

Fax: (619) 591-1910

 After Hours Phone: (619)
761-5308

Provider Gender: Male

NPI: 1689092470

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 18\100

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY PAIN MANAGEMENT


DAIRO, BRANDON

Provider ID: 300088

Board Certified Specialty: No

BRANDON DAIRO

 340 4TH AVE STE 19
CHULA VISTA, CA 91910

 Phone: (619) 761-5308

Fax: (619) 591-1910

 After Hours Phone: (619)
761-5308

Provider Gender: Male

NPI: 1689092470

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CARDIOVASCULAR DISEASE

LERNER, JONATHAN

Provider ID: 303445

Board Certified Specialty: No
JONATHAN H LERNER

765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911

Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1962899823

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

LAM, KHANH

Provider ID: 295381

Board Certified Specialty: No
KHANH M LAM

340 4TH AVE STE 19

CHULA VISTA, CA 91910

Phone: (619) 761-5308

Fax: (619) 591-1910

After Hours Phone: (619)
761-5308

Provider Gender: Male

NPI: 1649594979

Provider English Spoken: Y

Provider Language(s)

Spoken: Chinese, French,
Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

WILCOX, WENONAH

Provider ID: 290591

Board Certified Specialty: No

WENONAH WILCOX

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1598037178

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

BRAYTENBAH, MELANIE

Provider ID: 268746

Board Certified Specialty: No
MELANIE R BRAYTENBAH

752 MEDICAL CENTER CT
STE 302

CHULA VISTA, CA 91911

Phone: (619) 421-3361

Fax: (619) 869-4378

After Hours Phone: (619)
421-3361

Provider Gender: Female

NPI: 1508370875

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

BRAYTENBAH, MELANIE

Provider ID: 262342

Board Certified Specialty: No
MELANIE R BRAYTENBAH

752 MEDICAL CENTER CT
STE 302

CHULA VISTA, CA 91911

Phone: (619) 421-3361


Fax: (619) 869-4378

D3. Directorio de proveedores especialistas

 After Hours Phone: (619)
421-3361

Provider Gender: Female

NPI: 1508370875

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

BRAYTENBAH, MELANIE


Provider ID: 295830

Board Certified Specialty: No

MELANIE R BRAYTENBAH

 752 MEDICAL CENTER CT
STE 302

CHULA VISTA, CA 91911


 Phone: (619) 421-3361

Fax: (619) 869-4378

 After Hours Phone: (619)
421-3361

Provider Gender: Female

NPI: 1508370875

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


CARAPIA, FABIOLA

Provider ID: 54496

Board Certified Specialty: No

FABIOLA CARAPIA

 340 4TH AVE STE 4
CHULA VISTA, CA 91910


 Phone: (619) 427-1144

Fax: (619) 427-1185

 After Hours Phone: (619)
427-1144

Provider Gender: Female

NPI: 1184905994

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


CARAPIA, FABIOLA

Provider ID: 295918


Board Certified Specialty: No

FABIOLA CARAPIA

 340 4TH AVE STE 4
CHULA VISTA, CA 91910

 Phone: (619) 427-1144


Fax: (619) 427-1185

 After Hours Phone: (619)
427-1144

Provider Gender: Female

NPI: 1184905994

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


CARRION GELABERT, ANA

Provider ID: 302402

Board Certified Specialty: No

ANA M CARRION GELABERT

 450 FOURTH AVE STE 215
CHULA VISTA, CA 91910

 Phone: (619) 425-3840

Fax: (619) 425-3842

 After Hours Phone: (619)
425-3840

Provider Gender: Female

NPI: 1023178233

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-6:00PM

D3. Directorio de proveedores especialistas

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


DE DIOS, SARAH JANE

Provider ID: 302418

Board Certified Specialty: No

SARAH JANE J DE DIOS

 450 4TH AVE STE 215
CHULA VISTA, CA 91910


 Phone: (619) 425-3840

Fax: (619) 369-4880

 After Hours Phone: (619)
425-3840

Provider Gender: Female

NPI: 1528632742

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP


CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


IBARRA, MARTHA

Provider ID: 308352

Board Certified Specialty: No

MARTHA A IBARRA

 855 THIRD AVE STE 2220
CHULA VISTA, CA 91911

 Phone: (619) 662-4100


Fax: (619) 662-4196

 After Hours Phone: (619)

662-4100

Provider Gender: Female

NPI: 1114957289

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8:30AM-2:30PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

LANE, KIMBERLY


Provider ID: 301598

Board Certified Specialty: No

KIMBERLY A LANE

 752 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911


 Phone: (619) 397-4500

Fax: (858) 429-7931

 After Hours Phone: (619)
397-4500

Provider Gender: Female

NPI: 1457670119

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE


DILLMAN, ARIANA

Provider ID: 290495

Board Certified Specialty: Yes

ARIANA N DILLMAN

 333 H ST STE 2080
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (661) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1497067862

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: BEVERLY
HOSPITAL, TRI CITY MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM

 Website: N/A

EMERGENCY MEDICINE

EINSTEIN, ERIC

Provider ID: 290482

Board Certified Specialty: No

ERIC R EINSTEIN

 333 H ST STE 2080

D3. Directorio de proveedores especialistas

CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
Fax: (619) 205-6305
🕒 After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1154683787
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CORONA REGIONAL MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:30AM-5:30PM SA 8:00AM-2:30PM
🌐 Website: N/A

EMERGENCY MEDICINE

FRENCH, TONIANNE

Provider ID: 290538
Board Certified Specialty: No
TONIANNE FRENCH
📍 333 H ST STE 2080
CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
Fax: (619) 205-6305
🕒 After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1770578411
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:30AM-5:30PM SA 8:00AM-2:30PM
🌐 Website: N/A

EMERGENCY MEDICINE

GALASSO, MADISON

Provider ID: 290477
Board Certified Specialty: Yes
MADISON M GALASSO
📍 333 H ST STE 2080
CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
Fax: (619) 205-6305
🕒 After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1053766766

🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:30AM-5:30PM SA 8:00AM-2:30PM
🌐 Website: N/A

EMERGENCY MEDICINE

GRIESINGER, MICHAEL

Provider ID: 290537
Board Certified Specialty: Yes
MICHAEL G GRIESINGER

📍 333 H ST STE 2080
CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
Fax: (619) 205-6305
🕒 After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1336556604
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Adventist Health Bakersfield, SAN JOAQUIN GENERAL HOSP
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:30AM-5:30PM SA 8:00AM-2:30PM
🌐 Website: N/A

EMERGENCY MEDICINE

PHAM, LILY

Provider ID: 304935
Board Certified Specialty: No
LILY M PHAM
📍 386 E H ST STE 202
CHULA VISTA, CA 91910
☎ Phone: (858) 966-1720
Fax: (858) 966-1725
🕒 After Hours Phone: (858) 966-1720
Provider Gender: Female
NPI: 1811423072
🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: RADY

D3. Directorio de proveedores especialistas


CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


EMERGENCY MEDICINE

QUENZER, FAITH

Provider ID: 290637

Board Certified Specialty: No
FAITH C QUENZER

 333 H ST STE 2080
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1295112670

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:


UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, UNIVERSITY
HSP OF SAN DIEGO CO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8:30AM-2:30PM

 Website: N/A


EMERGENCY MEDICINE

REARDON, JACQUELINE

Provider ID: 290673

JACQUELINE R REARDON

 333 H ST STE 2080
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1417928557

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

 Website: N/A


EMERGENCY MEDICINE

ROXAS, ROGER

Provider ID: 290600

Board Certified Specialty: No
ROGER R ROXAS

 333 H ST STE 2080
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1578910840


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM

 Website: N/A

ENDOCRINOLOGY


METABOLISM DIABETES

CARRILLO, MARITZA

Provider ID: 290970

Board Certified Specialty: No
MARITZA E CARRILLO

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 425-1184

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1649628587

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-8:00PM
SA 8:00AM-4:00PM*

 *Website: N/A*

FAMILY PRACTICE


CONTAG, ALEC

Provider ID: 307437

Board Certified Specialty: No

ALEC G CONTAG

 678 THIRD AVE
CHULA VISTA, CA 91910


 *Phone: (619) 662-4100*

Fax: (619) 662-4196

 *After Hours Phone: (619)
662-4100*

Provider Gender: Male

NPI: 1215495627

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: German*


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

FAMILY PRACTICE


DEIS, CRISTINA

Provider ID: 302757

Board Certified Specialty: No

CRISTINA E DEIS

 1637 THIRD AVE STE H
CHULA VISTA, CA 91911

 *Phone: (619) 662-4100*

Fax: (619) 662-4196

 *After Hours Phone: (619)
662-4100*

Provider Gender: Female

NPI: 1639478811

 *Provider English Spoken: Y*
Cultural Competency: N


*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

FAMILY PRACTICE


VELASQUEZ, SHARON

Provider ID: 299164

Board Certified Specialty: No

SHARON F VELASQUEZ

 678 3RD AVE
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

Fax: (619) 425-1184

 *After Hours Phone: (619)
662-4100*

Provider Gender: Female

NPI: 1972732584

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:30AM-5:30PM*

SA 8:00AM-2:30PM

 *Website: N/A*

GASTROENTEROLOGY


SHAFFER, KATHERINE


Provider ID: 305510

Board Certified Specialty: No

KATHERINE M SHAFFER

 296 H ST STE 301
CHULA VISTA, CA 91910

 *Phone: (619) 266-3332*

 *After Hours Phone: (619)
266-3332*

Provider Gender: Female

NPI: 1336405695

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: SHARP

*CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL*

CHULA VISTA, PARADISE

VALLEY HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:30AM-5:30PM*

 *Website: N/A*

GASTROENTEROLOGY

WIENER, GREGORY

Provider ID: 290741

D3. Directorio de proveedores especialistas

Board Certified Specialty: Yes
GREGORY J WIENER

353 CHURCH AVE STE A
CHULA VISTA, CA 91910

Phone: (619) 585-8883

Fax: (619) 585-0166

After Hours Phone: (619)
585-8883

Provider Gender: Male

NPI: 1811099534

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-TH

8:30AM-4:30PM

F 8:30AM-3:00PM

Website: N/A

GASTROENTEROLOGY

WIENER, GREGORY

Provider ID: 257480

Board Certified Specialty: Yes

GREGORY J WIENER

353 CHURCH AVE STE A
CHULA VISTA, CA 91910

Phone: (619) 585-8883

Fax: (619) 585-0166

After Hours Phone: (619)
585-8883

Provider Gender: Male

NPI: 1811099534

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-TH

8:30AM-4:30PM

F 8:30AM-3:00PM

Website: N/A

GENERAL PRACTICE

SAMI, REMAN

Provider ID: 295214

Board Certified Specialty: No

REMAN A SAMI

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1295362242

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE

Provider ID: 268688

Board Certified Specialty: No

ELAINE ANDERSON

310 3RD AVE STE C11
CHULA VISTA, CA 91910

Phone: (619) 426-0841

Fax: (619) 426-9197

After Hours Phone: (619)
426-0841

Provider Gender: Female

NPI: 1063558856

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

HEARING AID DEALER / SUPPLIER


DAVIS, KELLE

Provider ID: 268651

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
KELLE L DAVIS

 310 3RD AVE STE C11
CHULA VISTA, CA 91910

 Phone: (619) 426-0841

Fax: (619) 426-9197

 After Hours Phone: (619)
426-0841

Provider Gender: Female

NPI: 1902853344


 *Provider English Spoken: Y*
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:30AM-5:00PM

 *Website: N/A*

HEMATOLOGY / ONCOLOGY


JOHNSON, KENNETH

Provider ID: 262288

Board Certified Specialty: No
KENNETH B JOHNSON

 769 MEDICAL CENTER CT
STE 202

CHULA VISTA, CA 91911


 Phone: (619) 482-8430


Fax: (619) 482-8005

 After Hours Phone: (619)
482-8430

Provider Gender: Male

NPI: 1063527711

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP


CHULA VISTA MED CTR,


SHARP MEMORIAL HOSPITAL,
PARADISE VALLEY HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
9:00AM-5:00PM

 *Website: N/A*

INTERVENTIONAL


CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 309249

Board Certified Specialty: No
BURHAN MOHAMEDALI

 865 3RD AVE STE 133
CHULA VISTA, CA 91911


 Phone: (619) 616-2100


Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1831393289

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,


Adventist Health and Rideout


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
9:00AM-5:00PM

 *Website: N/A*

INTERVENTIONAL

CARDIOLOGY


MOHAMEDALI, BURHAN

Provider ID: 245576

Board Certified Specialty: No
BURHAN MOHAMEDALI

 765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911

 Phone: (619) 616-2100


Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1831393289

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

Adventist Health and Rideout


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
9:00AM-5:00PM

 *Website: N/A*


INTERVENTIONAL

CARDIOLOGY

NAGHI, JESSE

Provider ID: 247625

Board Certified Specialty: No
JESSE J NAGHI

 752 MEDICAL CENTER CT
STE 207

D3. Directorio de proveedores especialistas

CHULA VISTA, CA 91911
☎ Phone: (619) 867-0557
Fax: (619) 867-0558
🕒 After Hours Phone: (619) 867-0557
Provider Gender: Male
NPI: 1386896736
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Arabic, Bulgarian,
Russian, Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, ALVARADO
HOSPITAL LLC, SHARP CHULA
VISTA MED CTR, SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

INTERVENTIONAL CARDIOLOGY

ROUGH, STEVEN

Provider ID: 302985
Board Certified Specialty: No
STEVEN J ROUGH

📍 754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

☎ Phone: (619) 434-4208
Fax: (619) 434-4315
🕒 After Hours Phone: (619)
434-4208
Provider Gender: Male
NPI: 1386821460
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
ALVARADO HOSP MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

INTERVENTIONAL CARDIOLOGY

ROUGH, STEVEN

Provider ID: 298442
Board Certified Specialty: No
STEVEN J ROUGH

📍 754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

☎ Phone: (619) 434-4208
Fax: (619) 434-4315
🕒 After Hours Phone: (619)
434-4208
Provider Gender: Male
NPI: 1386821460
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
ALVARADO HOSP MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

INTERVENTIONAL CARDIOLOGY

SHEREV, DIMITRI

Provider ID: 268950
Board Certified Specialty: No
DIMITRI A SHEREV

📍 752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911

☎ Phone: (619) 867-0557
Fax: (619) 867-0558
🕒 After Hours Phone: (619)
867-0557
Provider Gender: Male
NPI: 1154323996
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Bulgarian, Russian,
Spanish


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL,
ALVARADO COMMUNITY
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SCRIPPS


D3. Directorio de proveedores especialistas


MEMORIAL HOSPITAL,
ALVARADO HOSPITAL LLC,
SHARP CHULA VISTA MED
CTR, SHARP CHULA VISTA
MED CTR, TRI CITY MEDICAL
CTR, SCRIPPS MERCY

HOSPITAL CHULA VISTA, Sharp
Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A


INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 295846
Board Certified Specialty: No
DEEPTHI SUDHAKAR

 765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911

 Phone: (619) 616-2100

Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Sharp
Grossmont Hospital, SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 15\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL CARDIOLOGY


SUDHAKAR, DEEPTHI

Provider ID: 296051

Board Certified Specialty: No
DEEPTHI SUDHAKAR

 765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911

 Phone: (619) 616-2100

Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Female

NPI: 1811307051


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Sharp
Grossmont Hospital, SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 15\99

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 309098

Board Certified Specialty: No

DEEPTHI SUDHAKAR

 865 THIRD AVE STE 133
CHULA VISTA, CA 91911

 Phone: (760) 294-0480

Fax: (760) 294-0481

 After Hours Phone: (760)
294-0480

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Sharp
Grossmont Hospital, SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 15\99

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

MCCULLOUGH, DEIRDRE

Provider ID: 277263

Board Certified Specialty: No
DEIRDRE M MCCULLOUGH

 386 E H ST STE 202
CHULA VISTA, CA 91910

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1639153018

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR

D3. Directorio de proveedores especialistas


WOMEN AND NEWBORNS,
Sharp Grossmont Hospital,
SHARP MEMORIAL HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


MELBER, DORA

Provider ID: 296993

Board Certified Specialty: No

DORA J MELBER



 386 E H ST STE 202
CHULA VISTA, CA 91910

 Phone: (858) 966-6710
Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1124413026

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hungarian, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


REIMERS, REBECCA

Provider ID: 294653

Board Certified Specialty: No

REBECCA M REIMERS


 386 E H ST STE 202
CHULA VISTA, CA 91910

 Phone: (858) 966-6710
Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


RICHARDSON, ALVIE

Provider ID: 264687

Board Certified Specialty: No

ALVIE C RICHARDSON

 386 E H ST STE 202
CHULA VISTA, CA 91910

 Phone: (858) 966-6710
Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1154305977

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, Sharp Grossmont
Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


WESTERMANN, MELISSA


Provider ID: 242523

Board Certified Specialty: No

MELISSA L WESTERMANN

 386 E H ST STE 202
CHULA VISTA, CA 91910

 Phone: (858) 966-6710
Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female




NPI: 1760730758

 Provider English Spoken: Y
Cultural Competency: N

D3. Directorio de proveedores especialistas

Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*


NEONATAL / PERINATAL MEDICINE

FLEMING, SARAH

Provider ID: 205646
Board Certified Specialty: No
SARAH E FLEMING




 435 H ST
CHULA VISTA, CA 91910
 *Phone: (619) 691-7000*
 *After Hours Phone: (619) 691-7000*

Provider Gender: Female
NPI: 1679809826

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*



NEONATAL / PERINATAL MEDICINE

MATOBIA, NANA

Provider ID: 297976
Board Certified Specialty: No
NANA MATOBA

 435 H ST
CHULA VISTA, CA 91910
 *Phone: (619) 691-7000*
Fax: (619) 260-7055
 *After Hours Phone: (619) 691-7000*




Provider Gender: Female
NPI: 1801952197

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Japanese*

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

NEONATAL / PERINATAL

MEDICINE



NIEMI, ANNA-KAISA

Provider ID: 262159
Board Certified Specialty: No
ANNA-KAISA NIEMI

 435 H ST
CHULA VISTA, CA 91910
 *Phone: (858) 966-5818*
Fax: (858) 966-7483

 *After Hours Phone: (858) 966-5818*

Provider Gender: Female
NPI: 1497941397


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Finnish, French, German, Spanish, Swedish*

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*









 *Website: N/A*

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301823
Board Certified Specialty: No
KATHERINE N NYMAN





D3. Directorio de proveedores especialistas

 435 H ST
CHULA VISTA, CA 91910
 Phone: (619) 691-7000
Fax: (619) 260-7055
 After Hours Phone: (619)
691-7000
Provider Gender: Female
NPI: 1003260951
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




NEONATAL / PERINATAL MEDICINE

SPEZIALE, MARK

Provider ID: 304829
Board Certified Specialty: No
MARK V SPEZIALE

 435 H ST
CHULA VISTA, CA 91910
 Phone: (619) 691-7000
Fax: (619) 260-7055
 After Hours Phone: (619)
691-7000
Provider Gender: Male
NPI: 1801978143
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL, SCRIPPS
MERCY HOSPITAL, UCSD
MEDICAL CTR, UCSD MEDICAL
CTR, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEPHROLOGY

HOREISH, ADAM

Provider ID: 99947
Board Certified Specialty: No
ADAM K HOREISH MD




 340 4TH AVE STE 4
CHULA VISTA, CA 91910
 Phone: (619) 427-1144
Fax: (619) 427-1185
 After Hours Phone: (619)
427-1144
Provider Gender: Male
NPI: 1760461206
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-5:00PM
 Website: N/A

NEPHROLOGY

HOREISH, ADAM

Provider ID: 290100
Board Certified Specialty: No
ADAM K HOREISH MD

 340 4TH AVE STE 4
CHULA VISTA, CA 91910
 Phone: (619) 427-1144
Fax: (619) 427-1185
 After Hours Phone: (619)
427-1144

Provider Gender: Male
NPI: 1760461206

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F

D3. Directorio de proveedores especialistas

9:00AM-5:00PM
Website: N/A

NEPHROLOGY

HOREISH, ADAM

Provider ID: 99947
Board Certified Specialty: No
ADAM K HOREISH MD

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619)
427-1144

Provider Gender: Male

NPI: 1760461206

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEPHROLOGY

PATEL, AMAR

Provider ID: 245639
Board Certified Specialty: No
AMAR V PATEL

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619)
427-1144

Provider Gender: Male

NPI: 1821359605

Provider English Spoken: Y

Provider Language(s)
Spoken: Gujarati, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEPHROLOGY

PHAM, JENNIFER

Provider ID: 302863
Board Certified Specialty: No
JENNIFER A PHAM

340 FOURTH AVE STE 4
CHULA VISTA, CA 91910

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619)
427-1144

Provider Gender: Female

NPI: 1235629932

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEPHROLOGY

VIDEEN, JOHN

Provider ID: 65646
Board Certified Specialty: No
JOHN S VIDEEN

752 MEDICAL CENTER CT
STE 302

CHULA VISTA, CA 91911

Phone: (619) 421-3361

Fax: (619) 869-4378

After Hours Phone: (619)
421-3361

Provider Gender: Male

NPI: 1043318199

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

NEPHROLOGY

VIDEEN, JOHN

Provider ID: 290110

Board Certified Specialty: No

JOHN S VIDEEN

752 MEDICAL CENTER CT
STE 302

CHULA VISTA, CA 91911

Phone: (619) 421-3361

Fax: (619) 869-4378

After Hours Phone: (619)
421-3361

Provider Gender: Male

NPI: 1043318199

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SHARP CORONADO HOSP

AND HEALTHCARE CTR,

PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEPHROLOGY

VIDEEN, JOHN

Provider ID: 262286

Board Certified Specialty: No

JOHN S VIDEEN

752 MEDICAL CENTER CT
STE 302

CHULA VISTA, CA 91911

Phone: (619) 421-3361

Fax: (619) 869-4378

After Hours Phone: (619)
421-3361

Provider Gender: Male

NPI: 1043318199

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SHARP CORONADO HOSP

AND HEALTHCARE CTR,

PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEPHROLOGY

YUAN, HENRY

Provider ID: 268551

Board Certified Specialty: No

HENRY YUAN

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619)
427-1144

Provider Gender: Male

NPI: 1043442379

Provider English Spoken: Y

Provider Language(s)

Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, PARADISE

VALLEY HOSPITAL, Providence

St Joseph Hospital, Providence

St Jude Medical Center, SOUTH

COAST GLOBAL MEDICAL

CENTER INC, ENCOMPASS

HEALTH REHABILITATION

HOSPITAL OF TUSTIN, Foothill

Regional Medical Center,

Foothill Regional Medical

Center, KINDRED HOSPITAL

BREA, KINDRED HOSPITAL LA

MIRADA, KINDRED HOSPITAL

SANTA ANA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEUROLOGY

GUPTA, MONIKA

Provider ID: 307937

Board Certified Specialty: No

MONIKA A GUPTA

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Phone: (619) 425-3840

Fax: (619) 425-3842

After Hours Phone: (619)
425-3840

Provider Gender: Female

D3. Directorio de proveedores especialistas

NPI: 1922243401

Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: TEMECULA
VALLEY HOSPITAL INC, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

HOSSEINZADEHMALEKI, ANA

Provider ID: 304999

Board Certified Specialty: No

ANA HOSSEINZADEHMALEKI

450 FOURTH AVE STE 215
CHULA VISTA, CA 91910

Phone: (619) 425-3840

Fax: (619) 485-5440

After Hours Phone: (619)
425-3840

Provider Gender: Female

NPI: 1316471485

Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Persian

Cultural Competency: N

Hospital Affiliation: TEMECULA
VALLEY HOSPITAL INC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 127244

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

MAREK, MAKSYM

Provider ID: 306707

Board Certified Specialty: No

MAKSYM S MAREK

450 FOURTH AVE STE 215
CHULA VISTA, CA 91910

Phone: (619) 425-3840

Fax: (619) 425-3842

After Hours Phone: (619)
425-3840

Provider Gender: Male

NPI: 1881182079

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish,
Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

MOHAMMAD, AHMAD SHAH

Board Certified Specialty: No
AHMAD SHAH S MOHAMMAD

750 MEDICAL CENTER CT
STE 6
CHULA VISTA, CA 91911

Phone: (619) 337-7900

Fax: (619) 337-7902

After Hours Phone: (619)
337-7900

Provider Gender: Male

NPI: 1902973472

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Farsi,
French, German, Pashto,
Persian, Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL, SHARP CHULA
VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

SORIA LOPEZ, JOSE

Provider ID: 295744

Board Certified Specialty: No

JOSE A SORIA LOPEZ

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Phone: (619) 425-3840

D3. Directorio de proveedores especialistas

Fax: (619) 485-5440

☎ After Hours Phone: (619)
425-3840

Provider Gender: Male

NPI: 1225474034

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, TEMECULA

VALLEY HOSPITAL INC

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-6:00PM

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

ATIGA, SCHUBERT

Provider ID: 268953

Board Certified Specialty: Yes

SCHUBERT J ATIGA

📍 752 MEDICAL CENTER CT
STE 106

CHULA VISTA, CA 91911

☎ Phone: (619) 482-8406

Fax: (619) 482-6656

☎ After Hours Phone: (619)
482-8406

Provider Gender: Male

NPI: 1033138714

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-5:00PM
F 8:00AM-0:00PM

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

ATIGA, SCHUBERT

Provider ID: 290331

Board Certified Specialty: Yes

SCHUBERT J ATIGA

📍 752 MEDICAL CENTER CT
STE 106

CHULA VISTA, CA 91911

☎ Phone: (619) 482-8406

Fax: (619) 482-6656

☎ After Hours Phone: (619)
482-8406

Provider Gender: Male

NPI: 1033138714

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 13\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-TH
8:00AM-5:00PM
F 8:00AM-0:00PM

🌐 Website: N/A

OCCUPATIONAL THERAPIST

MORRIS, SHEILA

Provider ID: 268926

Board Certified Specialty: No

SHEILA M MORRIS

📍 1020 TIERRA DEL REY STE
A-1

CHULA VISTA, CA 91910

☎ Phone: (619) 585-7104

Fax: (619) 585-7106

☎ After Hours Phone: (619)
585-7104

Provider Gender: Female

NPI: 1689039877

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
7:00AM-6:00PM
SA 7:00AM-2:00PM

🌐 Website: N/A

OPHTHALMOLOGY

GOLDMAN, DAVID

Provider ID: 308604

Board Certified Specialty: No

DAVID J GOLDMAN

📍 311 DEL MAR AVE

CHULA VISTA, CA 91910

☎ Phone: (619) 427-3355


Fax: (619) 427-0955

D3. Directorio de proveedores especialistas

 After Hours Phone: (619) 427-3355

Provider Gender: Male

NPI: 1629185467

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY

GOLDMAN, DAVID


Provider ID: 308450

Board Certified Specialty: No

DAVID J GOLDMAN

 311 DEL MAR AVE

CHULA VISTA, CA 91910


 Phone: (619) 427-3355

Fax: (619) 427-0955

 After Hours Phone: (619) 427-3355

Provider Gender: Male

NPI: 1629185467

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

HO, AMIEE


Provider ID: 297633

Board Certified Specialty: No


AMIEE HO

 342 F ST

CHULA VISTA, CA 91910


 Phone: (619) 422-1471


Fax: (619) 422-0450

 After Hours Phone: (619) 422-1471

Provider Gender: Female

NPI: 1396009478

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


OPTOMETRIST

CHAIN, PEI CHI


Provider ID: 297621

Board Certified Specialty: No

PEI C CHAIN

 342 F ST

CHULA VISTA, CA 91910


 Phone: (619) 422-1471

Fax: (619) 422-2025

 After Hours Phone: (619) 422-1471

Provider Gender: Female

NPI: 1730676727

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Mandarin

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

9:00AM-5:00PM

 Website: N/A


OPTOMETRIST

KOO, ANITA


Provider ID: 304830


Board Certified Specialty: No

ANITA K KOO

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

Provider Gender: Female

NPI: 1669825667

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OPTOMETRIST

KOO, ANITA


Provider ID: 306902

Board Certified Specialty: No

ANITA K KOO

 835 THIRD AVE STE A

CHULA VISTA, CA 91911

 Phone: (619) 425-7755

Fax: (619) 425-2138

D3. Directorio de proveedores especialistas

 After Hours Phone: (619) 425-7755

Provider Gender: Female


NPI: 1669825667


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPTOMETRIST

KOO, ANITA

Provider ID: 304537

Board Certified Specialty: No
ANITA K KOO

 835 THIRD AVESTE A
CHULA VISTA, CA 91911

 Phone: (619) 425-7755

Fax: (619) 425-2138

 After Hours Phone: (619)
425-7755

Provider Gender: Female


NPI: 1669825667


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPTOMETRIST


MASCARENO, EFRAIN

Provider ID: 268679

Board Certified Specialty: No
EFRAIN MASCARENO

 2260 OTAY LAKES RD STE
111

CHULA VISTA, CA 91915



 Phone: (619) 421-5550

Fax: (866) 254-5707

 After Hours Phone: (619)
421-5550

Provider Gender: Male

NPI: 1457507279

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-6:00PM

 Website: N/A

OPTOMETRIST


MASCARENO, EFRAIN

Provider ID: 262228

Board Certified Specialty: No
EFRAIN MASCARENO

 2260 OTAY LAKES RD STE
111

CHULA VISTA, CA 91915


 Phone: (619) 421-5550

Fax: (866) 254-5707

 After Hours Phone: (619)
421-5550

Provider Gender: Male

NPI: 1457507279

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-6:00PM

 Website: N/A


OPTOMETRIST

MASCARENO, EFRAIN

Provider ID: 262229

Board Certified Specialty: No
EFRAIN MASCARENO

 440 4TH AVE STE 9
CHULA VISTA, CA 91910

 Phone: (619) 427-2020

Fax: (866) 254-5707

 After Hours Phone: (619)
427-2020

Provider Gender: Male

NPI: 1457507279

 Provider English Spoken: Y
 Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-6:00PM

 Website: N/A

OPTOMETRIST

MASCARENO, EFRAIN

D3. Directorio de proveedores especialistas

Provider ID: 268680
Board Certified Specialty: No
EFRAIN MASCARENO
📍 440 4TH AVE STE 9
CHULA VISTA, CA 91910
☎ Phone: (619) 427-2020
📠 Fax: (866) 254-5707
🕒 After Hours Phone: (619)
427-2020
Provider Gender: Male
NPI: 1457507279

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
9:00AM-6:00PM
🌐 Website: N/A

OPTOMETRIST **NGUYEN, THU**

Provider ID: 298022
Board Certified Specialty: No
THU T NGUYEN
📍 342 F ST
CHULA VISTA, CA 91910
☎ Phone: (619) 422-1471
📠 Fax: (619) 422-0450
🕒 After Hours Phone: (619)
422-1471
Provider Gender: Female
NPI: 1326323627

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OPTOMETRIST **NGUYEN, THU**

Provider ID: 265518
Board Certified Specialty: No
THU T NGUYEN
📍 342 F ST
CHULA VISTA, CA 91910
☎ Phone: (619) 422-1471
📠 Fax: (619) 422-0450
🕒 After Hours Phone: (619)
422-1471
Provider Gender: Female
NPI: 1326323627

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OPTOMETRIST **NGUYEN, THU**

Provider ID: 125032

Board Certified Specialty: No
THU T NGUYEN
📍 342 F ST
CHULA VISTA, CA 91910
☎ Phone: (619) 422-1471
📠 Fax: (619) 422-0450
🕒 After Hours Phone: (619)
422-1471
Provider Gender: Female
NPI: 1326323627


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 13\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OPTOMETRIST **RICHARDSON, JULIA**


Provider ID: 297645
Board Certified Specialty: No
JULIA RICHARDSON
📍 342 F ST
CHULA VISTA, CA 91910
☎ Phone: (619) 422-1471
📠 Fax: (619) 422-2025
🕒 After Hours Phone: (619)
422-1471
Provider Gender: Female
NPI: 1770154528

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

D3. Directorio de proveedores especialistas

American Sign Language (ASL):  After Hours Phone: (619) 761-5308

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPTOMETRIST

SCOVILL, ALEXANDRA

Provider ID: 297625

Board Certified Specialty: No
ALEXANDRA L SCOVILL

 342 F ST
CHULA VISTA, CA 91910

 Phone: (619) 422-1471
Fax: (619) 422-0114


 After Hours Phone: (619) 422-1471


Provider Gender: Female
NPI: 1184146094

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPTOMETRIST

TRAN, JESSICA

Provider ID: 304888

Board Certified Specialty: No
JESSICA A TRAN

 340 FOURTH AVE STE 19
CHULA VISTA, CA 91910

 Phone: (619) 761-5308
Fax: (619) 591-1910


Provider Gender: Female

NPI: 1457922957

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OTOLARYNGOLOGY


MCCALLION, PATRICK

Provider ID: 290541

Board Certified Specialty: No
PATRICK G MCCALLION



 765 MEDICAL CENTER CT
STE 210

CHULA VISTA, CA 91911
 Phone: (619) 482-0565

Fax: (619) 482-2775
 After Hours Phone: (619)

482-0565
Provider Gender: Male

NPI: 1134144454

 Provider English Spoken: Y
 Provider Language(s)


Spoken: Arabic, Spanish
Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY


SAEZ, NEIL

Provider ID: 302432

Board Certified Specialty: No
NEIL A SAEZ



 765 MEDICAL CENTER CT
STE 210

CHULA VISTA, CA 91911

 Phone: (619) 482-0565
Fax: (619) 482-2775

 After Hours Phone: (619) 482-0565

Provider Gender: Male
NPI: 1518456508

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
Cultural Competency: N


Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,


SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

AGHILI, ROXANA

Provider ID: 303782



Board Certified Specialty: No

D3. Directorio de proveedores especialistas

ROXANA AGHILI




 386 E H ST STE 202
CHULA VISTA, CA 91910
 Phone: (858) 966-1720
Fax: (858) 966-1725
 After Hours Phone: (858)
966-1720

Provider Gender: Female
NPI: 1851927883

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi

Cultural Competency: N
Hospital Affiliation: KAISER
FOUNDATION HOSPITAL SAN
DIEGO, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER
 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 Website: N/A


PEDIATRIC EMERGENCY

MEDICINE

DEVERA, GEMMIE




Provider ID: N/A
Board Certified Specialty: No
GEMMIE S DEVERA

 386 E H ST STE 202
CHULA VISTA, CA 91910
 Phone: (858) 966-1720
 After Hours Phone: (858)
966-1720

Provider Gender: Female
NPI: 1366622078
 Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


PEDIATRIC EMERGENCY

MEDICINE



GORHAM, LAURA

Provider ID: 275787
Board Certified Specialty: No
LAURA M GORHAM

 386 E H ST STE 202
CHULA VISTA, CA 91910
 Phone: (858) 966-1720
Fax: (858) 966-1725
 After Hours Phone: (858)
966-1720

Provider Gender: Female
NPI: 1316162324
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 Website: N/A

PEDIATRIC EMERGENCY


MEDICINE

GROSS, MATTHEW




Provider ID: 297176
Board Certified Specialty: No
MATTHEW F GROSS

 386 E H ST STE 202
CHULA VISTA, CA 91910
 Phone: (858) 966-1720
Fax: (858) 966-1725
 After Hours Phone: (858)
966-1720

Provider Gender: Male
NPI: 1942223664

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

MENDES, CHANTAL

Provider ID: 295669
Board Certified Specialty: No
CHANTAL M MENDES

 386 E H ST STE 202
CHULA VISTA, CA 91910

D3. Directorio de proveedores especialistas

☎ Phone: (858) 966-1720

Fax: (858) 966-1725

📞 After Hours Phone: (858) 966-1720

Provider Gender: Female

NPI: 1134681265

🗨 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

🌐 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

VAIDYA, KAMALA

Provider ID: 289411

Board Certified Specialty: No

KAMALA VAIDYA

📍 386 E H ST STE 202

CHULA VISTA, CA 91910

☎ Phone: (858) 966-1720

Fax: (858) 966-1725

📞 After Hours Phone: (858) 966-1720

Provider Gender: Female

NPI: 1083840920

🗨 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

🌐 Website: N/A

PEDIATRICS

ROWHANI, NAGHMEH

Provider ID: 306065

Board Certified Specialty: No

NAGHMEH ROWHANI

📍 280 E ST

CHULA VISTA, CA 91910

☎ Phone: (619) 662-4100

Fax: (619) 426-2170

📞 After Hours Phone: (619) 662-4100

Provider Gender: Female

NPI: 1992876759

🗨 Provider English Spoken: Y

🗨 Provider Language(s)

Spoken: Persian

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\17

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

PHYSICAL MEDICINE /

REHABILITATION

RICHARDSON, HENRY

Provider ID: 295275

Board Certified Specialty: No

HENRY A RICHARDSON

📍 340 4TH AVE STE 19

CHULA VISTA, CA 91910

☎ Phone: (760) 607-5350

Fax: (760) 607-5365

📞 After Hours Phone: (760) 607-5350

Provider Gender: Male

NPI: 1407052459

🗨 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, PALOMAR MEDICAL

CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

GI, HUNG

Provider ID: 302126

Board Certified Specialty: No

HUNG GI

📍 280 E ST

CHULA VISTA, CA 91910

☎ Phone: (619) 662-4100

Fax: (619) 662-4196

📞 After Hours Phone: (619) 662-4100


Provider Gender: Male

NPI: 1023207404

🗨 Provider English Spoken: Y



🗨 Provider Language(s)





D3. Directorio de proveedores especialistas

Spoken: Chinese, French, Spanish
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PHYSICIANS ASSISTANT

GUTH, CARA









Provider ID: 299110
Board Certified Specialty: No
CARA A GUTH
 480 4TH AVE STE 501
CHULA VISTA, CA 91910
 *Phone: (619) 425-9510*
Fax: (858) 455-7197
 *After Hours Phone: (619) 425-9510*
Provider Gender: Female
NPI: 1992177182

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 21\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 9:00AM-5:00PM*
 *Website: N/A*

PHYSICIANS ASSISTANT



INDA, PRISCILLA




Provider ID: 309072
Board Certified Specialty: No

PRISCILLA S INDA
 429 BROADWAY
CHULA VISTA, CA 91910
 *Phone: (619) 434-0204*
Fax: (619) 337-0191
 *After Hours Phone: (619) 434-0204*
Provider Gender: Female
NPI: 1679008379
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, Russian, Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:30AM-5:00PM*
 *Website: N/A*

PHYSICIANS ASSISTANT









INDA, PRISCILLA

Provider ID: 265072
Board Certified Specialty: No
PRISCILLA S INDA
 450 4TH AVE STE 215
CHULA VISTA, CA 91910
 *Phone: (619) 434-0204*
Fax: (619) 337-0191
 *After Hours Phone: (619) 434-0204*
Provider Gender: Female
NPI: 1679008379
 *Provider English Spoken: Y*
 *Provider Language(s)*

Spoken: Arabic, Russian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 18\110
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:30AM-5:00PM*
 *Website: N/A*

PHYSICIANS ASSISTANT

MARISCAL, MIGUEL

Provider ID: 308408
Board Certified Specialty: No
MIGUEL A MARISCAL
 855 THIRD AVE STE 2200
CHULA VISTA, CA 91911
 *Phone: (619) 662-4100*
Fax: (619) 662-4196
 *After Hours Phone: (619) 662-4100*
Provider Gender: Male
NPI: 1760508923
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

D3. Directorio de proveedores especialistas

PHYSICIANS ASSISTANT

VARGAS, CHRISTOPHER

Provider ID: 295945

Board Certified Specialty: No
CHRISTOPHER B VARGAS

2452 FENTON ST STE C101
CHULA VISTA, CA 91914

Phone: (619) 600-5309

Fax: (619) 655-4700

After Hours Phone: (619)
600-5309

Provider Gender: Male

NPI: 1922505775

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

VARGAS, CHRISTOPHER

Provider ID: 295828

Board Certified Specialty: No
CHRISTOPHER B VARGAS

2452 FENTON ST STE C203
CHULA VISTA, CA 91914

Phone: (619) 600-5309

Fax: (619) 655-4700

After Hours Phone: (619)
600-5309

Provider Gender: Male

NPI: 1922505775

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

VARGAS, CHRISTOPHER

Provider ID: 268744

Board Certified Specialty: No
CHRISTOPHER B VARGAS

2452 FENTON ST STE C203
CHULA VISTA, CA 91914

Phone: (619) 600-5309

Fax: (619) 655-4700

After Hours Phone: (619)
600-5309

Provider Gender: Male

NPI: 1922505775

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

WRIGHT, DEREK

Provider ID: 302389

Board Certified Specialty: No
DEREK J WRIGHT

340 FOURTH AVESTE 19
CHULA VISTA, CA 91910

Phone: (619) 761-5308

Fax: (619) 591-1910

After Hours Phone: (619)
761-5308

Provider Gender: Male

NPI: 1629674858

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PODIATRIST

BRAZIER, SETH

Provider ID: 306399

Board Certified Specialty: No
SETH J BRAZIER

855 THIRD AVESTE 1100
CHULA VISTA, CA 91911

Phone: (619) 631-4033

Fax: (619) 880-5057

D3. Directorio de proveedores especialistas

☎ After Hours Phone: (619) 631-4033

Provider Gender: Male

NPI: 1033554324

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: KAWEAH

DELTA DISTRICT HOSP, SELMA

COMMUNITY HOSPITAL,

ADVENTIST MEDICAL CENTER,

ADVENTIST MED CTR

REEDLEY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 9:00AM-5:00PM

🌐 Website: N/A

PODIATRIST

CAINE, SAMUEL

Provider ID: 308636

Board Certified Specialty: No

SAMUEL CAINE

📍 345 F ST STE 100 CHULA VISTA, CA 91910

☎ Phone: (619) 727-3481

Fax: (619) 420-7087

☎ After Hours Phone: (619) 727-3481

Provider Gender: Male

NPI: 1396230298

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, SHARP MEMORIAL

HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

PODIATRIST

CAINE, SAMUEL

Provider ID: 308211

Board Certified Specialty: No

SAMUEL CAINE

📍 345 F ST STE 100 CHULA VISTA, CA 91910

☎ Phone: (619) 727-3481

Fax: (619) 420-7087

☎ After Hours Phone: (619) 727-3481

Provider Gender: Male

NPI: 1396230298

☑ Provider English Spoken: Y Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, SHARP MEMORIAL

HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

PODIATRIST

DAVIDSON III, JOHN

Provider ID: 129545

Board Certified Specialty: No

JOHN A DAVIDSON III III

📍 345 F ST STE 100 CHULA VISTA, CA 91910

☎ Phone: (619) 427-3481

Fax: (619) 420-7807

☎ After Hours Phone: (619) 427-3481

Provider Gender: Male

NPI: 1689069874

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 9:00AM-4:30PM

🌐 Website: N/A

D3. Directorio de proveedores especialistas

PODIATRIST

READ, TRENTON

Provider ID: 296655

Board Certified Specialty: No

TRENTON READ

855 3RD AVE STE 1100
CHULA VISTA, CA 91911

Phone: (619) 631-4033

Fax: (619) 880-5057

After Hours Phone: (619)
631-4033

Provider Gender: Male

NPI: 1952963431

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

BAYLON, ALDO

Provider ID: 290243

Board Certified Specialty: No

ALDO BAYLON

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1649429150

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 8:00AM-4:00PM

Website: N/A

PSYCHOLOGIST

CELAYA, PATRICIA

Provider ID: 294875

Board Certified Specialty: No

PATRICIA E CELAYA

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1952656902

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 8:00AM-4:00PM

Website: N/A

PSYCHOLOGIST

GALLO, LINDA

Provider ID: 296782

Board Certified Specialty: No

LINDA C GALLO

780 BAY BLVD STE 200
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 240-7852

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1427773621

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

GOULD, HILARY

Provider ID: 290467

Board Certified Specialty: No

HILARY GOULD

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 271-0260

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1104297696

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM*

 *Website: N/A*


PSYCHOLOGIST

WIJAYARATNE, IMANIE

Provider ID: 290092

*Board Certified Specialty: No
IMANIE S WIJAYARATNE*

 *678 3RD AVE
CHULA VISTA, CA 91910*

 *Phone: (619) 662-4100*

Fax: (619) 245-1184

 *After Hours Phone: (619)
662-4100*

Provider Gender: Female

NPI: 1932358355

 *Provider English Spoken: Y
Cultural Competency: N*


Medi-Cal Open Panel: Yes

Min/Max Age: 5\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


RADIATION ONCOLOGY

CARMONA, RUBEN

Provider ID: 303101

*Board Certified Specialty: No
RUBEN CARMONA*

 *769 MEDICAL CENTER CT
CHULA VISTA, CA 91911*


 *Phone: (858) 939-5010*

Fax: (619) 740-8499

 *After Hours Phone: (858)
939-5010*

Provider Gender: Male

NPI: 1275929242

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp

Grossmont Hospital, SHARP

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


RADIATION ONCOLOGY

COLEMAN, LORI

Provider ID: 206393

*Board Certified Specialty: No
LORI A COLEMAN*

 *769 MEDICAL CENTER CT
CHULA VISTA, CA 91911*


 *Phone: (619) 502-5851*

Fax: (619) 502-5865

 *After Hours Phone: (619)
502-5851*

Provider Gender: Female

NPI: 1053348920

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SHARP


CHULA VISTA MED CTR,

SHARP MEMORIAL HOSPITAL,

*GROSSMONT HOSPITAL,
PALOMAR MEDICAL CENTER,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100
American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


RADIATION ONCOLOGY

VOLPP, PAUL

Provider ID: 221102

*Board Certified Specialty: No
PAUL B VOLPP*

 *769 MEDICAL CENTER CT
CHULA VISTA, CA 91911*

 *Phone: (619) 502-5851*

Fax: (619) 502-5865

 *After Hours Phone: (619)
502-5851*

Provider Gender: Male

NPI: 1225186232

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

GROSSMONT HOSPITAL,


PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

D3. Directorio de proveedores especialistas

 Hours: M-F
8:00AM-5:00PM
 Website: N/A


REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON

Provider ID: 304529
Board Certified Specialty: No
BRANDON G CHENG

 1392 E PALOMAR ST STE
503

CHULA VISTA, CA 91913

 Phone: (619) 482-3000

Fax: (619) 482-3001

 After Hours Phone: (619)
482-3000

Provider Gender: Male


NPI: 1336894724


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
7:00AM-7:00PM
F 7:00AM-5:00PM
SA 8:00AM-1:00PM

 Website: N/A


REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON

Provider ID: 307786
Board Certified Specialty: No
BRANDON G CHENG

 1392 E PALOMAR ST STE
503

CHULA VISTA, CA 91913

 Phone: (619) 482-3000

Fax: (619) 482-3001

 After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1336894724


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
7:00AM-7:00PM
F 7:00AM-5:00PM
SA 8:00AM-1:00PM


 Website: N/A

REGISTERED PHYSICAL THERAPIST

JAIN, ALEXANDRA

Provider ID: 305150
Board Certified Specialty: No
ALEXANDRA F JAIN

 880 THIRD AVE STE A
CHULA VISTA, CA 91911



 Phone: (619) 205-4585

Fax: (619) 271-3183

 After Hours Phone: (619)
205-4585

Provider Gender: Female

NPI: 1063170603

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 55\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA

Provider ID: 299889
Board Certified Specialty: No
ANDREA L JIMENEZ

 1392 E PALOMAR ST STE
503

CHULA VISTA, CA 91913

 Phone: (619) 482-3000

Fax: (619) 482-3001

 After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1407440670

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 7:00AM-7:00PM

 Website: N/A

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI

Provider ID: 301380
Board Certified Specialty: No
PRACHI KARANDE

 1392 E PALOMAR ST STE
503

D3. Directorio de proveedores especialistas

CHULA VISTA, CA 91913
☎ Phone: (619) 482-3000
Fax: (619) 482-3001
🕒 After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1699357525
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI
Provider ID: 287100
Board Certified Specialty: No
PRACHI KARANDE
📍 1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
☎ Phone: (619) 482-3000
Fax: (619) 482-3001
🕒 After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1699357525
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA
Provider ID: 305014
Board Certified Specialty: No
TIA NGUYEN
📍 1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
☎ Phone: (619) 482-3000
Fax: (619) 482-3001
🕒 After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1457136269

☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-TH
7:00AM-7:00PM
F 7:00AM-4:00PM
🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA
Provider ID: 305013
Board Certified Specialty: No
TIA NGUYEN
📍 1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
☎ Phone: (619) 482-3000

Fax: (619) 482-3001
🕒 After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1457136269
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-TH
7:00AM-7:00PM
F 7:00AM-4:00PM
🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW
Provider ID: 301994
Board Certified Specialty: No
ANDREW NOVENCIDO
📍 1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
☎ Phone: (619) 482-3000
Fax: (619) 482-3001
🕒 After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1447723937
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F

D3. Directorio de proveedores especialistas

8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW

Provider ID: 286782
Board Certified Specialty: No
ANDREW NOVENCIDO

1392 E PALOMAR ST STE 503

CHULA VISTA, CA 91913

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619) 482-3000

Provider Gender: Male

NPI: 1447723937

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

SPARKS, TODD

Provider ID: 301108
Board Certified Specialty: No
TODD M SPARKS

1392 E PALOMAR ST STE 503

CHULA VISTA, CA 91913

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619)

482-3000
Provider Gender: Male
NPI: 1265481139

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M 7:00AM-7:00PM
TU 7:00AM-0:00PM

W-TH 7:00AM-7:00PM

F 7:00AM-0:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

SPARKS, TODD

Provider ID: 129142
Board Certified Specialty: No
TODD M SPARKS

1392 E PALOMAR ST STE 503

CHULA VISTA, CA 91913

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619) 482-3000

Provider Gender: Male

NPI: 1265481139

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M 7:00AM-7:00PM
TU 7:00AM-0:00PM

W-TH 7:00AM-7:00PM

F 7:00AM-0:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

STAHL, KEVIN

Provider ID: 305424

Board Certified Specialty: No
KEVIN STAHL

1392 E PALOMAR ST STE 503

CHULA VISTA, CA 91913

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619) 482-3000

Provider Gender: Male

NPI: 1760194302

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

STAHL, KEVIN

Provider ID: 301418

Board Certified Specialty: No
KEVIN STAHL

1392 E PALOMAR ST STE

D3. Directorio de proveedores especialistas

503
CHULA VISTA, CA 91913
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1760194302

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

VILLANUEVA, GIOVANNI

Provider ID: 301532

Board Certified Specialty: No

GIOVANNI X VILLANUEVA

1392 E PALOMAR ST STE
503

CHULA VISTA, CA 91913

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1063046878

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7:00AM-7:00PM

Website: N/A

RHEUMATOLOGY

CHITKARA, PUJA

Provider ID: 262358

Board Certified Specialty: No

PUJA CHITKARA

765 MEDICAL CENTER CT
STE 216

CHULA VISTA, CA 91911

Phone: (619) 623-3000

Fax: (619) 623-3001

After Hours Phone: (619)
623-3000

Provider Gender: Female

NPI: 1871718189

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Russian,
Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-4:30PM

Website: N/A

RHEUMATOLOGY

CHWA, JEFFREY

Provider ID: 268780

Board Certified Specialty: No
JEFFREY K CHWA

765 MEDICAL CENTER CT
STE 216

CHULA VISTA, CA 91911

Phone: (619) 623-3000

Fax: (619) 623-3001

After Hours Phone: (619)
623-3000

Provider Gender: Male

NPI: 1285989236

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS

Provider ID: 296928

Board Certified Specialty: No

MIRELIS AROCHO-SALGADO

333 H ST STE 5000

CHULA VISTA, CA 91910

Phone: (877) 757-8353

Fax: (818) 357-2505

After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1063660165

Provider English Spoken: Y
Cultural Competency: N

D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

SPEECH PATHOLOGIST

CLARK, MELISSA


Provider ID: 296923

Board Certified Specialty: No

MELISSA A CLARK

 333 H ST STE 5000

CHULA VISTA, CA 91910

 Phone: (877) 757-8353


Fax: (818) 357-2505

 After Hours Phone: (877) 757-8353

Provider Gender: Female

NPI: 1760546428

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Arabic, Armenian, Farsi, Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 7:00AM-7:00PM

M-F 7:00AM-7:00PM

 Website: N/A

SPEECH PATHOLOGIST

DURNAN, CASSANDRA


Provider ID: 307884

Board Certified Specialty: No

CASSANDRA L DURNAN

 333 H ST STE 5000

CHULA VISTA, CA 91910


 Phone: (877) 757-8353


Fax: (818) 357-2505

 After Hours Phone: (877) 757-8353

Provider Gender: Female

NPI: 1073873501

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7:00AM-7:00PM

 Website: N/A

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO

Provider ID: 304607


Board Certified Specialty: No

SERGIO G CASILLAS

BERUMEN

 1111 BROADWAY STE 305

CHULA VISTA, CA 91911


 Phone: (619) 576-7007


Fax: (619) 567-7775

 After Hours Phone: (619) 576-7007

Provider Gender: Male

NPI: 1437470762

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

HEALTH, PARADISE VALLEY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS MERCY HOSPITAL,
PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC

ANDRY, JAMES


Provider ID: 302084

Board Certified Specialty: No

JAMES P ANDRY

 750 MEDICAL CENTER CT
STE 14

CHULA VISTA, CA 91911

 Phone: (858) 824-1703


Fax: (858) 455-6473

 After Hours Phone: (858) 824-1703

Provider Gender: Male

NPI: 1679726103

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, Sharp

Grossmont Hospital, SHARP

MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL, TRI

D3. Directorio de proveedores especialistas

CITY MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

SURGERY ORTHOPEDIC

KUSNEZOV, NICHOLAS


Provider ID: 303195

Board Certified Specialty: No


NICHOLAS A KUSNEZOV

 750 MEDICAL CENTER CT
STE 14

CHULA VISTA, CA 91911

 Phone: (858) 824-1703

Fax: (858) 455-6473

 After Hours Phone: (858)
824-1703

Provider Gender: Male

NPI: 1396185161

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TWIN

CITIES COMMUNITY

HOSPITAL, TRI CITY MEDICAL

CTR, PARADISE VALLEY

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, Sharp

Grossmont Hospital, Sharp

Grossmont Hospital, SHARP


MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CMP PENDLETON

CERTIFIED NURSE


PRACTITIONER


FREEMAN, WANDA


Provider ID: 298117

Board Certified Specialty: No

WANDA FREEMAN

 619 CROUCH ST
CMP PENDLETON, CA
92054

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1659504264

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HARRIS, PAMELA


Provider ID: 302288

Board Certified Specialty: No

PAMELA R HARRIS

 818 PIER VIEW WAY
CMP PENDLETON, CA

92054


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1407545221


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CORONADO

CERTIFIED NURSE

PRACTITIONER


LANE, KIMBERLY

Provider ID: 301599

Board Certified Specialty: No

KIMBERLY A LANE

 230 PROSPECT PL STE 210
CORONADO, CA 92118

 Phone: (619) 299-0670

Fax: (858) 429-7929

 After Hours Phone: (619)
299-0670

Provider Gender: Female

NPI: 1457670119

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE

Provider ID: 268655
Board Certified Specialty: No
KELLE L DAVIS

801 ORANGE AVE
CORONADO, CA 92118

Phone: (619) 437-8154

Fax: (310) 989-3092

After Hours Phone: (619)
437-8154

Provider Gender: Female

NPI: 1902853344

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:30AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

ANDRY, JAMES

Provider ID: 302087

Board Certified Specialty: No
JAMES P ANDRY

230 PROSPECT PL STE 230
CORONADO, CA 92118

Phone: (619) 435-7282

Fax: (619) 435-3723

After Hours Phone: (619)
435-7282

Provider Gender: Male

NPI: 1679726103

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, Sharp

Grossmont Hospital, SHARP

MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL, TRI

CITY MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

PALLIA, CHRISTOPHER

Provider ID: 302102

Board Certified Specialty: No

CHRISTOPHER S PALLIA

230 PROSPECT PL STE 230
CORONADO, CA 92118

Phone: (619) 435-7282

Fax: (619) 435-3723

After Hours Phone: (619)
435-7282

Provider Gender: Male

NPI: 1497751457

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

Email: INFO@PALLIAMD.COM

EL CAJON

CARDIOVASCULAR DISEASE

LERNER, JONATHAN

Provider ID: 303446

Board Certified Specialty: No

JONATHAN H LERNER

1625 E MAIN ST STE 201

EL CAJON, CA 92021

Phone: (619) 486-6512

Fax: (619) 616-2104

After Hours Phone: (619)
486-6512

Provider Gender: Male

NPI: 1962899823

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

D3. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED ACUPUNCTURIST

CRAFT, KEVIN

Provider ID: 290945

Board Certified Specialty: No
KEVIN E CRAFT

 855 E MADISON AVE
EL CAJON, CA 92020


 Phone: (619) 440-2751

Fax: (360) 462-2746

 After Hours Phone: (619)
440-2751

Provider Gender: Male

NPI: 1659745610

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: TU-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED ACUPUNCTURIST

LOPEZ, MARIA

Provider ID: 308432

Board Certified Specialty: No
MARIA E LOPEZ

 855 E MADISON AVE
EL CAJON, CA 92020


 Phone: (619) 440-2751

Fax: (360) 462-2746

 After Hours Phone: (619)
440-2751

Provider Gender: Female

NPI: 1790075711

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED ACUPUNCTURIST

LOPEZ, MARIA

Provider ID: 307856

Board Certified Specialty: No
MARIA E LOPEZ

 855 E MADISON AVE
EL CAJON, CA 92020


 Phone: (619) 440-2751

Fax: (360) 462-2746

 After Hours Phone: (619)
440-2751

Provider Gender: Female

NPI: 1790075711

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

BRANNEN, MANDY

Provider ID: 241600

Board Certified Specialty: No
MANDY M BRANNEN

 215 W MADISON AVE
EL CAJON, CA 92020

 Phone: (619) 667-6125

Fax: (619) 590-9036

 After Hours Phone: (619)
667-6125

Provider Gender: Female

NPI: 1891205159

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 4:00PM-7:00PM
W 4:00PM-7:00PM

F 4:00PM-7:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHUDACEK, JANET

Provider ID: 241626


Board Certified Specialty: No
JANET M CHUDACEK



 215 W MADISON AVE
EL CAJON, CA 92020

D3. Directorio de proveedores especialistas

 Phone: (760) 737-6960
 Fax: (760) 741-2782
 After Hours Phone: (760) 737-6960

Provider Gender: Female
NPI: 1932606118




 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M 4:00PM-7:00PM
W 4:00PM-7:00PM
F 4:00PM-7:00PM
 Website: N/A



CERTIFIED NURSE PRACTITIONER

HAMID, WAHIDA

Provider ID: 302295
Board Certified Specialty: No
WAHIDA N HAMID



 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 Fax: (619) 205-6305
 After Hours Phone: (619) 662-4100

Provider Gender: Female
NPI: 1164812293

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Persian, Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT



PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


CERTIFIED NURSE



PRACTITIONER

MANRIQUEZ, LISETTE

Provider ID: 307102
Board Certified Specialty: No
LISETTE MANRIQUEZ

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 Fax: (619) 205-6305



 After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1760058911

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A


CERTIFIED NURSE

PRACTITIONER



ORPILLA, IMELDA

Provider ID: 307131
Board Certified Specialty: No
IMELDA M ORPILLA


 855 E MADISON AVE
EL CAJON, CA 92020
 Phone: (833) 867-4642
 Fax: (360) 462-2746

 After Hours Phone: (833) 867-4642

Provider Gender: Female
NPI: 1790785988

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER



ORPILLA, IMELDA

Provider ID: 306861
Board Certified Specialty: No
IMELDA M ORPILLA

 855 E MADISON AVE
EL CAJON, CA 92020
 Phone: (833) 867-4642
 Fax: (360) 462-2746

 After Hours Phone: (833) 867-4642

Provider Gender: Female
NPI: 1790785988

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU

8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

PIRTLE, KEYSHONE


Provider ID: 284244

Board Certified Specialty: No

KEYSHONE D PIRTLE

 5442 SYCUAN RD

EL CAJON, CA 92019

 Phone: (619) 445-0707

Fax: (619) 445-9764

 After Hours Phone: (619) 445-0707

Provider Gender: Male

NPI: 1417567827

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, SHANTRICE


Provider ID: 296007

Board Certified Specialty: No

SHANTRICE M WILLIAMS

 855 E MADISON AVE

EL CAJON, CA 92020


 Phone: (619) 440-2751

Fax: (360) 462-2746

 After Hours Phone: (619) 440-2751

Provider Gender: Female

NPI: 1578865549

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:00AM-2:00PM

TU-F 8:00AM-5:00PM

 Website: N/A

CHIROPRACTOR

MCCOWN, BARRY


Provider ID: 301343

Board Certified Specialty: No


BARRY J MCCOWN

 855 E MADISON AVE

EL CAJON, CA 92020

 Phone: (619) 440-2751

Fax: (360) 462-2746

 After Hours Phone: (619) 440-2751

Provider Gender: Male

NPI: 1487781035

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CHIROPRACTOR

MCCOWN, BARRY


Provider ID: 303849

Board Certified Specialty: No


BARRY J MCCOWN

 470 N MOLLISON AVE

EL CAJON, CA 92021

 Phone: (833) 867-4642

Fax: (360) 462-5840

 After Hours Phone: (833) 867-4642

Provider Gender: Male

NPI: 1487781035

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CHIROPRACTOR

MCCOWN, BARRY


Provider ID: 303815

Board Certified Specialty: No

BARRY J MCCOWN

 855 E MADISON AVE

EL CAJON, CA 92020

 Phone: (619) 440-2751

Fax: (360) 462-2746

 After Hours Phone: (619)

D3. Directorio de proveedores especialistas

440-2751
Provider Gender: Male
NPI: 1487781035
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

DERMATOLOGY

LIN, SHINKO

Provider ID: 308218
Board Certified Specialty: No
SHINKO K LIN
 222 W MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 579-5115
Fax: (619) 749-6174
 After Hours Phone: (619)
579-5115
Provider Gender: Female
NPI: 1205130036
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:30AM-4:30PM
 Website: N/A

Website: N/A

DERMATOLOGY

LIN, SHINKO

Provider ID: 306321
Board Certified Specialty: No
SHINKO K LIN
 222 W MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 579-5115
Fax: (619) 749-6174
 After Hours Phone: (619)
579-5115
Provider Gender: Female
NPI: 1205130036

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:30AM-4:30PM
 Website: N/A

FAMILY PRACTICE

GHAFFARI, DAUOD

Provider ID: 308735
Board Certified Specialty: No
DAUOD M GHAFFARI
 855 E MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 440-2751
Fax: (360) 462-2746
 After Hours Phone: (619)
440-2751

Provider Gender: Male
NPI: 1053417691
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Persian,
Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

FAMILY PRACTICE

RONQUILLO, KAREN AN

Provider ID: 304781
Board Certified Specialty: No
KAREN AN C RONQUILLO
 855 E MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 440-2751
Fax: (360) 462-2746
 After Hours Phone: (619)
440-2751
Provider Gender: Female
NPI: 1275160012
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

D3. Directorio de proveedores especialistas

 Website: N/A


GASTROENTEROLOGY

NOVO, MEGAN

Provider ID: 296067

Board Certified Specialty: No
MEGAN E NOVO

 2732 NAVAJO RD STE 200
EL CAJON, CA 92020

 Phone: (619) 266-3332

Fax: (619) 266-6000

 After Hours Phone: (619)
266-3332

Provider Gender: Female

NPI: 1770961971

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL, TRI CITY
MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, UCSD LA JOLLA

JOHN SALLY THORNTON,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, UNIVERSITY OF

CALIFORNIA IRVINE MED CTR,

UCSD MEDICAL CTR, UCSD

MEDICAL CTR, SCRIPPS

MERCY HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE

Provider ID: 268692

Board Certified Specialty: No
ELAINE ANDERSON

 1767 E MAIN ST
EL CAJON, CA 92021

 Phone: (619) 440-6516

Fax: (619) 440-6547

 After Hours Phone: (619)
440-6516

Provider Gender: Female

NPI: 1063558856

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


HEARING AID DEALER / SUPPLIER

DAVIS, KELLE

Provider ID: 268650

Board Certified Specialty: No
KELLE L DAVIS

 1767 E MAIN ST
EL CAJON, CA 92021

 Phone: (619) 440-6516

Fax: (619) 440-6547

 After Hours Phone: (619)
440-6516

Provider Gender: Female

NPI: 1902853344


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

AWDISHO, ALAN

Provider ID: 291282

Board Certified Specialty: No
ALAN AWDISHO

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100


Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1164795498

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Assyrian, Syriac

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A






INTERNAL MEDICINE




MAY, LOUIS

Provider ID: 294916

Board Certified Specialty: No
LOUIS M MAY

D3. Directorio de proveedores especialistas






 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100
Provider Gender: Male
NPI: 1720497514
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:

EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

MICHAEL, RAMI

Provider ID: 294908
Board Certified Specialty: No
RAMI Y MICHAEL

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100
Provider Gender: Male
NPI: 1467871673
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A


INTERVENTIONAL

CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 309247
Board Certified Specialty: No
BURHAN MOHAMEDALI

 1625 E MAIN ST STE 201
EL CAJON, CA 92021


 Phone: (619) 486-6512


Fax: (619) 486-6470

 After Hours Phone: (619)
486-6512

Provider Gender: Male

NPI: 1831393289

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP


CHULA VISTA MED CTR,
Adventist Health and Rideout


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

INTERVENTIONAL

CARDIOLOGY


SHEREV, DIMITRI


Provider ID: 302988

Board Certified Specialty: No

DIMITRI A SHEREV

 1380 EL CAJON BLVD
EL CAJON, CA 92020


 Phone: (619) 867-0557

 After Hours Phone: (619)
867-0557

Provider Gender: Male

NPI: 1154323996

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Bulgarian, Russian,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,
GROSSMONT HOSPITAL,
ALVARADO COMMUNITY
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
ALVARADO HOSPITAL LLC,
SHARP CHULA VISTA MED
CTR, SHARP CHULA VISTA
MED CTR, TRI CITY MEDICAL
CTR, SCRIPPS MERCY
HOSPITAL CHULA VISTA, Sharp
Grossmont Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

D3. Directorio de proveedores especialistas

INTERVENTIONAL

CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 295843

Board Certified Specialty: No
DEEPTHI SUDHAKAR

📍 1625 E MAIN ST STE 201
EL CAJON, CA 92021

☎ Phone: (619) 486-6512

Fax: (619) 616-2104

🕒 After Hours Phone: (619)
486-6512

Provider Gender: Female

NPI: 1811307051

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 15\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

INTERVENTIONAL

CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 309095

Board Certified Specialty: No
DEEPTHI SUDHAKAR

📍 1625 E MAIN ST STE 201
EL CAJON, CA 92021

☎ Phone: (619) 486-6512

Fax: (619) 616-2104

🕒 After Hours Phone: (619)
486-6512

Provider Gender: Female

NPI: 1811307051

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp
Grossmont Hospital, SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 15\99

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OPTOMETRIST

AOTO, KIM

Provider ID: 268721

Board Certified Specialty: No

KIM N AOTO

📍 450 FLETCHER PKWY STE
112

EL CAJON, CA 92020

☎ Phone: (800) 898-2020

Fax: (844) 897-3788

🕒 After Hours Phone: (800)
898-2020

Provider Gender: Female

NPI: 1780935650

🗨 Provider English Spoken: Y
🗨 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

OPTOMETRIST

KOO, ANITA

Provider ID: 306904

Board Certified Specialty: No
ANITA K KOO

📍 231 W MAIN ST
EL CAJON, CA 92020

☎ Phone: (619) 425-7755

Fax: (619) 425-2138

🕒 After Hours Phone: (619)
425-7755

Provider Gender: Female

NPI: 1669825667

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

INDA, PRISCILLA

Provider ID: 265073

Board Certified Specialty: No
PRISCILLA S INDA

📍 328 HIGHLAND AVE STE
200

EL CAJON, CA 92020

☎ Phone: (619) 930-9404



Fax: (619) 930-9426

🕒 After Hours Phone: (619)
930-9404

Provider Gender: Female

NPI: 1679008379

D3. Directorio de proveedores especialistas


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Russian,
Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes
Min/Max Age: 18\110

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

LE, TAYLOR

Provider ID: 304574

Board Certified Specialty: No
TAYLOR T LE

 855 E MADISON AVE
EL CAJON, CA 92020


 Phone: (619) 440-2751

Fax: (360) 462-2746

 After Hours Phone: (619)
440-2751

Provider Gender: Female

NPI: 1396478400

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

RAMOS, JACQUELYN

Provider ID: 301106

Board Certified Specialty: No
JACQUELYN RAMOS

 855 E MADISON AVE
EL CAJON, CA 92020


 Phone: (619) 440-2751

Fax: (360) 462-2746

 After Hours Phone: (619)
440-2751

Provider Gender: Female

NPI: 1003515131

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

ROSENBLATT, SHERILYN


Provider ID: 305449

Board Certified Specialty: No
SHERILYN ROSENBLATT

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1114041621

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

ARAIZA, ERNESTINA

Provider ID: 290286

Board Certified Specialty: No
ERNESTINA ARAIZA

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

Fax: (619) 785-3356

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1568608636

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PSYCHOLOGIST

CASEY, SHANNON

Provider ID: 306785

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
SHANNON K CASEY

215 W MADISON AVE
EL CAJON, CA 92020
Phone: (760) 737-6935
Fax: (760) 741-2782

After Hours Phone: (760)
737-6935

Provider Gender: Female

NPI: 1548873755

Provider English Spoken: Y

Provider Language(s)
Spoken: Sign Language

Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-7:00PM

Website: N/A

PSYCHOLOGIST

CASEY, SHANNON

Provider ID: 290309

Board Certified Specialty: No
SHANNON K CASEY

215 W MADISON AVE
EL CAJON, CA 92020
Phone: (760) 737-6935
Fax: (760) 741-2782

After Hours Phone: (760)
737-6935

Provider Gender: Female

NPI: 1548873755

Provider English Spoken: Y

Provider Language(s)
Spoken: Sign Language

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-7:00PM

Website: N/A

PSYCHOLOGIST

GUARDADO-SOTO, RAQUEL

Provider ID: 290342

Board Certified Specialty: No
RAQUEL GUARDADO-SOTO

855 E MADISON AVE
EL CAJON, CA 92020
Phone: (619) 440-2751
Fax: (360) 462-2746

After Hours Phone: (619)
440-2751

Provider Gender: Female

NPI: 1194999276

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 13\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PSYCHOLOGIST

WHEELER, KIM

Provider ID: 302144

Board Certified Specialty: No
KIM N WHEELER

875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 785-3356

After Hours Phone: (619)

662-4100

Provider Gender: Female

NPI: 1700577434

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 11\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

CAMPA, PATRICIA

Provider ID: 302398

Board Certified Specialty: No
PATRICIA CAMPA

860 JAMACHA RD STE 203
EL CAJON, CA 92019
Phone: (619) 573-6373
Fax: (619) 378-6578

After Hours Phone: (619)
573-6373

Provider Gender: Female

NPI: 1528079357

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

D3. Directorio de proveedores especialistas

REGISTERED PHYSICAL THERAPIST

MORRIS, CHAD

Provider ID: 302403

Board Certified Specialty: No
CHAD R MORRIS

📍 860 JAMACHA RD STE 203
EL CAJON, CA 92019

☎ Phone: (619) 573-6373

Fax: (619) 378-6578

🕒 After Hours Phone: (619)
573-6373

Provider Gender: Male

NPI: 1841307063

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

ENCINITAS

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304139

Board Certified Specialty: No
JACQUELINE ARELLANO

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

🗨 Provider English Spoken: Y

🗨 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED ACUPUNCTURIST

GONZALEZ, ANDRES

Provider ID: 298659

Board Certified Specialty: No
ANDRES D GONZALEZ

📍 1130 2ND ST
ENCINITAS, CA 92024

☎ Phone: (760) 736-6767

Fax: (760) 736-8740

🕒 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1841857729

🗨 Provider English Spoken: Y
🗨 Provider Language(s)

Spoken: Chinese, Spanish
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304133

Board Certified Specialty: No
FIDES Q JULIAN

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

🗨 Provider English Spoken: Y
🗨 Provider Language(s)

Spoken: Tagalog
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CARDINELL, ANNA

Provider ID: 291412

Board Certified Specialty: No
ANNA C CARDINELL

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1306978614

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

D3. Directorio de proveedores especialistas

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE **PRACTITIONER**


CHAMBERS, KATRINA

Provider ID: 303521


Board Certified Specialty: No
KATRINA N CHAMBERS

 781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024

 Phone: (760) 183-0441

Fax: (760) 635-5972

 After Hours Phone: (760)
183-0441

Provider Gender: Female

NPI: 1710695143


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE **PRACTITIONER**


DWYER, ERIN

Provider ID: 301447

Board Certified Specialty: No
ERIN DWYER

 320 SANTA FE DR STE 108

ENCINITAS, CA 92024

 Phone: (760) 436-4558
Fax: (858) 429-7926

 After Hours Phone: (760)
436-4558

Provider Gender: Female

NPI: 1003260894

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

CERTIFIED NURSE **PRACTITIONER**


HEAD, KRISTIN

Provider ID: 268657

Board Certified Specialty: No
KRISTIN N HEAD

 477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1699078923

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE **PRACTITIONER**


HOOPER, BONNIE

Provider ID: 275253

Board Certified Specialty: No
BONNIE J HOOPER

 477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024


 Phone: (760) 436-2300

Fax: (760) 436-5482

 After Hours Phone: (760)
436-2300

Provider Gender: Female


NPI: 1821062878


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE **PRACTITIONER**

KORMANIK, PATRICIA

Provider ID: 282071

Board Certified Specialty: No
PATRICIA A KORMANIK

D3. Directorio de proveedores especialistas

1200 GARDEN VIEW RD
STE 200

ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093895047

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

LANE, KIMBERLY

Provider ID: 301602

Board Certified Specialty: No
KIMBERLY A LANE

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Phone: (760) 436-4558

Fax: (858) 429-7926

After Hours Phone: (760)
436-4558

Provider Gender: Female

NPI: 1457670119

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

PAKENHAM, KATE

Provider ID: 296268

Board Certified Specialty: No
KATE E PAKENHAM

1130 2ND ST
ENCINITAS, CA 92024

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1578299343

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 8:00AM-8:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

SRILASAK, MICHELE

Provider ID: 281856

Board Certified Specialty: No
MICHELE SRILASAK

1200 GARDEN VIEW RD

STE 200

ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265487326

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

YEO, ALEXANDRIA

Provider ID: 299940

Board Certified Specialty: No
ALEXANDRIA YEO

1505 ENCINITAS BLVD
ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1902368319

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

ENDOCRINOLOGY

METABOLISM DIABETES

HUPFELD, CHRISTOPHER

Provider ID: 277111

*Board Certified Specialty: No
CHRISTOPHER J HUPFELD*

 1200 GARDEN VIEW RD
STE 100
ENCINITAS, CA 92024

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1568429165

 *Provider English Spoken: Y
Cultural Competency: N*

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

GASTROENTEROLOGY

PATEL, JANKI


Provider ID: 305301

*Board Certified Specialty: No
JANKI R PATEL*

 781 GARDEN VIEW CT STE

100

ENCINITAS, CA 92024


 *Phone: (760) 354-9697*

Fax: (760) 635-5972

 *After Hours Phone: (760)
354-9697*

Provider Gender: Female

NPI: 1548606668

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Gujarati, Hindi*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

HOSPICE AND PALLIATIVE


MEDICINE

RUBENZIK, TAMARA


Provider ID: 282127

*Board Certified Specialty: No
TAMARA T RUBENZIK*

 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1811200652

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL
CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

HOSPICE AND PALLIATIVE

MEDICINE

RUBENZIK, TAMARA

Provider ID: 245575

*Board Certified Specialty: No
TAMARA T RUBENZIK*

 1200 GARDEN VIEW RD
STE 100
ENCINITAS, CA 92024

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1811200652

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL
CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

D3. Directorio de proveedores especialistas


 Website: N/A


MATERNAL AND FETAL MEDICINE


BALLAS, JERASIMOS

Provider ID: 209562

Board Certified Specialty: No
JERASIMOS BALLAS

 781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1871767384

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
EISENHOWER MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


MATERNAL AND FETAL MEDICINE


HULL, ANDREW

Provider ID: 209483

Board Certified Specialty: No
ANDREW D HULL

 781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1902862121

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MEMORIAL

HOSPITAL, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


MATERNAL AND FETAL MEDICINE


LAURENT, LOUISE

Provider ID: 208641

Board Certified Specialty: No
LOUISE C LAURENT

 781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Female

NPI: 1770532707


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


MATERNAL AND FETAL MEDICINE


MOORE, THOMAS

Provider ID: 208645

Board Certified Specialty: No
THOMAS R MOORE

 781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1184682379

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL


D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE

Provider ID: 277315

Board Certified Specialty: No
ALVIE C RICHARDSON

 477 N EL CAMINO REAL
BLDG D STE 302
ENCINITAS, CA 92024

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1154305977

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, Sharp Grossmont
Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


MATERNAL AND FETAL MEDICINE


WOELKERS, DOUGLAS

Provider ID: 209384

Board Certified Specialty: No
DOUGLAS A WOELKERS



 781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1013965748

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, PALOMAR
MEDICAL CENTER, UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


MATERNAL AND FETAL MEDICINE


WOLF, RICHARD

Provider ID: 209254

Board Certified Specialty: No
RICHARD B WOLF


 781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1497713846


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, PALOMAR
MEDICAL CENTER, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEONATAL / PERINATAL MEDICINE


BAI-TONG, SHIYU

Provider ID: 283286

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

SHIYU S BAI-TONG

 354 SANTA FE DR
ENCINITAS, CA 92024
 Phone: (760) 633-6120
 After Hours Phone: (760)
633-6120

Provider Gender: Female

NPI: 1528454188


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM



 Website: N/A

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301821



Board Certified Specialty: No
KATHERINE N NYMAN

 354 SANTA FE DR
ENCINITAS, CA 92024
 Phone: (760) 633-6120
Fax: (760) 633-7385

 After Hours Phone: (760)
633-6120

Provider Gender: Female

NPI: 1003260951

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM



 Website: N/A

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES

Provider ID: 303905

Board Certified Specialty: No
CHARLES W SAUER

 354 SANTA FE DR
ENCINITAS, CA 92024
 Phone: (760) 633-6120
Fax: (760) 633-7385

 After Hours Phone: (760)
633-6120

Provider Gender: Male

NPI: 1538388988

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,


SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM



 Website: N/A

NEUROLOGY

BUI, JONATHAN

Provider ID: 269966

Board Certified Specialty: No
JONATHAN D BUI

 477 N EL CAMINO REAL
STE 302
ENCINITAS, CA 92024
 Phone: (760) 944-6377
Fax: (760) 944-3927

 After Hours Phone: (760)
944-6377

Provider Gender: Male

NPI: 1730247974

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish,
Vietnamese
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

D3. Directorio de proveedores especialistas


 Website: N/A


NEUROLOGY

JINDAL, ANUJA

Provider ID: 206264

Board Certified Specialty: No
ANUJA V JINDAL

 477 N EL CAMINO REAL
STE 302
ENCINITAS, CA 92024

 Phone: (760) 944-5545
Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1194046581

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY


SCHORR, EMILY

Provider ID: 305022

Board Certified Specialty: No
EMILY M SCHORR

 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255862041

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


NEUROLOGY CHILD

KIMMCMANUS, OLIVIA

Provider ID: 206258

Board Certified Specialty: No
OLIVIA S KIMMCMANUS

 477 N EL CAMINO REAL
BLDG D STE 302
ENCINITAS, CA 92024

 Phone: (760) 944-5545
Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1174870067

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, CHILDRENS
HOSPITAL OF ORANGE
COUNTY, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY CHILD

SAHAGIAN, MICHELLE

Provider ID: 206073

Board Certified Specialty: No
MICHELLE L SAHAGIAN

 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

 Phone: (760) 944-5545
Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1275604035


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA

Provider ID: 282167

Board Certified Specialty: No
PRATIBHA S BINDER

 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024






 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)

D3. Directorio de proveedores especialistas







926-8273
Provider Gender: Female
NPI: 1174758031
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY





DELCORE, LAURA
Provider ID: 291325
Board Certified Specialty: No
LAURA M DELCORE
 1200 GARDEN VIEW RD
ENCINITAS, CA 92024
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1790128759
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


 Website: N/A

OBSTETRICS / GYNECOLOGY






DRIEBE, AMY
Provider ID: 291336
Board Certified Specialty: No
AMY M DRIEBE
 1200 GARDEN VIEW RD
ENCINITAS, CA 92024
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1730507567
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY
Provider ID: 293448
Board Certified Specialty: No
AMY M DRIEBE
 1505 ENCINITAS BLVD
ENCINITAS, CA 92024
 Phone: (800) 926-8372
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8372
Provider Gender: Female
NPI: 1730507567
 Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY
Provider ID: 293447
Board Certified Specialty: No
AMY M DRIEBE
 781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024
 Phone: (800) 926-8372
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8372
Provider Gender: Female
NPI: 1730507567
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH
Provider ID: 208682
Board Certified Specialty: No

D3. Directorio de proveedores especialistas

LEAH M LAMALE-SMITH

781 GARDEN VIEW CT STE 200

ENCINITAS, CA 92024

Phone: (858) 657-7200

After Hours Phone: (858) 657-7200

Provider Gender: Female

NPI: 1396904876

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, EISENHOWER MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN

Provider ID: 303061

Board Certified Specialty: No

GILLIAN MACKAY

1200 GARDEN VIEW RD

ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1770702177

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

OPHTHALMOLOGY

BANSAL, PREETI

Provider ID: 205617

Board Certified Specialty: No

PREETI BANSAL

477 N EL CAMINO REAL

STE D302

ENCINITAS, CA 92024

Phone: (858) 309-7702

Fax: (760) 944-3927

After Hours Phone: (858) 309-7702

Provider Gender: Female

NPI: 1871664631

Provider English Spoken: Y

Provider Language(s)

Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT

HOSPITAL, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL, TRI CITY MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

BHATIA, SHAGUN

Provider ID: 267315

Board Certified Specialty: No

SHAGUN K BHATIA

477 N EL CAMINO REAL

STE D302

ENCINITAS, CA 92024

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760) 944-5545

Provider Gender: Female

NPI: 1104237353

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

D3. Directorio de proveedores especialistas

HENNEIN, LAUREN

Provider ID: 297012

Board Certified Specialty: No
LAUREN M HENNEIN

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1699216010

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

MOLL, ANGELA

Provider ID: 205507

Board Certified Specialty: No
ANGELA M MOLL

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1861648602

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

MOVAGHAR, MANSOOR

Provider ID: 216413

Board Certified Specialty: No
MANSOOR MOVAGHAR

477 N EL CAMINO REAL
BLD D STE 302
ENCINITAS, CA 92024

Phone: (760) 944-5545

After Hours Phone: (760)
944-5545

Provider Gender: Male

NPI: 1497792220

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

OHALLORAN, HENRY

Provider ID: 205886

Board Certified Specialty: No
HENRY S OHALLORAN

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)
944-5545

Provider Gender: Male

NPI: 1235287947

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

D3. Directorio de proveedores especialistas

AOTO, KIM

Provider ID: 296797

Board Certified Specialty: No
KIM N AOTO

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Provider Gender: Female

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 9:00AM-5:00PM

TU 8:30AM-4:30PM

W 7:30AM-4:30PM

TH 9:30AM-5:00PM

F 8:30AM-4:00PM

Website: N/A

OTOLARYNGOLOGY

BLISS, MORGAN

Provider ID: 206085

Board Certified Specialty: No
MORGAN R BLISS

477 N EL CAMINO REAL
STE 302

ENCINITAS, CA 92024

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1760707657

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

FRIESEN, TZYYNONG

Provider ID: 244900

Board Certified Specialty: No
TZYYNONG L FRIESEN

477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

Phone: (760) 944-5545

After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1952740177

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

LEUIN, SHELBY

Provider ID: 206112

Board Certified Specialty: No
SHELBY C LEUIN

477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1124230909

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

PATEL, VIJAY

Provider ID: 297035

Board Certified Specialty: No
VIJAY PATEL

477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)
944-5545

D3. Directorio de proveedores especialistas

Provider Gender: Male

NPI: 1508250747


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC ALLERGY / IMMUNOLOGY

GREINER, ALEXANDER

Provider ID: 205696

Board Certified Specialty: No
ALEXANDER N GREINER



 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

 Phone: (858) 966-4900
Fax: (760) 944-3927

 After Hours Phone: (858)
966-4900

Provider Gender: Male

NPI: 1609801299

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, German,
Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

HALEY, JESSICA

Provider ID: 205688

Board Certified Specialty: No
JESSICA E HALEY

 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

 Phone: (760) 944-5545
Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1023329885

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC CARDIOLOGY

NARAYAN, HARI

Provider ID: 239115

Board Certified Specialty: No
HARI K NARAYAN


 477 N EL CAMINO REAL
BLDG D STE 302
ENCINITAS, CA 92024

 Phone: (760) 944-5545
Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Male

NPI: 1376705707


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC CARDIOLOGY

SILVASEPULVEDA, JOSE

Provider ID: 206299

Board Certified Specialty: No
JOSE A SILVASEPULVEDA

 477 N EL CAMINO REAL
BLDG D STE 302
ENCINITAS, CA 92024

 Phone: (760) 944-5545
Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Male

NPI: 1417222472

 Provider English Spoken: Y
Cultural Competency: N

D3. Directorio de proveedores especialistas

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC


GASTROENTEROLOGY

CHU, CHRISTOPHER


Provider ID: 301641

Board Certified Specialty: No


CHRISTOPHER CHU

 477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024


 Phone: (760) 944-5545


Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Male

NPI: 1912369273

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Yue
Chinese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC

GASTROENTEROLOGY

YOUNG, JOCELYN


Provider ID: 294676

Board Certified Specialty: No

JOCELYN A YOUNG

 477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1306227491

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UC DAVIS
MEDICAL CTR, RADY


CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY


CERNELC-KOHAN, MATEJKA

Provider ID: 243043

Board Certified Specialty: No

MATEJKA CERNELC-KOHAN

 477 N EL CAMINO REAL
STE 302 BLDG D
ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1871752451

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY

LENHART-PENDERGRASS,


PATRICIA

Provider ID: 294642


Board Certified Specialty: No

PATRICIA M


LENHART-PENDERGRASS

 477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

 Phone: (760) 944-5545






Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1144615659




D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):  *N*
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*


PEDIATRIC RHEUMATOLOGY

CHANG, JOHANNA

Provider ID: 246395
Board Certified Specialty: No
JOHANNA C CHANG




 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
 *Phone: (760) 944-5545*
 *After Hours Phone: (760)*
944-5545

Provider Gender: Female
NPI: 1821242199

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19


American Sign Language (ASL):  *N*

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*



PHYSICAL MEDICINE / REHABILITATION

LEE, HAEWON

Provider ID: 256227
Board Certified Specialty: No
HAEWON LEE

 477 N EL CAMINO REAL
STE C100
ENCINITAS, CA 92024
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)*
926-8273


Provider Gender: Female
NPI: 1447661657


 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Korean

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):  *N*

 *Accessibility: CONTACT PROVIDER*



 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

PHYSICIANS ASSISTANT

HIGGINS, JOSHUA

Provider ID: 287134
Board Certified Specialty: No
JOSHUA B HIGGINS



 1505 ENCINITAS BLVD
ENCINITAS, CA 92024
 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)*


926-8273

Provider Gender: Male

NPI: 1861624181

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):  *N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

PHYSICIANS ASSISTANT

PELIO, DARREN



Provider ID: 293443
Board Certified Specialty: No
DARREN A PELIO

 1200 GARDEN VIEW RD
ENCINITAS, CA 92024
 *Phone: (800) 926-8273*
Fax: (888) 539-8781


 *After Hours Phone: (800)*
926-8273

Provider Gender: Male

NPI: 1386791028

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):  *N*

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

D3. Directorio de proveedores especialistas

PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE

Provider ID: 302454

Board Certified Specialty: No

ANNETTE A RODRIGUES

477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

Phone: (760) 944-5545

Fax: (760) 944-5545

After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1205381845

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MEMORIAL

HOSPITAL, SHARP MEMORIAL

HOSPITAL

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SUTTON, BRIAN

Provider ID: 272241

Board Certified Specialty: No

BRIAN C SUTTON

1200 GARDEN VIEW RD
STE 200

ENCINITAS, CA 92024

Phone: (760) 598-1776

Fax: (760) 598-5744

After Hours Phone: (760)
598-1776

Provider Gender: Male

NPI: 1629174727

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

VANETSKY, GARY

Provider ID: 269152

Board Certified Specialty: No

GARY E VANETSKY

477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024

Phone: (760) 436-2300

Fax: (760) 436-5482

After Hours Phone: (760)
436-2300

Provider Gender: Male

NPI: 1417034489

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PODIATRIST

DUSTIN, ADAM

Provider ID: 275800

Board Certified Specialty: No

ADAM F DUSTIN

326 ENCINITAS BLVD STE
100

ENCINITAS, CA 92024

Phone: (760) 436-5533

Fax: (760) 436-0611

After Hours Phone: (760)
436-5533

Provider Gender: Male

NPI: 1043389026

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

GOMEZ, JUANITA

Provider ID: 291423

Board Certified Specialty: No

JUANITA GOMEZ

1505 ENCINITAS BLVD
ENCINITAS, CA 92024

Phone: (800) 926-8273

D3. Directorio de proveedores especialistas

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1790915759

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

PULMONARY DISEASES

BAUTISTA, JENNIFER

Provider ID: 297957

Board Certified Specialty: No
JENNIFER D BAUTISTA

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024

☎ Phone: (760) 230-8994

Fax: (760) 944-1309

☎ After Hours Phone: (760) 230-8994

Provider Gender: Female

NPI: 1770727034

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, COMMUNITY

HOSPITAL OF THE MONTEREY

PENINSULA, NATIVIDAD

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 21\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PULMONARY DISEASES

BAUTISTA, JENNIFER

Provider ID: 300863

Board Certified Specialty: No
JENNIFER D BAUTISTA

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024

☎ Phone: (760) 230-8994

Fax: (760) 944-1309

☎ After Hours Phone: (760) 230-8994

Provider Gender: Female

NPI: 1770727034

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, COMMUNITY

HOSPITAL OF THE MONTEREY

PENINSULA, NATIVIDAD

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 21\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PULMONARY DISEASES

BAUTISTA, JENNIFER

Provider ID: 297958

Board Certified Specialty: No
JENNIFER D BAUTISTA

📍 354 SANTA FE DR
ENCINITAS, CA 92024

☎ Phone: (760) 943-8806

Fax: (760) 944-1309

☎ After Hours Phone: (760) 943-8806

Provider Gender: Female

NPI: 1770727034

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, COMMUNITY

HOSPITAL OF THE MONTEREY

PENINSULA, NATIVIDAD

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 21\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY COLON SURGERY

PARRY, LISA







Provider ID: 278552

Board Certified Specialty: No
LISA A PARRY

📍 1200 GARDEN VIEW RD
STE 200


ENCINITAS, CA 92024




D3. Directorio de proveedores especialistas

 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1235369067
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL








ARMANI, AVA

Provider ID: 282143
Board Certified Specialty: No
AVA ARMANI
 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1861759383
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF
MEDICAL CENTER, UCSF
Medical Center At Mission Bay,
UCSF MEDICAL CENTER AT

MOUNT ZION, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A








SURGERY GENERAL

JACOBSEN, GARTH

Provider ID: 201730
Board Certified Specialty: No
GARTH R JACOBSEN
 1200 GARDEN VIEW RD
ENCINITAS, CA 92024
 Phone: (858) 657-8860
 After Hours Phone: (858) 657-8860
Provider Gender: Male
NPI: 1265649966
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


SURGERY PEDIATRIC

FAIRBANKS, TIMOTHY



Provider ID: 205497
Board Certified Specialty: No
TIMOTHY J FAIRBANKS
 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
 Phone: (760) 944-5545
Fax: (760) 944-3927
 After Hours Phone: (760) 944-5545
Provider Gender: Male
NPI: 1407010556
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY PEDIATRIC

KLING, KAREN

Provider ID: 206128
Board Certified Specialty: No
KAREN M KLING
 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

D3. Directorio de proveedores especialistas

 Phone: (760) 944-5545
 Fax: (760) 944-3927

 After Hours Phone: (760) 944-5545

Provider Gender: Female
NPI: 1982775144

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND

NEWBORNS, NATIONAL NAVAL MED CTR, SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY PLASTIC


REID, CHRISTOPHER

Provider ID: 238130

Board Certified Specialty: No
CHRISTOPHER M REID

 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982964276

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ESCONDIDO


ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY

Provider ID: 308401

Board Certified Specialty: No
ROY C BROWNLOW

 637 E GRAND AVE
ESCONDIDO, CA 92025


 Phone: (760) 610-0522

Fax: (760) 610-0523

 After Hours Phone: (760) 610-0522

Provider Gender: Male

NPI: 1205949914

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP


AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY


Provider ID: 308112

Board Certified Specialty: No
ROY C BROWNLOW

 637 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (760) 610-0522

Fax: (760) 610-0523

 After Hours Phone: (760) 610-0522

Provider Gender: Male

NPI: 1205949914

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP


AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON

D3. Directorio de proveedores especialistas

Provider ID: 299881

Board Certified Specialty: No
BRANDON DAIRO

1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029

Phone: (760) 738-5533

Fax: (760) 738-3835

After Hours Phone: (760)
738-5533

Provider Gender: Male

NPI: 1689092470

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\100

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON

Provider ID: 300090

Board Certified Specialty: No
BRANDON DAIRO

1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029

Phone: (760) 738-5533

Fax: (760) 738-3835

After Hours Phone: (760)
738-5533

Provider Gender: Male

NPI: 1689092470

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY PAIN MANAGEMENT

ROBINSON, COLE

Provider ID: 300171

Board Certified Specialty: No
COLE W ROBINSON

160 N DATE ST
ESCONDIDO, CA 92025

Phone: (888) 873-6220

Fax: (888) 873-6220

After Hours Phone: (888)
873-6220

Provider Gender: Male

NPI: 1871799528

Provider English Spoken: Y
Provider Language(s)
Spoken: German

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 21\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
7:00AM-4:00PM
SA 7:00AM-4:00PM

Website: N/A

CARDIOVASCULAR DISEASE

LERNER, JONATHAN

Provider ID: 309268

Board Certified Specialty: No
JONATHAN H LERNER

488 E VALLEY PKWY STE
107

ESCONDIDO, CA 92025

Phone: (760) 294-0480

Fax: (760) 294-0481

After Hours Phone: (760)
294-0480

Provider Gender: Male

NPI: 1962899823

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HEAD, KRISTIN

Provider ID: 277866

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

KRISTIN N HEAD

2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760)
294-9260

Provider Gender: Female

NPI: 1699078923

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

JANNESARI, ROYA

Provider ID: 302339

Board Certified Specialty: No

ROYA JANNESARI

625 CITRACADO PKWY STE
108

ESCONDIDO, CA 92025

Phone: (760) 743-1431

Fax: (760) 743-6455

After Hours Phone: (760)
743-1431

Provider Gender: Female

NPI: 1063585099

Provider English Spoken: Y

Provider Language(s)

Spoken: Farsi, Persian

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

KESHAVARZI, SARA

Provider ID: 305938

Board Certified Specialty: No

SARA KESHAVARZI

488 E VALLEY PKWY STE
411

ESCONDIDO, CA 92025

Phone: (760) 466-9800

Fax: (360) 462-2741

After Hours Phone: (760)
466-9800

Provider Gender: Female

NPI: 1457996126

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

LEE, SHULAMI

Provider ID: 308495

Board Certified Specialty: No
SHULAMI P LEE

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Phone: (760) 737-6900

Fax: (360) 462-2748

After Hours Phone: (760)
737-6900

Provider Gender: Female

NPI: 1003534132

Provider English Spoken: Y

Provider Language(s)
Spoken: Korean

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

MCCARTHY, KATHRYN

Provider ID: 298143

Board Certified Specialty: No

KATHRYN MCCARTHY

488 E VALLEY PKWY STE
404

ESCONDIDO, CA 92025

Phone: (760) 466-9800

Fax: (360) 462-2741

After Hours Phone: (760)
466-9800

Provider Gender: Female

NPI: 1700850781

Provider English Spoken: Y

Cultural Competency: N

D3. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 269203

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

WALDRUP, LARHONDA

Provider ID: 299259

Board Certified Specialty: No
LARHONDA M WALDRUP

 2185 CITRACADO PKWY
ESCONDIDO, CA 92029

 Phone: (442) 281-3193
Fax: (442) 281-3197

 After Hours Phone: (442)
281-3193

Provider Gender: Female

NPI: 1831627181

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST


SEILNACHT-BERNARD, KAREN

Provider ID: 269203

Board Certified Specialty: No
KAREN M

SEILNACHT-BERNARD

 488 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (877) 217-8505
Fax: (760) 735-6296

 After Hours Phone: (877)
217-8505

Provider Gender: Female

NPI: 1861562498


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM


 Website: N/A


EMERGENCY MEDICINE


PHAM, LILY

Provider ID: 304936

Board Certified Specialty: No
LILY M PHAM



 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 739-1543
Fax: (760) 294-9274

 After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1811423072

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


ENDOCRINOLOGY


METABOLISM DIABETES


REDDY, NAVYA

Provider ID: 302350

Board Certified Specialty: No
NAVYA M REDDY

 625 CITRACADO PKWY STE
108
ESCONDIDO, CA 92025

 Phone: (760) 743-1431
Fax: (760) 743-6455

 After Hours Phone: (760)
743-1431

Provider Gender: Female

NPI: 1083069611


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

FAMILY PRACTICE

MATSHE, ZENZIWE

Provider ID: 306033

Board Certified Specialty: No
ZENZIWE MATSHE

460 N ELM ST
ESCONDIDO, CA 92025

Phone: (760) 520-8100

Fax: (760) 466-1373

After Hours Phone: (760)
520-8100

Provider Gender: Female

NPI: 1285256073

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

GASTROENTEROLOGY

GARA, NAVEEN

Provider ID: 305691

Board Certified Specialty: No
NAVEEN GARA

935 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025

Phone: (760) 690-2800

Fax: (949) 404-6908

After Hours Phone: (760)
690-2800

Provider Gender: Male

NPI: 1942406533

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Telugu

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, PALOMAR

MEDICAL CENTER, PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

GASTROENTEROLOGY

GARA, NAVEEN

Provider ID: 269145

Board Certified Specialty: No
NAVEEN GARA

661 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025

Phone: (760) 690-2800

Fax: (760) 690-2801

After Hours Phone: (760)
690-2800

Provider Gender: Male

NPI: 1942406533

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Telugu

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, PALOMAR

MEDICAL CENTER, PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE

Provider ID: 268690

Board Certified Specialty: No
ELAINE ANDERSON

330 W FELICITA AVE STE
A4

ESCONDIDO, CA 92025

Phone: (760) 489-1323

Fax: (760) 489-0975

After Hours Phone: (760)
489-1323

Provider Gender: Female

NPI: 1063558856

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

CHEN, ANDREW

Provider ID: 296830

Board Certified Specialty: No
ANDREW K CHEN

2130 CITRACADO PKWYSTE
220

ESCONDIDO, CA 92029

Phone: (760) 743-4789

Fax: (760) 743-8005

D3. Directorio de proveedores especialistas

☎ After Hours Phone: (760) 743-4789

Provider Gender: Male

NPI: 1134357007

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS GREEN HOSPITAL, PALOMAR HEALTH, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

INTERNAL MEDICINE

MALEK, MIKHAIL

Provider ID: 296831

Board Certified Specialty: No

MIKHAIL R MALEK

📍 2130 CITRACADO PKWYSTE 220

ESCONDIDO, CA 92029

☎ Phone: (760) 743-0546

Fax: (760) 317-9769

☎ After Hours Phone: (760) 743-0546

Provider Gender: Male

NPI: 1467455212

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER, PALOMAR HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): HAMED BAYAT

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

INTERVENTIONAL

CARDIOLOGY

BAYAT, HAMED

Provider ID: 296842

Board Certified Specialty: No

HAMED BAYAT

📍 2130 CITRACADO PKWYSTE 220

ESCONDIDO, CA 92029

☎ Phone: (760) 743-0546

Fax: (760) 743-8837

☎ After Hours Phone: (760) 743-0546

Provider Gender: Male

NPI: 1356344196

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

INTERVENTIONAL

CARDIOLOGY

BAYAT, HAMED

Provider ID: 296843

Board Certified Specialty: No

📍 2130 CITRACADO PKWYSTE 220

ESCONDIDO, CA 92029

☎ Phone: (760) 743-0546

Fax: (760) 743-8837

☎ After Hours Phone: (760) 743-0546

Provider Gender: Male

NPI: 1356344196

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

INTERVENTIONAL

CARDIOLOGY

GILBERT, CHRISTOPHER

Provider ID: 296839

Board Certified Specialty: No

CHRISTOPHER R GILBERT

📍 2130 CITRACADO PKWYSTE 220

ESCONDIDO, CA 92029

☎ Phone: (760) 430-0546

Fax: (760) 743-8837

☎ After Hours Phone: (760) 430-0546

Provider Gender: Male

NPI: 1487657243

☑ Provider English Spoken: Y

☑ Provider Language(s)

D3. Directorio de proveedores especialistas

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER, PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

INTERVENTIONAL CARDIOLOGY


MOHAMEDALI, BURHAN

Provider ID: 309248


Board Certified Specialty: No
BURHAN MOHAMEDALI

 488 E VALLEY PKWY STE
107

ESCONDIDO, CA 92025


 Phone: (760) 294-0480


Fax: (760) 294-0481

 After Hours Phone: (760)
294-0480

Provider Gender: Male

NPI: 1831393289

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,


Adventist Health and Rideout

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

INTERVENTIONAL CARDIOLOGY


SAWHNEY, NAVINDER

Provider ID: 304784

Board Certified Specialty: No
NAVINDER S SAWHNEY

 2130 CITRACADO PKWYSTE
320

ESCONDIDO, CA 92029

 Phone: (858) 485-0130

Fax: (858) 485-9424

 After Hours Phone: (858)
485-0130

Provider Gender: Male

NPI: 1619174133

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL

CENTER, SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS GREEN

HOSPITAL, UCSD MEDICAL

CTR, SHARP MEMORIAL


HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI


Provider ID: 309097

Board Certified Specialty: No


DEEPTHI SUDHAKAR

 488 E VALLEY PKWY STE
107

ESCONDIDO, CA 92025

 Phone: (760) 294-0480

Fax: (619) 616-2104

 After Hours Phone: (760)
294-0480

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Sharp
Grossmont Hospital, SHARP


CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 15\99

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 295845


Board Certified Specialty: No
DEEPTHI SUDHAKAR

 488 E VALLEY PKWY STE
107

ESCONDIDO, CA 92025

 Phone: (760) 294-0480

Fax: (619) 616-2104

 After Hours Phone: (760)
294-0480

Provider Gender: Female

NPI: 1811307051




 Provider English Spoken: Y
Cultural Competency: N

D3. Directorio de proveedores especialistas

*Hospital Affiliation: Sharp
Grossmont Hospital, SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 15\None*

American Sign Language (ASL):




N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

MATERNAL AND FETAL MEDICINE



MELBER, DORA

*Provider ID: 296996
Board Certified Specialty: No
DORA J MELBER*

 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
 *Phone: (858) 966-6710*
Fax: (858) 966-6711
 *After Hours Phone: (858)
966-6710*

Provider Gender: Female

NPI: 1124413026

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Hungarian, Spanish*
Cultural Competency: N

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL*


*CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes*

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*



 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA


*Provider ID: 294655
Board Certified Specialty: No
REBECCA M REIMERS*

 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
 *Phone: (858) 966-6710*
Fax: (858) 966-6711

 *After Hours Phone: (858)
966-6710*

Provider Gender: Female

NPI: 1801207634


 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*

NEONATAL / PERINATAL MEDICINE

LE, CRYSTAL

*Provider ID: 283707
Board Certified Specialty: No
CRYSTAL N LE*

 2185 CITRACADO PKWY
ESCONDIDO, CA 92029

 *Phone: (442) 281-3193*
Fax: (442) 281-3197

 *After Hours Phone: (442)
281-3193*

Provider Gender: Female

NPI: 1003028416

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL, SCRIPPS*

*MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES

*Provider ID: 206163
Board Certified Specialty: No
CHARLES W SAUER*

 2185 CITRACADO PKWY
ESCONDIDO, CA 92029

 *Phone: (442) 281-2850*
Fax: (442) 281-2999

 *After Hours Phone: (442)*

D3. Directorio de proveedores especialistas

281-2850
Provider Gender: Male
NPI: 1538388988
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

SUTTNER, DENISE
Provider ID: 206137
Board Certified Specialty: No
DENISE M SUTTNER
 2185 CITRACADO PKWY
ESCONDIDO, CA 92029
 Phone: (442) 281-2850
Fax: (442) 281-2999

After Hours Phone: (442)
281-2850
Provider Gender: Female
NPI: 1457433799
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

SWEENEY, NATHALY
Provider ID: 283801
Board Certified Specialty: No
NATHALY M SWEENEY
 2185 CITRACADO PKWY
ESCONDIDO, CA 92029
 Phone: (442) 281-3193
Fax: (442) 281-3197

After Hours Phone: (442)
281-3193
Provider Gender: Female
NPI: 1164572632
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEPHROLOGY

AL-DAHMAN, ZAID
Provider ID: 297898
Board Certified Specialty: No
ZAID G AL-DAHMAN
 631 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (760) 294-1660
Fax: (760) 745-5016
 After Hours Phone: (760)
294-1660
Provider Gender: Male
NPI: 1740716828
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER, PALOMAR
HEALTH

D3. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): Provider ID: 277838

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

NEUROLOGY

GOLD, JEFFREY


Provider ID: 277870

Board Certified Specialty: No

JEFFREY J GOLD

 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

 Phone: (760) 294-9260

Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Male

NPI: 1568773984

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL


OAKLAND, SHARP MEMORIAL
HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY

JINDAL, ANUJA


Provider ID: 277838

Board Certified Specialty: No

ANUJA V JINDAL

 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

 Phone: (760) 294-9260

Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Female

NPI: 1194046581

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY

KIMMCMANUS, OLIVIA


Provider ID: 277873

Board Certified Specialty: No

OLIVIA S KIMMCMANUS

 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

 Phone: (858) 966-5819

Fax: (760) 294-9274

 After Hours Phone: (858)
966-5819

Provider Gender: Female

NPI: 1174870067

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, CHILDRENS
HOSPITAL OF ORANGE

COUNTY, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY

ZIMBRIC, MICHAEL


Provider ID: 277891

Board Certified Specialty: No

MICHAEL R ZIMBRIC

 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

 Phone: (760) 294-9260

Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Male

NPI: 1487819546

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

D3. Directorio de proveedores especialistas


OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY CHILD


SAHAGIAN, MICHELLE

Provider ID: 206076

Board Certified Specialty: No

MICHELLE L SAHAGIAN

 625 CITRACADO PKWY STE
100
ESCONDIDO, CA 92025

 Phone: (760) 294-9260

Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Female

NPI: 1275604035

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY


HINSHAW, PAUL

Provider ID: 277040

Board Certified Specialty: No

PAUL W HINSHAW

 1955 CITRACADO PKWY
STE 302
ESCONDIDO, CA 92029

 Phone: (760) 233-1896

Fax: (760) 233-1899

 After Hours Phone: (760)
233-1896

Provider Gender: Male

NPI: 1215170717

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
9:00AM-4:30PM

F 9:00AM-2:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY


HINSHAW, PAUL

Provider ID: 285628

Board Certified Specialty: No

PAUL W HINSHAW

 1955 CITRACADO PKWY
STE 302
ESCONDIDO, CA 92029


 Phone: (760) 233-1896

Fax: (760) 233-1899

 After Hours Phone: (760)
233-1896

Provider Gender: Male

NPI: 1215170717

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
9:00AM-4:30PM

F 9:00AM-2:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY

HINSHAW, PAUL

Provider ID: 277041


Board Certified Specialty: No

PAUL W HINSHAW

 488 E VALLEY PKWY STE
400
ESCONDIDO, CA 92025

 Phone: (760) 658-6101

Fax: (760) 658-6106

 After Hours Phone: (760)
658-6101

Provider Gender: Male

NPI: 1215170717


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
9:00AM-4:30PM

F 9:00AM-2:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

OBSTETRICS / GYNECOLOGY

HINSHAW, PAUL

Provider ID: 285629

Board Certified Specialty: No
PAUL W HINSHAW

488 E VALLEY PKWY STE 400
ESCONDIDO, CA 92025

Phone: (760) 658-6101

Fax: (760) 658-6106

After Hours Phone: (760) 658-6101

Provider Gender: Male

NPI: 1215170717

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
9:00AM-4:30PM
F 9:00AM-2:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH

Provider ID: 285518

Board Certified Specialty: No
LEAH M LAMALE-SMITH

2125 CITRACADO PKWY STE 210
ESCONDIDO, CA 92029

Phone: (760) 739-2921

Fax: (760) 739-3162

After Hours Phone: (760) 739-2921

Provider Gender: Female

NPI: 1396904876

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, EISENHOWER MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

BANSAL, PREETI

Provider ID: 277883

Board Certified Specialty: No
PREETI BANSAL

2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760) 755-7600

Provider Gender: Female

NPI: 1871664631

Provider English Spoken: Y
Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT

HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL, TRI CITY MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

BHATIA, SHAGUN

Provider ID: 277877

Board Certified Specialty: No
SHAGUN K BHATIA

2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760) 755-7600

Provider Gender: Female

NPI: 1104237353

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

OPHTHALMOLOGY


HENNEIN, LAUREN

Provider ID: 297014

*Board Certified Specialty: No
LAUREN M HENNEIN*

 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

 *Phone: (760) 755-7600*

Fax: (760) 755-7699

 *After Hours Phone: (760)
755-7600*

Provider Gender: Female

NPI: 1699216010

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

OPHTHALMOLOGY

MOLL, ANGELA


Provider ID: 205895


*Board Certified Specialty: No
ANGELA M MOLL*

 625 CITRACADO PKWY STE

206

ESCONDIDO, CA 92025

 *Phone: (760) 755-7600*

 *After Hours Phone: (760)
755-7600*

Provider Gender: Female

NPI: 1861648602

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT*

*HOSPITAL, SHARP MEMORIAL
HOSPITAL, UCSF BENIOFF*

CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*

OPHTHALMOLOGY

MOLL, ANGELA

Provider ID: 277824


*Board Certified Specialty: No
ANGELA M MOLL*

 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029


 *Phone: (760) 755-7600*

Fax: (760) 755-7699

 *After Hours Phone: (760)
755-7600*

Provider Gender: Female

NPI: 1861648602

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT*

*HOSPITAL, SHARP MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL*

OAKLAND, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY


HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

OPHTHALMOLOGY

MOVAGHAR, MANSOOR

Provider ID: 277833

*Board Certified Specialty: No
MANSOOR MOVAGHAR*

 2125 CITRACADO PKWY

STE 200
ESCONDIDO, CA 92029


 *Phone: (760) 755-7600*


Fax: (760) 755-7699

 *After Hours Phone: (760)
755-7600*

Provider Gender: Male

NPI: 1497792220

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN*

CHILDRENS HOSPITAL SAN

D3. Directorio de proveedores especialistas


DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OPHTHALMOLOGY

OHALLORAN, HENRY

Provider ID: 277869

Board Certified Specialty: No
HENRY S OHALLORAN

 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Male

NPI: 1235287947

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 305307

Board Certified Specialty: No
CATHERINE R SHEILS

 700 W EL NORTE PKWY
ESCONDIDO, CA 92026


 Phone: (800) 765-2737

Fax: (619) 291-6577

 After Hours Phone: (800)
765-2737

Provider Gender: Female

NPI: 1932605649


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU
8:30AM-4:00PM
W-F 8:30AM-1:00PM

 Website: N/A

OPTOMETRIST

AOTO, KIM

Provider ID: 268719


Board Certified Specialty: No
KIM N AOTO

 830 W VALLEY PKWY STE
300

ESCONDIDO, CA 92025

 Phone: (800) 898-2020

Fax: (844) 897-3788

 After Hours Phone: (800)
898-2020

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OPTOMETRIST

AOTO, KIM

Provider ID: 296796

Board Certified Specialty: No
KIM N AOTO

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)
743-5872

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 9:00AM-5:00PM
TU 8:30AM-4:30PM
W 7:30AM-4:30PM

D3. Directorio de proveedores especialistas

TH 9:30AM-5:00PM

F 8:30AM-4:00PM

 Website: N/A

OPTOMETRIST


KOO, ANITA

Provider ID: 307410

Board Certified Specialty: No

ANITA K KOO

 1118 W VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (619) 425-7755

Fax: (619) 425-2138

 After Hours Phone: (619)
425-7755

Provider Gender: Female

NPI: 1669825667

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OPTOMETRIST


KOO, ANITA

Provider ID: 307411

Board Certified Specialty: No

ANITA K KOO

 1118 W VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (619) 425-7755

Fax: (619) 425-2138

 After Hours Phone: (619)
425-7755

Provider Gender: Female

NPI: 1669825667

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY

BLISS, MORGAN

Provider ID: 277537


Board Certified Specialty: No

MORGAN R BLISS

 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029


 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1760707657

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY

FRIESEN, TZYYNONG

Provider ID: 277853


Board Certified Specialty: No

TZYYNONG L FRIESEN

 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029


 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1952740177


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY

JIANG, WEN

Provider ID: 277860


Board Certified Specialty: No

WEN A JIANG

 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029



 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1659305753

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

D3. Directorio de proveedores especialistas


DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY

LEUIN, SHELBY

Provider ID: 206110

Board Certified Specialty: No
SHELBY C LEUIN

 625 CITRACADO PKWY STE
206
ESCONDIDO, CA 92025

 Phone: (760) 755-7600
Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1124230909


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OTOLARYNGOLOGY

PATEL, VIJAY

Provider ID: 297038

Board Certified Specialty: No
VIJAY PATEL

 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

 Phone: (760) 755-7600
Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Male

NPI: 1508250747

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC CARDIOLOGY

DAVIS, CHRISTOPHER

Provider ID: 277811

Board Certified Specialty: No
CHRISTOPHER K DAVIS

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 294-9260
Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Male

NPI: 1760691950

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC CARDIOLOGY

HALEY, JESSICA

Provider ID: 205689

Board Certified Specialty: No
JESSICA E HALEY

 625 CITRACADO PKWY STE
100
ESCONDIDO, CA 92025

 Phone: (760) 294-9260
Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Female

NPI: 1023329885


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

D3. Directorio de proveedores especialistas

American Sign Language (ASL):  2125 CITRACADO PKWY
STE 100

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC CARDIOLOGY

HALEY, JESSICA

Provider ID: 277867

Board Certified Specialty: No
JESSICA E HALEY

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 294-9260
Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Female


NPI: 1023329885

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  625 CITRACADO PKWY STE
100

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRIC CARDIOLOGY

NARAYAN, HARI

Provider ID: 277846

Board Certified Specialty: No
HARI K NARAYAN

 Phone: (760) 294-9260
Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Male

NPI: 1376705707

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

SILVASEPULVEDA, JOSE

Provider ID: 206298

Board Certified Specialty: No
JOSE A SILVASEPULVEDA

 625 CITRACADO PKWY STE
100

ESCONDIDO, CA 92025
 Phone: (760) 294-9260
Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Male

NPI: 1417222472

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN


DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY


MEDICINE


AGHILI, ROXANA

Provider ID: 303783

Board Certified Specialty: No
ROXANA AGHILI



 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 739-1543
Fax: (760) 294-9274

 After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1851927883

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi


Cultural Competency: N


Hospital Affiliation: KAISER
FOUNDATION HOSPITAL SAN
DIEGO, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM

D3. Directorio de proveedores especialistas


 SA 1:00PM-10:00PM
 Website: N/A


PEDIATRIC EMERGENCY **MEDICINE**

BELLOMO, THOMAS

Provider ID: 277865

Board Certified Specialty: No
THOMAS N BELLOMO

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029


 Phone: (760) 739-1543

Fax: (760) 294-9274

 After Hours Phone: (760)
739-1543

Provider Gender: Male

NPI: 1700926698

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM


 Website: N/A


PEDIATRIC EMERGENCY **MEDICINE**

GORHAM, LAURA


Provider ID: 277851

Board Certified Specialty: No
LAURA M GORHAM

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 739-1543

Fax: (760) 294-9274

 After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1316162324

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM


 Website: N/A


PEDIATRIC EMERGENCY **MEDICINE**

GROSS, MATTHEW

Provider ID: 297178

Board Certified Specialty: No
MATTHEW F GROSS

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029


 Phone: (760) 739-1543

Fax: (760) 294-9274


 After Hours Phone: (760)
739-1543

Provider Gender: Male

NPI: 1942223664

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM


 Website: N/A


PEDIATRIC EMERGENCY **MEDICINE**

MENDES, CHANTAL

Provider ID: 295670

Board Certified Specialty: No
CHANTAL M MENDES

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029


 Phone: (760) 739-1543

Fax: (760) 294-9274

 After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1134681265

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
⌚ Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

PARKER, SHERINE

Provider ID: 277872
Board Certified Specialty: No
SHERINE B PARKER
📍 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
📞 Phone: (760) 739-1543
Fax: (760) 294-9274
⌚ After Hours Phone: (760)
739-1543
Provider Gender: Female
NPI: 1477626513
🗣️ Provider English Spoken: Y
🗣️ Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: GLENDALE
ADVENTIST MED CTR,
GLENDALE MEMORIAL HOSP
AND HEALTH CTR, TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
⌚ Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

QUINONES-PEREZ, BIANCA

Provider ID: 277810
Board Certified Specialty: No
BIANCA N QUINONES-PEREZ
📍 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
📞 Phone: (760) 739-1543
Fax: (760) 294-9274
⌚ After Hours Phone: (760)
739-1543
Provider Gender: Female
NPI: 1124360565
🗣️ Provider English Spoken: Y
🗣️ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
⌚ Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

TODD, SARAH

Provider ID: 302802
Board Certified Specialty: No
SARAH C TODD

📍 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
📞 Phone: (760) 739-1543
Fax: (760) 294-9274
⌚ After Hours Phone: (760)
739-1543
Provider Gender: Female
NPI: 1407299787
🗣️ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
⌚ Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
🌐 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA

Provider ID: 289412
Board Certified Specialty: No
KAMALA VAIDYA
📍 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
📞 Phone: (760) 739-1543
Fax: (760) 294-9274
⌚ After Hours Phone: (760)
739-1543
Provider Gender: Female

D3. Directorio de proveedores especialistas

NPI: 1083840920

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE


VAIDYA, KAMALA

Provider ID: 205812

Board Certified Specialty: No
KAMALA VAIDYA

 625 CITRACADO PKWY STE
100

ESCONDIDO, CA 92025

 Phone: (760) 739-1543

Fax: (760) 294-9274

 After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1083840920

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC

GASTROENTEROLOGY


CHU, CHRISTOPHER

Provider ID: 301643

Board Certified Specialty: No
CHRISTOPHER CHU

 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029


 Phone: (760) 294-9260


Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Male

NPI: 1912369273

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Yue
Chinese

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

CAMERON, MELISSA

Provider ID: 205966

Board Certified Specialty: No
MELISSA A CAMERON

 2185 CITRACADO PKWY
ESCONDIDO, CA 92029

 Phone: (442) 281-2850

Fax: (442) 281-2999

 After Hours Phone: (442)
281-2850

Provider Gender: Female

NPI: 1902983752

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS


FIGUEROA RODRIGUEZ,

BRENDA


Provider ID: 306823

Board Certified Specialty: No
BRENDA L FIGUEROA
RODRIGUEZ

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (833) 867-4642






Fax: (858) 633-4693

 After Hours Phone: (833)
867-4642

Provider Gender: Female




NPI: 1134205214




D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y* *N*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PHYSICAL MEDICINE / REHABILITATION




RICHARDSON, HENRY

Provider ID: 295277
Board Certified Specialty: No
HENRY A RICHARDSON
 1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
 *Phone: (760) 738-5533*
Fax: (909) 204-7863
 *After Hours Phone: (760) 738-5533*
Provider Gender: Male
NPI: 1407052459
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):


 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PHYSICAL MEDICINE / REHABILITATION




RYAN, KYLE

Provider ID: 275660
Board Certified Specialty: No
KYLE J RYAN
 625 CITRACADO PKWY
ESCONDIDO, CA 92025
 *Phone: (760) 294-9260*
Fax: (760) 294-9274
 *After Hours Phone: (760) 294-9260*

Provider Gender: Male
NPI: 1447645742

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PHYSICIANS ASSISTANT


CHATFIELD, ALEXANDRA




Provider ID: 276716
Board Certified Specialty: No
ALEXANDRA J CHATFIELD
 1955 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
 *Phone: (760) 743-4789*

Fax: (858) 673-5187

 *After Hours Phone: (760) 743-4789*

Provider Gender: Female
NPI: 1215584628

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*


PHYSICIANS ASSISTANT

CORVINI, NICOLAS




Provider ID: 296999
Board Certified Specialty: No
NICOLAS A CORVINI
 425 N DATE ST
ESCONDIDO, CA 92025
 *Phone: (760) 520-8300*
Fax: (858) 633-4698

 *After Hours Phone: (760) 520-8300*

Provider Gender: Male
NPI: 1194242461

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

D3. Directorio de proveedores especialistas

PHYSICIANS ASSISTANT

FUNARI, CHRISTOPHER

Provider ID: 301993

Board Certified Specialty: No

CHRISTOPHER P FUNARI

625 CITRACADO PKWY STE 108

ESCONDIDO, CA 92025

Phone: (760) 743-1431

Fax: (760) 743-6455

After Hours Phone: (760) 743-1431

Provider Gender: Male

NPI: 1982365490

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

GANGJI, SHAZMIN

Provider ID: 298110

Board Certified Specialty: No

SHAZMIN GANGJI

460 N ELM ST
ESCONDIDO, CA 92025

Phone: (760) 520-8100

Fax: (360) 462-2745

After Hours Phone: (760) 520-8100

Provider Gender: Female

NPI: 1346763638

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

MEHTA, NOOPUR

Provider ID: 308725

Board Certified Specialty: No
NOOPUR MEHTA

460 N ELM ST
ESCONDIDO, CA 92025

Phone: (760) 520-8100

Fax: (360) 462-2745

After Hours Phone: (760) 520-8100

Provider Gender: Female

NPI: 1417682931

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

MEHTA, NOOPUR

Provider ID: 297093

Board Certified Specialty: No
NOOPUR MEHTA

460 N ELM ST
ESCONDIDO, CA 92025

Phone: (760) 520-8100

Fax: (360) 462-2745

After Hours Phone: (760) 520-8100

Provider Gender: Female

NPI: 1417682931

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

NIAKAMAL, EVAN

Provider ID: 291250

Board Certified Specialty: No
EVAN J NIAKAMAL

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8340

Fax: (858) 633-4698

After Hours Phone: (760) 520-8340

Provider Gender: Male

NPI: 1639796873

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F

D3. Directorio de proveedores especialistas

8:00AM-5:00PM


 Website: N/A


PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE

Provider ID: 302456

Board Certified Specialty: No
ANNETTE A RODRIGUES

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 294-9260
Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Female

NPI: 1205381845

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


WALSH, JOHN

Provider ID: 301971

Board Certified Specialty: No
JOHN T WALSH

 625 CITRACADO PKWY STE
108

ESCONDIDO, CA 92025

 Phone: (760) 743-1431
Fax: (760) 743-6455

 After Hours Phone: (760)
743-1431

Provider Gender: Male

NPI: 1386893089


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

WRIGHT, DEREK

Provider ID: 302390

Board Certified Specialty: No
DEREK J WRIGHT

 1955 CITRACADO PKWY
ESCONDIDO, CA 92029

 Phone: (760) 738-5533
Fax: (909) 204-7863

 After Hours Phone: (760)
738-5533

Provider Gender: Male

NPI: 1629674858


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PODIATRIST

ALGHURAIBI, OHOUD

Provider ID: 295998

Board Certified Specialty: No
OHOUD E ALGHURAIBI

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100
Fax: (360) 462-2745

 After Hours Phone: (760)
520-8100

Provider Gender: Female
NPI: 1669842357

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PODIATRIST

READ, TRENTON

Provider ID: 296654

Board Certified Specialty: No
TRENTON READ

 215 S HICKORY ST STE 118
ESCONDIDO, CA 92025

 Phone: (760) 480-1189
Fax: (858) 485-1515

 After Hours Phone: (760)
480-1189

Provider Gender: Male

NPI: 1952963431


 Provider English Spoken: Y
 Provider Language(s)

D3. Directorio de proveedores especialistas

Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


PODIATRIST

READ, TRENTON

Provider ID: 300882

Board Certified Specialty: No
TRENTON READ

 *215 S HICKORY ST STE 118*
ESCONDIDO, CA 92025

 *Phone: (760) 480-1189*

Fax: (858) 485-1515

 *After Hours Phone: (760)*
480-1189

Provider Gender: Male

NPI: 1952963431

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


PSYCHOLOGIST

CARLTON-PENN, CORNELIA


Provider ID: 290406

Board Certified Specialty: No
CORNELIA J CARLTON-PENN

 *425 N DATE ST*
ESCONDIDO, CA 92025


 *Phone: (760) 520-8340*

Fax: (858) 633-4698

 *After Hours Phone: (760)*
520-8340

Provider Gender: Female

NPI: 1891720611

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: German


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


PSYCHOLOGIST

ESTRADA PATINO, ANGELA

Provider ID: 296605

Board Certified Specialty: No
ANGELA J ESTRADA PATINO

 *460 N ELM ST*
ESCONDIDO, CA 92025


 *Phone: (760) 520-8100*

Fax: (360) 462-2745

 *After Hours Phone: (760)*
520-8100

Provider Gender: Female

NPI: 1629339015

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM
SA 8:00AM-0:00PM

 *Website: N/A*


PSYCHOLOGIST

SUOZZO, JOSEPH

Provider ID: 290758

Board Certified Specialty: No
JOSEPH M SUOZZO

 *425 N DATE ST*
ESCONDIDO, CA 92025

 *Phone: (760) 520-8340*

Fax: (858) 633-4698

 *After Hours Phone: (760)*
520-8340

Provider Gender: Male

NPI: 1821013228

 *Provider English Spoken: Y*

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


PSYCHOLOGIST

TEETER-WITT, ALYSSA

Provider ID: 290779

Board Certified Specialty: No
ALYSSA TEETER-WITT

 *426 N DATE ST*
ESCONDIDO, CA 92025

 *Phone: (760) 690-5900*


Fax: (858) 633-4693

D3. Directorio de proveedores especialistas

 After Hours Phone: (760) 690-5900

Provider Gender: Female

NPI: 1932308442

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PSYCHOLOGIST


TEETER-WITT, ALYSSA

Provider ID: 290891

Board Certified Specialty: No

ALYSSA TEETER-WITT

 425 N DATE ST
ESCONDIDO, CA 92025


 Phone: (760) 520-8300

Fax: (858) 633-4698

 After Hours Phone: (760) 520-8300

Provider Gender: Female

NPI: 1932308442

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PSYCHOLOGIST


VALLEZ-BARLAM, ANDREA

Provider ID: 290630

Board Certified Specialty: No

ANDREA VALLEZ-BARLAM

 426 N DATE ST
ESCONDIDO, CA 92025


 Phone: (760) 690-5900


Fax: (858) 633-4693

 After Hours Phone: (760) 690-5900

Provider Gender: Female

NPI: 1710902143

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PSYCHOLOGIST

VALLEZ-BARLAM, ANDREA


Provider ID: 290631

Board Certified Specialty: No

ANDREA VALLEZ-BARLAM

 488 E VALLEY PKWY STE
404

ESCONDIDO, CA 92025

 Phone: (760) 466-9800


Fax: (858) 633-4693

 After Hours Phone: (760) 466-9800

Provider Gender: Female

NPI: 1710902143

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST


VAQUERO, JUANA

Provider ID: 290762

Board Certified Specialty: No

JUANA VAQUERO

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8300


Fax: (858) 633-4698

 After Hours Phone: (760) 520-8300

Provider Gender: Female

NPI: 1023459708

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PSYCHOLOGIST


WOODWORTH, JENNIFER

Provider ID: 290634

Board Certified Specialty: No

JENNIFER WOODWORTH

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8340

Fax: (858) 633-4698

 After Hours Phone: (760)

D3. Directorio de proveedores especialistas

520-8340

Provider Gender: Female


NPI: 1639362494

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PULMONARY DISEASES


QUAN, MICHELE GRACE

Provider ID: 287097

Board Certified Specialty: No

MICHELE GRACE G QUAN

 2125 CITRACADO PKWY
STE 230
ESCONDIDO, CA 92029

 Phone: (760) 489-1458

Fax: (760) 489-1246

 After Hours Phone: (760)
489-1458

Provider Gender: Female

NPI: 1629462882

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: REDLANDS
COMMUNITY HOSP


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIATION ONCOLOGY


COLEMAN, LORI

Provider ID: 221090

Board Certified Specialty: No

LORI A COLEMAN

 2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029



 Phone: (760) 739-3371

Fax: (760) 739-3779

 After Hours Phone: (760)
739-3371

Provider Gender: Female

NPI: 1053348920

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP


CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
PALOMAR MEDICAL CENTER,
Sharp Grossmont Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIATION ONCOLOGY


VOLPP, PAUL

Provider ID: 221103

Board Certified Specialty: No

PAUL B VOLPP

 2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029

 Phone: (760) 739-3371


Fax: (760) 739-3779

 After Hours Phone: (760)
739-3371

Provider Gender: Male

NPI: 1225186232

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP


CHULA VISTA MED CTR,
GROSSMONT HOSPITAL,
PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-4:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC


VAKILIAN, SIAVOSH

Provider ID: 283206

Board Certified Specialty: No

SIAVOSH VAKILIAN

 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025


 Phone: (619) 230-0400

Fax: (858) 429-7936

 After Hours Phone: (619)
230-0400

Provider Gender: Male

NPI: 1427456151

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL

D3. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL


THERAPIST


MCGEE, JACQUELINE

Provider ID: 252473

Board Certified Specialty: No

JACQUELINE M MCGEE

 1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027

 Phone: (760) 233-9655

Fax: (760) 233-9648

 After Hours Phone: (760)
233-9655

Provider Gender: Female

NPI: 1194217133


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 8\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
7:00AM-6:00PM

 Website: N/A


SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS


Provider ID: 296931

Board Certified Specialty: No

MIRELIS AROCHO-SALGADO

 500 LA TERRAZA BLVD STE
150

ESCONDIDO, CA 92025

 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1063660165

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


SPEECH PATHOLOGIST

CLARK, MELISSA


Provider ID: 296924

Board Certified Specialty: No

MELISSA A CLARK

 500 LA TERRAZA BLVD STE
150

ESCONDIDO, CA 92025

 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1760546428

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Arabic, Armenian,
Farsi, Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 7:00AM-7:00PM
M-F 7:00AM-7:00PM


 Website: N/A

SPEECH PATHOLOGIST


DURNAN, CASSANDRA

Provider ID: 307881


Board Certified Specialty: No
CASSANDRA L DURNAN

 500 LA TERRAZA BLVD STE
150

ESCONDIDO, CA 92025

 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1073873501

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7:00AM-7:00PM

 Website: N/A

SURGERY GENERAL


CASILLAS BERUMEN, SERGIO

Provider ID: 304606

Board Certified Specialty: No






SERGIO G CASILLAS

BERUMEN

 1045 E PENNSYLVANIA
AVE

ESCONDIDO, CA 92025







D3. Directorio de proveedores especialistas



 Phone: (760) 884-4500
 Fax: (619) 483-3997
 After Hours Phone: (760) 884-4500
Provider Gender: Male
NPI: 1437470762
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL



GROVE, JAY




Provider ID: 245226
Board Certified Specialty: No
JAY R GROVE
 2185 CITRACADO PKWY ESCONDIDO, CA 92029
 Phone: (760) 300-3647
 Fax: (760) 482-1316
 After Hours Phone: (760) 300-3647
Provider Gender: Male
NPI: 1912971334
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM
 Website: N/A

SURGERY ORTHOPEDIC








EDMONDS, ERIC

Provider ID: 277831
Board Certified Specialty: No
ERIC W EDMONDS
 2125 CITRACADO PKWY STE 100 ESCONDIDO, CA 92029
 Phone: (760) 480-8770
 Fax: (760) 480-8811
 After Hours Phone: (760) 480-8770
Provider Gender: Male
NPI: 1013048412
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A


SURGERY ORTHOPEDIC

KNUTSON, THOMAS







Provider ID: 296851
Board Certified Specialty: No
THOMAS R KNUTSON
 2130 CITRACADO PKWY STE 200 ESCONDIDO, CA 92029
 Phone: (760) 743-4789
 Fax: (760) 743-4779
 After Hours Phone: (760) 743-4789
Provider Gender: Male
NPI: 1962409938
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

SURGERY ORTHOPEDIC

SHARP, LORRA


Provider ID: 304761
Board Certified Specialty: No
LORRA M SHARP
 2130 CITRACADO PKWY STE



D3. Directorio de proveedores especialistas

220
ESCONDIDO, CA 92029
 Phone: (760) 743-0546
Fax: (760) 317-9769
 After Hours Phone: (760)
743-0546
Provider Gender: Female
NPI: 1689689176
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: POMONA
VALLEY HOSP MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

SURGERY ORTHOPEDIC




SHARP, LORRA





Provider ID: 296808
Board Certified Specialty: No
LORRA M SHARP
 2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
 Phone: (760) 743-4789
Fax: (858) 385-1690
 After Hours Phone: (760)
743-4789
Provider Gender: Female
NPI: 1689689176
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: POMONA
VALLEY HOSP MED CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

SURGERY PEDIATRIC

KLING, KAREN









Provider ID: 206130
Board Certified Specialty: No
KAREN M KLING
 625 CITRACADO PKWY STE
206
ESCONDIDO, CA 92025
 Phone: (760) 755-7600
Fax: (760) 755-7699
 After Hours Phone: (760)
755-7600
Provider Gender: Female
NPI: 1982775144

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, NATIONAL
NAVAL MED CTR, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

FALLBROOK

CERTIFIED ACUPUNCTURIST

CRAFT, KEVIN

Provider ID: 290943
Board Certified Specialty: No
KEVIN E CRAFT
 1309 S MISSION RD
FALLBROOK, CA 92028
 Phone: (760) 690-5900
Fax: (760) 731-1063
 After Hours Phone: (760)
690-5900
Provider Gender: Male
NPI: 1659745610
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: TU-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

GUIDI, CASEY

Provider ID: 296010
Board Certified Specialty: No
CASEY L GUIDI
 1328 S MISSION RD
FALLBROOK, CA 92028
 Phone: (760) 451-4730
Fax: (760) 457-4700
 After Hours Phone: (760)
451-4730

D3. Directorio de proveedores especialistas

Provider Gender: Female

NPI: 1013349919

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N
Board Certified Specialty: No

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 298086

Board Certified Specialty: No
BRIDGET M KELLEHER

📍 321 E ALVARADO ST
FALLBROOK, CA 92028

☎ Phone: (760) 723-6200

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
723-6200

Provider Gender: Female

NPI: 1245695006

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH

8:00AM-8:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 299775

Board Certified Specialty: No
BRIDGET M KELLEHER

📍 321 E ALVARADO ST
FALLBROOK, CA 92028

☎ Phone: (760) 723-6200

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
723-6200

Provider Gender: Female

NPI: 1245695006

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH

8:00AM-8:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

STOJANOVSKA, JOVANA

Provider ID: 301367

Board Certified Specialty: No
JOVANA STOJANOVSKA

📍 1328 S MISSION RD
FALLBROOK, CA 92028

☎ Phone: (760) 451-4720

Fax: (760) 457-4700

🕒 After Hours Phone: (760)
451-4720

Provider Gender: Female

NPI: 1215638499

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 302118

Board Certified Specialty: No
CHRISTOPHER TAYLOR

📍 321 E ALVARADO ST
FALLBROOK, CA 92028

☎ Phone: (760) 723-6200

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
723-6200

Provider Gender: Male

NPI: 1851747166

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH

8:00AM-4:00PM

D3. Directorio de proveedores especialistas

 Website: N/A

CERTIFIED NURSE PRACTITIONER


TAYLOR, CHRISTOPHER

Provider ID: 299407

Board Certified Specialty: No

CHRISTOPHER TAYLOR

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

Fax: (760) 414-3892

 After Hours Phone: (760)
723-6200

Provider Gender: Male

NPI: 1851747166


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\100

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-4:00PM

 Website: N/A

CHIROPRACTOR


FARSHLER, ANTHONY

Provider ID: 290306

Board Certified Specialty: No

ANTHONY J FARSHLER

 1309 S MISSION RD
FALLBROOK, CA 92028

 Phone: (760) 690-5900

Fax: (760) 731-1063

 After Hours Phone: (760)
690-5900

Provider Gender: Male

NPI: 1841627759

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CHIROPRACTOR


HALVORSON, PAULA

Provider ID: 298338

Board Certified Specialty: No

PAULA HALVORSON

 1309 S MISSION RD
FALLBROOK, CA 92028

 Phone: (760) 690-5900

Fax: (760) 731-1063

 After Hours Phone: (760)
690-5900

Provider Gender: Female

NPI: 1275542193


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: TU 8:00AM-5:00PM
TH-F 8:00AM-5:00PM

 Website: N/A

FAMILY PRACTICE


CHRISTIE, PATRICIA

Provider ID: 299526

Board Certified Specialty: No

PATRICIA L CHRISTIE

 1328 S MISSION RD
FALLBROOK, CA 92028


 Phone: (760) 451-4720

Fax: (760) 457-4700

 After Hours Phone: (760)
451-4720

Provider Gender: Female

NPI: 1881625531


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:30PM

 Website: N/A

OPTOMETRIST


BULLUM, ANTHONY

Provider ID: 290329


Board Certified Specialty: No

ANTHONY J BULLUM

 1328 S MISSION RD
FALLBROOK, CA 92028

 Phone: (760) 451-4720

Fax: (760) 457-4700

 After Hours Phone: (760)
451-4720

Provider Gender: Male


NPI: 1992773956

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRICS

D3. Directorio de proveedores especialistas

ROBINSON, DAISY

Provider ID: 298311

Board Certified Specialty: No
DAISY A ROBINSON

321 E ALVARADO ST
FALLBROOK, CA 92028

Phone: (760) 723-6200

Fax: (760) 414-3892

After Hours Phone: (760)
723-6200

Provider Gender: Female

NPI: 1659389740

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-4:00PM

Website: N/A

PEDIATRICS

SMITH, LINDA

Provider ID: 308731

Board Certified Specialty: No
LINDA B SMITH

1328 S MISSION RD
FALLBROOK, CA 92028

Phone: (760) 451-4720

Fax: (760) 451-4700

After Hours Phone: (760)
451-4720

Provider Gender: Female

NPI: 1881665800

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, SHARP MEMORIAL

HOSPITAL, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:30PM

Website: N/A

HEMET

PHYSICIANS ASSISTANT

SMITH, KELLI

Provider ID: 272953

Board Certified Specialty: No

KELLI A SMITH

3853 W STETSON AVE STE
200

HEMET, CA 92545

Phone: (951) 225-6802

After Hours Phone: (951)
225-6802

Provider Gender: Female

NPI: 1841771664

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

IMPERIAL BEACH

CERTIFIED NURSE

PRACTITIONER

BORRAJERO, OBEL

Provider ID: 303242

Board Certified Specialty: No

OBEL M BORRAJERO

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)
429-3733

Provider Gender: Male

NPI: 1093280588

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

CUNNINGHAM, STEPHANIE

Provider ID: 301310

Board Certified Specialty: No

STEPHANIE L CUNNINGHAM

949 PALM AVE

D3. Directorio de proveedores especialistas

IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619) 429-3733

Provider Gender: Female

NPI: 1174223655

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

O'CONNELL, STEFANY

Provider ID: 296845

Board Certified Specialty: No

STEFANY I O'CONNELL

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619) 429-3733

Provider Gender: Female

NPI: 1386378479

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

THYGERSEN, ALAYSA

Provider ID: 297909

Board Certified Specialty: No

ALAYSA L THYGERSEN

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619) 429-3733

Provider Gender: Female

NPI: 1760107767

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

SUMMERS-DAY, COURTNEY

Provider ID: 290977

Board Certified Specialty: No

COURTNEY A SUMMERS-DAY

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619) 429-3733

Provider Gender: Female

NPI: 1124288873

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

INTERNAL MEDICINE

RYAN, DANA

Provider ID: 298099

Board Certified Specialty: No

DANA A RYAN

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619) 429-3733

Provider Gender: Female

NPI: 1780609990

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-8:00PM
TU-W 8:30AM-5:00PM

D3. Directorio de proveedores especialistas

TH 8:30AM-8:00PM
F 8:30AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON

Provider ID: 304530
Board Certified Specialty: No
BRANDON G CHENG

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Phone: (619) 332-4200
Fax: (613) 332-4220

After Hours Phone: (619)
332-4200

Provider Gender: Male

NPI: 1336894724

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
7:00AM-7:00PM
F 7:00AM-5:00PM
SA 8:00AM-1:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA

Provider ID: 299890
Board Certified Specialty: No
ANDREA L JIMENEZ

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Phone: (619) 482-3000
Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1407440670

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA

Provider ID: 301973
Board Certified Specialty: No
ANDREA L JIMENEZ

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Phone: (619) 482-3000
Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1407440670

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI

Provider ID: 287101
Board Certified Specialty: No
PRACHI KARANDE

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Phone: (619) 482-3000
Fax: (619) 482-3001

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1699357525

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
7:00AM-6:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA

Provider ID: 305015
Board Certified Specialty: No
TIA NGUYEN

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Phone: (619) 482-3000
Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

D3. Directorio de proveedores especialistas

Provider Gender: Female

NPI: 1457136269


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
7:00AM-7:00PM
F 7:00AM-4:00PM

 Website: N/A

REGISTERED PHYSICAL THERAPIST


NGUYEN, TIA

Provider ID: 305016

Board Certified Specialty: No

TIA NGUYEN

 600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

 Phone: (619) 482-3000

Fax: (619) 332-4220

 After Hours Phone: (619)
482-3000

Provider Gender: Female


NPI: 1457136269


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
7:00AM-7:00PM
F 7:00AM-4:00PM

 Website: N/A

REGISTERED PHYSICAL THERAPIST


NOVENCIDO, ANDREW

Provider ID: 286783

Board Certified Specialty: No

ANDREW NOVENCIDO

 600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

 Phone: (619) 482-3000

Fax: (619) 332-4220

 After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1447723937


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL THERAPIST


NOVENCIDO, ANDREW

Provider ID: 301995

Board Certified Specialty: No

ANDREW NOVENCIDO

 600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

 Phone: (619) 482-3000

Fax: (619) 332-4220

 After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1447723937


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


REGISTERED PHYSICAL THERAPIST

SPARKS, TODD

Provider ID: 301109

Board Certified Specialty: No
TODD M SPARKS

 600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

 Phone: (619) 482-3000


Fax: (619) 332-4220

 After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1265481139

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 7:00AM-7:00PM
TU 7:00AM-0:00PM
W-TH 7:00AM-7:00PM
F 7:00AM-0:00PM

 Website: N/A

REGISTERED PHYSICAL THERAPIST

D3. Directorio de proveedores especialistas

SUGGS, SARAH

Provider ID: 298365

Board Certified Specialty: No
SARAH SUGGS

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Phone: (619) 482-3000

Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1083353650

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7:00AM-7:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

SUGGS, SARAH

Provider ID: 301429

Board Certified Specialty: No
SARAH SUGGS

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Phone: (619) 482-3000

Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1083353650

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7:00AM-7:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

VILLANUEVA, GIOVANNI

Provider ID: 301531

Board Certified Specialty: No
GIOVANNI X VILLANUEVA

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Phone: (619) 482-3000

Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1063046878

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
7:00AM-7:00PM

F 7:00AM-5:00PM

Website: N/A

LA JOLLA

ANESTHESIOLOGY

ALEXANDER, BRENTON

Provider ID: 242302

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1811366644

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA

Provider ID: 300067

Board Certified Specialty: No
TOSHA D BECERRA SONGOLO

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265938724

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


ANESTHESIOLOGY


BRUNO, KELLY

Provider ID: 238904

*Board Certified Specialty: No
KELLY A BRUNO*

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1891130993

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA*

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM

 *Website: N/A*


ANESTHESIOLOGY


CURRAN, BRIAN

Provider ID: 239003

*Board Certified Specialty: No
BRIAN P CURRAN*

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1710373642

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA*

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM

 *Website: N/A*


ANESTHESIOLOGY

FEJLEH, ASHLEY

Provider ID: 269503

*Board Certified Specialty: No
ASHLEY N FEJLEH*

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1609353465

 *Provider English Spoken: Y
Cultural Competency: N*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM

 *Website: N/A*


ANESTHESIOLOGY

FUNDINGSLAND, BRENT

Provider ID: 280469

*Board Certified Specialty: No
BRENT W FUNDINGSLAND*

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1831166560

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL*

*ENCINITAS, SADDLEBACK
MEMORIAL MED CTR, UCSD*


*MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM

 *Website: N/A*


ANESTHESIOLOGY

HOSALKAR, HETAL

Provider ID: 243370

*Board Certified Specialty: No
HETAL H HOSALKAR*






 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 *Phone: (800) 926-8273*

Fax: (888) 539-8781


 *After Hours Phone: (800)*




D3. Directorio de proveedores especialistas

926-8273
Provider Gender: Female
NPI: 1861556821
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Gujarati,
Hindi
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY








HYLTON, DIANA

Provider ID: 241736
Board Certified Specialty: No
DIANA J HYLTON
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1932527751
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO
SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A









ANESTHESIOLOGY

MEYER, MEGAN

Provider ID: 239608
Board Certified Specialty: No
MEGAN S MEYER
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1720473044
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A





ANESTHESIOLOGY

NGUYEN, QUOC SY

Provider ID: 242189
Board Certified Specialty: No
QUOC-SY NGUYEN
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1871911644
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY

OKAMOTO, VINCENT

Provider ID: 245952
Board Certified Specialty: No
VINCENT R OKAMOTO
 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1952338709
 Provider English Spoken: Y
Cultural Competency: N

D3. Directorio de proveedores especialistas


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, ALVARADO
HOSPITAL LLC, SOUTHWEST
HEALTHCARE INLAND VALLEY


HOSPITAL, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY


OSWALD, JESSICA

Provider ID: 239601

Board Certified Specialty: No
JESSICA C OSWALD

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427315118


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY


SHAW, SUSANNA

Provider ID: 255317

Board Certified Specialty: No
SUSANNA J SHAW

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1063685477

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY


SORIA, CLAIRE

Provider ID: 243295

Board Certified Specialty: No
CLAIRE S SORIA

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447516414

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY

SUYDAM, STEVEN

Provider ID: 286570

Board Certified Specialty: No
STEPHEN M SUYDAM

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1386856821

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
TRI CITY MEDICAL CTR, SHARP

D3. Directorio de proveedores especialistas


MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP CHULA VISTA MED
CTR, SHARP CHULA VISTA
MED CTR, SHARP CORONADO
HOSP AND HEALTHCARE CTR,
RADY CHILDRENS HOSPITAL
SAN DIEGO, SCRIPPS GREEN
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY


TRIVEDI, SURAJ

Provider ID: 246750

Board Certified Specialty: No
SURAJ S TRIVEDI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699057885

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY

TSUDA, PAIGE

Provider ID: 271683

Board Certified Specialty: No
PAIGE S TSUDA

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1003261595

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY

TULLY, JEFFREY

Provider ID: 283690

Board Certified Specialty: No
JEFFREY L TULLY

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871912493

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UC DAVIS
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON,
UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY

TZENG, ERIC

Provider ID: 284578

Board Certified Specialty: No
ERIC TZENG

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1801258264

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 0\None

American Sign Language (ASL): ANDREA R YODER

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY

WANG, MICHELLE

Provider ID: 286139

Board Certified Specialty: No
MICHELLE Y WANG

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1659802965

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY


YODER, ANDREA

Provider ID: 272805

Board Certified Specialty: No

ANDREA R YODER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1629463104

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



ANESTHESIOLOGY

YOUNAN, LAWRENCE

Provider ID: 240871


Board Certified Specialty: No
LAWRENCE J YOUNAN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1922432475

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY PAIN



MANAGEMENT

CASTELLANOS, JOEL

Provider ID: 243554


Board Certified Specialty: No
JOEL P CASTELLANOS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1700296514

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CARDIOVASCULAR DISEASE

KEEN, WILLIAM

Provider ID: 291303

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
WILLIAM D KEEN

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

Provider Gender: Male

NPI: 1962561571

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CARDIOVASCULAR DISEASE

MIZZELL, ANNA

Provider ID: 214021

Board Certified Specialty: No

ANNA M MIZZELL

9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1851561021

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CARDIOVASCULAR DISEASE

PHREANER, NICHOLAS

Provider ID: 224864

Board Certified Specialty: No

NICHOLAS J PHREANER

9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1023373040

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CARDIOVASCULAR DISEASE

SHAPIRO, HILARY

Provider ID: 300000

Board Certified Specialty: No

HILARY A SHAPIRO

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1811382815

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304140

Board Certified Specialty: No

JACQUELINE ARELLANO

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED ACUPUNCTURIST

D3. Directorio de proveedores especialistas

ARELLANO, JACQUELINE

Provider ID: 304141

Board Certified Specialty: No

JACQUELINE ARELLANO

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304136

Board Certified Specialty: No

JACQUELINE ARELLANO

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304135

Board Certified Specialty: No

FIDES Q JULIAN

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304130

Board Certified Specialty: No

FIDES Q JULIAN

9400 CAMPUS POINT DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304134

Board Certified Specialty: No

FIDES Q JULIAN

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): AGYEMANG A AGYEMANG

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE PRACTITIONER


AGYEMANG, ALBERTA

Provider ID: 265131

Board Certified Specialty: No

AGYEMANG A AGYEMANG

 8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 Phone: (858) 657-8000

Fax: (858) 657-8387

 After Hours Phone: (858)
657-8000

Provider Gender: Female

NPI: 1023400082

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER

AGYEMANG, ALBERTA


Provider ID: 265130

Board Certified Specialty: No

AGYEMANG A AGYEMANG

 9350 CAMPUS POINT DR
STE 2B

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1023400082

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER

BOUTELLE, AMY


Provider ID: 243485


Board Certified Specialty: No

AMY L BOUTELLE

 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1609117704

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER

BRADY, KATELYN


Provider ID: 209017

Board Certified Specialty: No

KATELYN A BRADY

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1952797540

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER

BUENROSTRO, CHRISTINA

Provider ID: 243717

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

CHRISTINA BUENROSTRO

8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1851749253

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

CAPOZZI, JENNIFER

Provider ID: 241030

Board Certified Specialty: No

JENNIFER E CAPOZZI

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1336258276

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

CONNER, PAMELA

Provider ID: 299931

Board Certified Specialty: No

PAMELA M CONNER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770558967

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

CONNER, PAMELA

Provider ID: 299932

Board Certified Specialty: No

PAMELA M CONNER

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770558967

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

CONNOR, CAROLINE

Provider ID: 279834

Board Certified Specialty: No

CAROLINE L CONNOR

8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1609081710

Provider English Spoken: Y

D3. Directorio de proveedores especialistas


Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*


CERTIFIED NURSE PRACTITIONER

CZYPULL, MONICA


Provider ID: 284662

Board Certified Specialty: No
MONICA CZYPULL

 9850 GENESEE AVE STE 320
LA JOLLA, CA 92037

 *Phone: (858) 554-1212*

Fax: (858) 795-1195

 *After Hours Phone: (858) 554-1212*

Provider Gender: Female

NPI: 1831784842

 *Provider English Spoken: Y*
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER


DAVIES, SUMMER

Provider ID: 238922

Board Certified Specialty: No
SUMMER R DAVIES

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (858) 657-7600*

 *After Hours Phone: (858) 657-7600*

Provider Gender: Female

NPI: 1679850671

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER

DAVIES, SUMMER

Provider ID: 253691

Board Certified Specialty: No
SUMMER R DAVIES

 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

 *Phone: (858) 249-6800*

Fax: (858) 657-6420

 *After Hours Phone: (858)*

249-6800

Provider Gender: Female

NPI: 1679850671


 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER

DE DIOS, SARAH JANE

Provider ID: 300052

Board Certified Specialty: No
SARAH JANE J DE DIOS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1528632742

 *Provider English Spoken: Y*
Cultural Competency: N



Hospital Affiliation: SHARP CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

D3. Directorio de proveedores especialistas

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*


CERTIFIED NURSE PRACTITIONER


DIMAIRA, FRANCESCA

Provider ID: 245579

Board Certified Specialty: No FRANCESCA DIMAIRA

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1346670718

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

CERTIFIED NURSE PRACTITIONER


DIMAIRA, FRANCESCA


Provider ID: 245580

Board Certified Specialty: No FRANCESCA DIMAIRA

 3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1346670718

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

DRISCOLL, KARRIE


Provider ID: 286376

Board Certified Specialty: No

KARRIE A DRISCOLL

 3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093

 *Phone: (858) 822-6277*

Fax: (858) 228-1731

 *After Hours Phone: (858) 822-6277*

Provider Gender: Female

NPI: 1396085098

 *Provider English Spoken: Y*
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

CERTIFIED NURSE PRACTITIONER


GARTH, MELISSA

Provider ID: 268992

Board Certified Specialty: No

MELISSA A GARTH

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1689232977

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

CERTIFIED NURSE PRACTITIONER


GARTH, MELISSA

Provider ID: 268991

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
MELISSA A GARTH

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689232977


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

GIOVANNETTI, ERIN


Provider ID: 276002

Board Certified Specialty: No
ERIN R GIOVANNETTI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1013317767

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

GOMEZ, LESLIE

Provider ID: 299464

Board Certified Specialty: No
LESLIE N GOMEZ

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528578713

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


GOMEZ, LESLIE

Provider ID: 299469

Board Certified Specialty: No
LESLIE N GOMEZ

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528578713

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

GOMEZ, LESLIE

Provider ID: 299470

Board Certified Specialty: No
LESLIE N GOMEZ

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273



Provider Gender: Female

NPI: 1528578713

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

D3. Directorio de proveedores especialistas

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

CERTIFIED NURSE



PRACTITIONER

GOMEZ, LESLIE



Provider ID: 299465
Board Certified Specialty: No
LESLIE N GOMEZ
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1528578713

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*


CERTIFIED NURSE

PRACTITIONER

HANNA, LINDSAY


Provider ID: 284967
Board Certified Specialty: No
LINDSAY D HANNA

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*
Fax: (888) 539-8781


 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1699257907

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*


CERTIFIED NURSE


PRACTITIONER

HARKNESS, RUMIKO



Provider ID: 208840
Board Certified Specialty: No
RUMIKO HARKNESS

 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037
 *Phone: (800) 926-8273*


 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1487785093

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Japanese*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*


CERTIFIED NURSE


PRACTITIONER

IYER, VICTORIA



Provider ID: 265624
Board Certified Specialty: No
VICTORIA G IYER

 9350 CAMPUS POINT DR
STE 2B


LA JOLLA, CA 92037
 *Phone: (800) 926-8273*


Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1871738864

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Tagalog*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER

JONES, CHRISTA

Provider ID: 275564
Board Certified Specialty: No
CHRISTA E JONES

 9300 CAMPUS POINT DR

D3. Directorio de proveedores especialistas

LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (800) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1396371431
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

KORMANIK, PATRICIA

Provider ID: 282070
Board Certified Specialty: No
PATRICIA A KORMANIK

📍 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1093895047

🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY

Provider ID: 301604
Board Certified Specialty: No
KIMBERLY A LANE

📍 9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
☎ Phone: (858) 453-5944
Fax: (858) 429-7925
📞 After Hours Phone: (858) 453-5944

Provider Gender: Female
NPI: 1457670119

🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

LEE, HEE

Provider ID: 274644

Board Certified Specialty: No
HEE J LEE

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1497275705

🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Korean

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER


MATTHESS, JANETTE

Provider ID: 287644
Board Certified Specialty: No
JANETTE E MATTHESS

📍 8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1457694549

D3. Directorio de proveedores especialistas

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MATTHESS, JANETTE

Provider ID: 287645

Board Certified Specialty: No
JANETTE E MATTHESS

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1457694549

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MICK, SHARON

Provider ID: 299651

Board Certified Specialty: No
SHARON L MICK

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891061966

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MICK, SHARON

Provider ID: 299650

Board Certified Specialty: No
SHARON L MICK

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093
 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891061966

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MICK, SHARON

Provider ID: 299645

Board Certified Specialty: No
SHARON L MICK

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891061966

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

D3. Directorio de proveedores especialistas

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MICK, SHARON

Provider ID: 299646

Board Certified Specialty: No
SHARON L MICK

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891061966

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


MOHEBBI, ATHENA

Provider ID: 282231

Board Certified Specialty: No
ATHENA MOHEBBI

 9300 CAMPUS POINT DR

LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1952627176

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MULVEY, CAOILFHIONN


Provider ID: 291420

Board Certified Specialty: No

CAOILFHIONN M MULVEY

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093


 Phone: (800) 926-8372

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

Provider Gender: Female

NPI: 1184386864

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


NACOSTE, LAKEISHA


Provider ID: 272935

Board Certified Specialty: No
LAKEISHA NACOSTE

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (858) 822-5210

 After Hours Phone: (858)
822-5210

Provider Gender: Female

NPI: 1194139634


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

PAULSON, KERRY

Provider ID: 201269

Board Certified Specialty: No
KERRY L PAULSON

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (619) 543-3000

 After Hours Phone: (619)

D3. Directorio de proveedores especialistas

543-3000
Provider Gender: Female
NPI: 1518363407
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
9:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

RALEIGH, DEBORAH
Provider ID: 215016
Board Certified Specialty: No
DEBORAH J RALEIGH
📍 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1689006876
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

ROCHE, CHELSEA
Provider ID: 270706
Board Certified Specialty: No
CHELSEA E ROCHE
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1063040384
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

ROSSI, CATHERINE
Provider ID: 291446

Board Certified Specialty: No
CATHERINE R ROSSI
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8372
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8372
Provider Gender: Female
NPI: 1649934126
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER


SRILASAK, MICHELE
Provider ID: 281855
Board Certified Specialty: No
MICHELE SRILASAK
📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1265487326
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 215475

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

STEVENSON, REHEIA


Provider ID: 210795

Board Certified Specialty: No

REHEIA A STEVENSON

 9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346696044

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

TOPPEN, LAURA


Provider ID: 215475


Board Certified Specialty: No

LAURA TOPPEN

 9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1326563495

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

TOPPEN, LAURA


Provider ID: 215476


Board Certified Specialty: No

LAURA TOPPEN

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1326563495

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


TREJO, ANA


Provider ID: 307671

Board Certified Specialty: No
ANA C TREJO

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1033717194


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

TREJO, ANA

Provider ID: 307670

Board Certified Specialty: No
ANA C TREJO

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)

D3. Directorio de proveedores especialistas

926-8273
Provider Gender: Female
NPI: 1033717194
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

TREJO, ANA

Provider ID: 307673
Board Certified Specialty: No
ANA C TREJO
📍 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1033717194
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

TRUJILLO, DALE

Provider ID: 278428
Board Certified Specialty: No

DALE M TRUJILLO
📍 9350 CAMPUS POINT DR
STE 2B
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
☎ Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1003104423
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

TUCKER, LANIKA

Provider ID: 307658
Board Certified Specialty: No
LANIKA A TUCKER
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1477325181
☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

YEO, ALEXANDRIA

Provider ID: 299942
Board Certified Specialty: No
ALEXANDRIA YEO
📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
☎ Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1902368319
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST

ALFONSO, ALVIN

Provider ID: 256375
Board Certified Specialty: No
ALVIN M ALFONSO
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273

D3. Directorio de proveedores especialistas

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952653404

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST


BAYLIS, CHRISTOPHER

Provider ID: 240764

Board Certified Specialty: No

CHRISTOPHER M BAYLIS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1174893358


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED REGISTERED NURSE ANESTHETIST

BURROWS, TERENCE

Provider ID: 256695

Board Certified Specialty: No
TERENCE J BURROWS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1023194560


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED REGISTERED NURSE ANESTHETIST

DOLLAND, STEVEN

Provider ID: 280553

Board Certified Specialty: No
STEVEN C DOLLAND

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982059044

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: KERN

MEDICAL CENTER, UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED REGISTERED NURSE ANESTHETIST

FERRITER, STACY

Provider ID: 265296

Board Certified Specialty: No
STACY K FERRITER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780725556

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA




JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N


D3. Directorio de proveedores especialistas

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED REGISTERED


NURSE ANESTHETIST


GARCIA, CALVIN


Provider ID: 217366
Board Certified Specialty: No
CALVIN J GARCIA
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1427419944

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER



 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

GONZALEZ, LISA

Provider ID: 299906
Board Certified Specialty: No
LISA A GONZALEZ
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083254205

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED REGISTERED



NURSE ANESTHETIST

POLIKOWSKI, SAMANTHA

Provider ID: 291443
Board Certified Specialty: No
SAMANTHA E POLIKOWSKI
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1194134114

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: KAISER
FOUNDATION HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N




 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

RAMIREZ, NICOLE

Provider ID: 291403
Board Certified Specialty: No
NICOLE A RAMIREZ
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1487213500

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

SACKS, BRENT

Provider ID: 278004
Board Certified Specialty: No
BRENT A SACKS
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male

D3. Directorio de proveedores especialistas

NPI: 1982133591


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE MIDWIFE

CHOI, NATHALIE

Provider ID: 301713

Board Certified Specialty: No
NATHALIE L CHOI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073241618

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER,


SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


GOODWIN, RACHEL


Provider ID: 210017

Board Certified Specialty: No
RACHEL K GOODWIN

 8910 VILLA LA JOLLA DR
STE 200


LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1518274919

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


GREAR MANN, MELISSA


Provider ID: 210051

Board Certified Specialty: No
MELISSA P GREAR MANN

 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1255384475


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


GUNTHER, HOPE


Provider ID: 210040

Board Certified Specialty: No
HOPE R GUNTHER

 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

 Phone: (858) 657-8745

 After Hours Phone: (858)
657-8745

Provider Gender: Female

NPI: 1285667741

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D3. Directorio de proveedores especialistas

 Hours: M-TU
8:00AM-5:00PM
W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM
 Website: N/A

CERTIFIED REGISTERED


NURSE MIDWIFE


HIRSCH, JENNIFER

Provider ID: 210057

Board Certified Specialty: No
JENNIFER S HIRSCH


 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

 Phone: (858) 657-8745

 After Hours Phone: (858)
657-8745

Provider Gender: Female

NPI: 1891752069

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU

8:00AM-5:00PM

W 8:00AM-8:00PM

TH-F 8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE MIDWIFE


HIRSCH, JENNIFER

Provider ID: 210056

Board Certified Specialty: No
JENNIFER S HIRSCH


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-8745

 After Hours Phone: (858)
657-8745

Provider Gender: Female

NPI: 1891752069

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


NATHAN, CARLY

Provider ID: 301046

Board Certified Specialty: No

CARLY NATHAN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1235670977

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER
 Website: N/A


EMERGENCY MEDICINE

AMANN, CHRISTOPHER

Provider ID: 270914

Board Certified Specialty: No
CHRISTOPHER J AMANN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-7000

Fax: (888) 539-8781

 After Hours Phone: (858)
657-7000

Provider Gender: Male

NPI: 1134326895

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON, USC

KENNETH NORRIS JR CANCER

HOSPITAL, KECK HOSPITAL OF

USC, USC VERDUGO HILLS


HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

AUSTIN, ANDREA

Provider ID: 269292

Board Certified Specialty: No
ANDREA L AUSTIN

 9300 CAMPUS POINT DR

D3. Directorio de proveedores especialistas

LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1811289093
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, GROSSMONT HOSPITAL, Los Angeles General Medical Center, TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE

BAGBY, JESSICA

Provider ID: 271138
Board Certified Specialty: No
JESSICA A BAGBY
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1093161473
Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE

BAGBY, JESSICA

Provider ID: 271135
Board Certified Specialty: No
JESSICA A BAGBY
8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
Phone: (858) 249-6800
Fax: (858) 404-9226
After Hours Phone: (858) 249-6800
Provider Gender: Female
NPI: 1093161473
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F

8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE

BARRY, JEFFREY

Provider ID: 271131
Board Certified Specialty: No
JEFFREY R BARRY
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1801207006
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY

Provider ID: 270335
Board Certified Specialty: No
AMY BELLINGHAUSEN
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

D3. Directorio de proveedores especialistas

Provider Gender: Female
NPI: 1801206354
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

EMERGENCY MEDICINE

BLACK, NICHOLAS

Provider ID: 284415
Board Certified Specialty: No
NICHOLAS D BLACK

📍 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1154852689

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
UCSD MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-8:00PM
🌐 Website: N/A

EMERGENCY MEDICINE

CASTELLANO, TIFFANY

Provider ID: 271611
Board Certified Specialty: No
TIFFANY M CASTELLANO

📍 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
☎ Phone: (858) 249-6800
Fax: (858) 404-9226
🕒 After Hours Phone: (858)
249-6800

Provider Gender: Female
NPI: 1063893063

☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

EMERGENCY MEDICINE

CHEN, ALICE

Provider ID: 287429
Board Certified Specialty: No

ALICE Y CHEN
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1427476597
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Mandarin

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

EMERGENCY MEDICINE

CHEN, ALICE


Provider ID: 287427
Board Certified Specialty: No
ALICE Y CHEN

📍 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1427476597

☐ Provider English Spoken: Y
☐ Provider Language(s)

D3. Directorio de proveedores especialistas

Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*


EMERGENCY MEDICINE

GALUST, HENRIK

Provider ID: 300053
Board Certified Specialty: No
HENRIK GALUST
 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*


Provider Gender: Male

NPI: 1932696093

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


 *Website: N/A*

EMERGENCY MEDICINE

GOODRICH, ANDREW

Provider ID: 271625

Board Certified Specialty: No
ANDREW S GOODRICH

 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*

Provider Gender: Male

NPI: 1245688415

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*



 *Website: N/A*

EMERGENCY MEDICINE

GUITTARD, JESSE



Provider ID: 239880

Board Certified Specialty: No
JESSE A GUITTARD

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (858) 657-6400*
 *After Hours Phone: (858) 657-6400*


Provider Gender: Male

NPI: 1770979890

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

EMERGENCY MEDICINE

HERNANDEZ, CRISTINA



Provider ID: 242545

Board Certified Specialty: No
CRISTINA T HERNANDEZ

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1164765046

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N


Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

D3. Directorio de proveedores especialistas

EMERGENCY MEDICINE

HERNANDEZ, CRISTINA

Provider ID: 278988

Board Certified Specialty: No
CRISTINA T HERNANDEZ

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1164765046

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

HOGUE, BRENN A

Provider ID: 300006

Board Certified Specialty: No
BRENN A L HOGUE

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1043705296

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

EMERGENCY MEDICINE

HOGUE, BRENN A

Provider ID: 301710

Board Certified Specialty: No
BRENN A L HOGUE

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1043705296

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

EMERGENCY MEDICINE

HORNBEAK, KIRSTEN

Provider ID: 240023

Board Certified Specialty: No
KIRSTEN B HORNBEAK

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1205214442

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

KRESHAK, ALLYSON

Provider ID: 257564

Board Certified Specialty: No
ALLYSON A KRESHAK

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1194758219

Provider English Spoken: Y
Cultural Competency: N


D3. Directorio de proveedores especialistas


*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


EMERGENCY MEDICINE

KUTZ, CRAIG

Provider ID: 283846

*Board Certified Specialty: No
KUTZ CRAIG MD*

 *9300 CAMPUS POINT DR
LA JOLLA, CA 92037*

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1598295925

 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY*



*THORNTON, UCSD MEDICAL
CTR, TRI CITY MEDICAL CTR*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

EMERGENCY MEDICINE


KUTZ, CRAIG

Provider ID: 283844

*Board Certified Specialty: No
KUTZ CRAIG MD*

 *8910 VILLA LA JOLLA DR
STE 200*

LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1598295925

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY*


*THORNTON, UCSD MEDICAL
CTR, TRI CITY MEDICAL CTR*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


EMERGENCY MEDICINE

LI, JINGHONG

Provider ID: 255937

*Board Certified Specialty: No
JINGHONG LI*

 *9300 CAMPUS POINT DR
LA JOLLA, CA 92037*

 *Phone: (858) 657-7125*

Fax: (858) 657-7107

 *After Hours Phone: (858)
657-7125*

Provider Gender: Female

NPI: 1619014479

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA*


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

EMERGENCY MEDICINE


LI, JINGHONG

Provider ID: 255938

*Board Certified Specialty: No
JINGHONG LI*

 *9434 MEDICAL CENTER DR
FL 1*

LA JOLLA, CA 92037

 *Phone: (858) 657-7125*

Fax: (858) 657-7107

 *After Hours Phone: (858)
657-7125*

Provider Gender: Female

NPI: 1619014479

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA*

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

D3. Directorio de proveedores especialistas

American Sign Language (ASL): Provider ID: 246900

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


EMERGENCY MEDICINE

LIOTTA, BENJAMIN

Provider ID: 283150

Board Certified Specialty: No
BENJAMIN I LIOTTA

 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1396270278

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-8:00PM


 Website: N/A


EMERGENCY MEDICINE

MCDANIEL, MICHELE

Board Certified Specialty: No
MICHELE A MCDANIEL

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1366761959

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


EMERGENCY MEDICINE


NOSTE, ERIN

Provider ID: 239796

Board Certified Specialty: No
ERIN E NOSTE

 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

 Phone: (858) 249-6800

 After Hours Phone: (858)
249-6800

Provider Gender: Female

NPI: 1871732214

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE


PARK, JAY

Provider ID: 285609

Board Certified Specialty: No

JAY H PARK

 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1366478372

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON



Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

D3. Directorio de proveedores especialistas

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*


EMERGENCY MEDICINE

PARK, JAY

Provider ID: 285608

*Board Certified Specialty: No
JAY H PARK*

 *9300 CAMPUS POINT DR
LA JOLLA, CA 92037*

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1366478372

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


EMERGENCY MEDICINE

QUENZER, FAITH

Provider ID: 243284

*Board Certified Specialty: No
FAITH C QUENZER*

 *8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037*

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)*

926-8273
Provider Gender: Female
NPI: 1295112670

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation:


*UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, UNIVERSITY
HSP OF SAN DIEGO CO*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: SU 8:00AM-8:00PM
M-F 8:00AM-5:00PM
SA 8:00AM-8:00PM*

 *Website: N/A*


EMERGENCY MEDICINE


RUDOLF, FRANCES

Provider ID: 240160

*Board Certified Specialty: No
FRANCES E RUDOLPH*



 *9300 CAMPUS POINT DR
LA JOLLA, CA 92037*

 *Phone: (858) 657-7000*

 *After Hours Phone: (858)
657-7000*

Provider Gender: Female

NPI: 1821487430

 *Provider English Spoken: Y*
 *Provider Language(s)*

Spoken: Spanish



Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*


EMERGENCY MEDICINE

SABHA, MAHMOUD

Provider ID: 240450

*Board Certified Specialty: No
MAHMOUD SABHA*

 *8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037*

 *Phone: (858) 249-6800*

 *After Hours Phone: (858)
249-6800*

Provider Gender: Male

NPI: 1457747883

 *Provider English Spoken: Y*
 *Provider Language(s)*

Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: SU 8:00AM-8:00PM
M-F 8:00AM-5:00PM*

SA 8:00AM-8:00PM

 *Website: N/A*

EMERGENCY MEDICINE

SELTZER, JUSTIN

Provider ID: 283135

*Board Certified Specialty: No
JUSTIN A SELTZER*

 *8910 VILLA LA JOLLA DR
STE 200*

D3. Directorio de proveedores especialistas

LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1447791843
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

EMERGENCY MEDICINE

SMITH, CASEY

Provider ID: 300008
Board Certified Specialty: No
CASEY L SMITH
📍 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1871099333
🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

EMERGENCY MEDICINE

SUPAT, BENJAMIN

Provider ID: 299907
Board Certified Specialty: No
BENJAMIN R SUPAT
📍 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1376772905

🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

EMERGENCY MEDICINE

WINKLER, GARRET

Provider ID: 271416
Board Certified Specialty: No
GARRET A WINKLER
📍 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male

NPI: 1336502095
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

EMERGENCY MEDICINE

YOU, ALAN

Provider ID: 269938
Board Certified Specialty: No
ALAN X YOU
📍 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1225425697

🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE

YOU, ALAN

Provider ID: 269937
Board Certified Specialty: No
ALAN X YOU

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1225425697

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE

YU, ELAINE

Provider ID: 301707
Board Certified Specialty: No
ELAINE YU

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273

Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1528564150

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Website: N/A

EMERGENCY MEDICINE

YU, ELAINE

Provider ID: 299985
Board Certified Specialty: Yes
ELAINE YU

8910 VILLA LA JOLLA DR
STE A
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1528564150

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

JUANG, PATRICIA

Provider ID: 255606
Board Certified Specialty: No
PATRICIA S JUANG

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1265695795

Provider English Spoken: Y
Provider Language(s)
Spoken: Mandarin
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

KULASA, KRISTEN

Provider ID: 255623
Board Certified Specialty: No
KRISTEN M KULASA


9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 962-8273
Fax: (888) 539-8781

After Hours Phone: (800)
962-8273
Provider Gender: Female
NPI: 1932324175

D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


ENDOCRINOLOGY **METABOLISM DIABETES**


NAGELBERG, JODI

Provider ID: 287778

Board Certified Specialty: No
JODI B NAGELBERG


 *8939 VILLA LA JOLLA DR*
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)*
926-8273

Provider Gender: Female

NPI: 1720474141

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

ENDOCRINOLOGY

METABOLISM DIABETES


PETTUS, JEREMY

Provider ID: 303286

Board Certified Specialty: No

JEREMY H PETTUS


 *9350 CAMPUS POINT DR*
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)*
926-8273

Provider Gender: Male

NPI: 1225234982

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Website: N/A*

ENDOCRINOLOGY

METABOLISM DIABETES



SANTOS CAVAIOLA, TRICIA

Provider ID: 256092

Board Certified Specialty: No

TRICIA SANTOS CAVAIOLA

 *9350 CAMPUS POINT DR*
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*
 *After Hours Phone: (800)*
926-8273

Provider Gender: Female

NPI: 1518163799

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


FAMILY PRACTICE

CHEN, ALICE


Provider ID: 207166

Board Certified Specialty: No

ALICE I CHEN

 *9300 MEDICAL CENTER*
DR
LA JOLLA, CA 92037


 *Phone: (800) 926-8273*

 *After Hours Phone: (800)*
926-8273

Provider Gender: Female

NPI: 1265810337

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

D3. Directorio de proveedores especialistas

FAMILY PRACTICE

CHEN, ALICE

Provider ID: 207165

Board Certified Specialty: No

ALICE I CHEN

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265810337

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

JOLICOEUR, MEGAN

Provider ID: 300056

Board Certified Specialty: Yes

MEGAN E JOLICOEUR

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1114366192

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

GASTROENTEROLOGY

ANAND, GOBIND

Provider ID: 272836

Board Certified Specialty: No

GOBIND S ANAND

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (619) 543-2347

Fax: (858) 657-7259

After Hours Phone: (619)
543-2347

Provider Gender: Male

NPI: 1861626814

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

GASTROENTEROLOGY

DAVE, SHRAVAN

Provider ID: 270448

Board Certified Specialty: No

SHRAVAN S DAVE

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 925-8273

Fax: (888) 539-8781

After Hours Phone: (800)
925-8273

Provider Gender: Male

NPI: 1588081814

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

GASTROENTEROLOGY

DAVE, SHRAVAN

Provider ID: 270449

Board Certified Specialty: No

SHRAVAN S DAVE

9300 CAMPUS POINT DR
STE 2C
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1588081814

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes



Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER


D3. Directorio de proveedores especialistas

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

GASTROENTEROLOGY **FEJLEH, MOHAMMAD**

Provider ID: 271042
Board Certified Specialty: No
MOHAMMAD P FEJLEH

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1205240959


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

 Website: N/A

GASTROENTEROLOGY **FEJLEH, MOHAMMAD**

Provider ID: 271043
Board Certified Specialty: No
MOHAMMAD P FEJLEH

 9300 CAMPUS POINT DR
STE 2C
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1205240959


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

 Website: N/A

GASTROENTEROLOGY **HASAN, AWS**

Provider ID: 299953
Board Certified Specialty: No
AWS K HASAN

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


Provider Gender: Male
NPI: 1780047597

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

 Website: N/A

GASTROENTEROLOGY **HASAN, AWS**

Provider ID: 299952
Board Certified Specialty: No
AWS K HASAN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1780047597

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

 Website: N/A

GASTROENTEROLOGY **HOLMER, ARIELA**

Provider ID: 273216
Board Certified Specialty: No
ARIELA K HOLMER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1083032544

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


GASTROENTEROLOGY

SHAH, SHAILJA

Provider ID: 283897

*Board Certified Specialty: No
SHAILJA C SHAH*

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1073803243

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL
CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


GASTROENTEROLOGY

SHAH, SHAILJA

Provider ID: 283898

*Board Certified Specialty: No
SHAILJA C SHAH*

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1073803243

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL
CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


GASTROENTEROLOGY

TSAI, MATTHEW

Provider ID: 252368


*Board Certified Specialty: No
MATTHEW TSAI*

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*
*After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1285051177

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA*

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*



GASTROENTEROLOGY

TSAI, MATTHEW

Provider ID: 252369


*Board Certified Specialty: No
MATTHEW TSAI*

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1285051177

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA*

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

GASTROENTEROLOGY


YOUSSEF, FADY

Provider ID: 300025

*Board Certified Specialty: No
FADY F YOUSSEF*

D3. Directorio de proveedores especialistas

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265887723

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


GASTROENTEROLOGY

YOUSSEF, FADY

Provider ID: 300023

Board Certified Specialty: No
FADY F YOUSSEF

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265887723


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

HEMATOLOGY / ONCOLOGY


ASIMAKOPOULOS, FOTIOS


Provider ID: 246594

Board Certified Specialty: No
FOTIOS A ASIMAKOPOULOS

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (858) 822-6100

 After Hours Phone: (858)
822-6100

Provider Gender: Male

NPI: 1518134923

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


HEMATOLOGY / ONCOLOGY

CHEN, YU-WEI

Provider ID: 303057

Board Certified Specialty: No
YU-WEI CHEN


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1245694801

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


HEMATOLOGY / ONCOLOGY

CHEN, YU-WEI

Provider ID: 303058

Board Certified Specialty: No
YU-WEI CHEN

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1245694801

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

HEMATOLOGY / ONCOLOGY


HAMDAN, AYAD

Provider ID: 241429

Board Certified Specialty: No
AYAD R HAMDAN

 3960 HEALTH SCIENCES
DRIVE

LA JOLLA, CA 92093


 Phone: (800) 926-8273

D3. Directorio de proveedores especialistas

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1144431230

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, French

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


HEMATOLOGY / ONCOLOGY


HEYMAN, BENJAMIN

Provider ID: 202662

Board Certified Specialty: No
BENJAMIN M HEYMAN

 3855 HEALTH SCIENCES
DR

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982995809

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU-SA
8:00AM-5:00PM

 Website: N/A


HEMATOLOGY / ONCOLOGY


HEYMAN, BENJAMIN

Provider ID: 202664

Board Certified Specialty: No
BENJAMIN M HEYMAN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982995809

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

HEMATOLOGY / ONCOLOGY


HEYMAN, BENJAMIN

Provider ID: 202663

Board Certified Specialty: No
BENJAMIN M HEYMAN

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982995809

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

HEMATOLOGY / ONCOLOGY


PARK, SOO

Provider ID: 257202

Board Certified Specialty: No
SOO J PARK

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1821351198





 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

D3. Directorio de proveedores especialistas




American Sign Language (ASL):  9400 CAMPUS POINT DR
LA JOLLA, CA 92093
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

HEMATOLOGY / ONCOLOGY

RICHARDSON, ANGELIQUE

Provider ID: 215010

Board Certified Specialty: No
ANGELIQUE E RICHARSON

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1700120102


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

HEMATOLOGY / ONCOLOGY

STEWART, TYLER

Provider ID: 243920

Board Certified Specialty: No
TYLER F STEWART

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699110676

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM



 Website: N/A

HEMATOLOGY / ONCOLOGY

VU, PETER

Provider ID: 272717

Board Certified Specialty: No
PETER VU

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1861810830

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


HOSPICE AND PALLIATIVE


MEDICINE

RUBENZI, TAMARA

Provider ID: 245574

Board Certified Specialty: No
TAMARA T RUBENZI

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1811200652

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INFECTIOUS DISEASE

D3. Directorio de proveedores especialistas

KUPPALLI, KRUTIKA

Provider ID: 301057

Board Certified Specialty: No
KRUTIKA KUPPALLI

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1538346317

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, Stanford Health
Care, STANFORD HEALTH
CARE TRI-VALLEY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

INFECTIOUS DISEASE

KUPPALLI, KRUTIKA

Provider ID: 301059

Board Certified Specialty: No
KRUTIKA KUPPALLI

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1538346317

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, Stanford Health
Care, STANFORD HEALTH
CARE TRI-VALLEY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

INFECTIOUS DISEASE

RAMIREZ SANCHEZ, CLAUDIA

Provider ID: 299947

Board Certified Specialty: No
CLAUDIA CAROLINA RAMIREZ
SANCHEZ

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1659720555

🗨 Provider English Spoken: Y

🗨 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

INFECTIOUS DISEASE

TANG, MICHAEL

Provider ID: 300063

Board Certified Specialty: No
MICHAEL E TANG

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982018545

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

INTERNAL MEDICINE

BORDIN-WOSK, TALYA

Provider ID: 273984

Board Certified Specialty: No
TALYA S BORDIN WOSK

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (760) 471-9186

Fax: (619) 543-8255

🕒 After Hours Phone: (760)
471-9186

Provider Gender: Female

NPI: 1801184973

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

D3. Directorio de proveedores especialistas


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE


BORDIN-WOSK, TALYA

Provider ID: 273985

Board Certified Specialty: No
TALYA S BORDIN WOSK


 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1801184973

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE


CHENG, GEORGE


Provider ID: 247640

Board Certified Specialty: No

GEORGE Z CHENG


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1316174568

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

DJEKIC, KRISTINA

Provider ID: 286669

Board Certified Specialty: No
KRISTINA DJEKIC

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1417343732

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE


HOGARTH, MICHAEL

Provider ID: 214385

Board Certified Specialty: No
MICHAEL A HOGARTH

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225019193

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON, UC

DAVIS MEDICAL CTR



Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N




 Accessibility: CONTACT PROVIDER

D3. Directorio de proveedores especialistas

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

IVANOV, MARGARET

Provider ID: 272876
Board Certified Specialty: No
MARGARET A IVANOV
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1326427014

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):



N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

JABBOUR, MOUSSA



Provider ID: 256658
Board Certified Specialty: No
MOUSSA JABBOUR
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)

926-8273
Provider Gender: Male
NPI: 1255741633

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic

Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A


INTERNAL MEDICINE



KATZ, YISRAEL


Provider ID: 272937
Board Certified Specialty: No
YISRAEL KATZ

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1730507872

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None


American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F


8:00AM-5:00PM
 Website: N/A



INTERNAL MEDICINE

KVIATKOVSKY, MILLA

Provider ID: 274004
Board Certified Specialty: No
MILLA J KVIATKOVSKY

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1366855355

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Finnish, French,
Hebrew, Spanish

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

KVIATKOVSKY, MILLA

Provider ID: 274002
Board Certified Specialty: No
MILLA J KVIATKOVSKY

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 657-7000

D3. Directorio de proveedores especialistas

☎ After Hours Phone: (858) 657-7000

Provider Gender: Female

NPI: 1366855355

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Finnish, French,
Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

INTERNAL MEDICINE

LAGO HERNANDEZ, CARLOS

Provider ID: 238624

Board Certified Specialty: No

CARLOS A LAGO-HERNANDEZ

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1558756270

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

INTERNAL MEDICINE

LAGO HERNANDEZ, CARLOS

Provider ID: 238623

Board Certified Specialty: No

CARLOS A LAGO-HERNANDEZ

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1558756270

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

INTERNAL MEDICINE

LAM, MICHAEL

Provider ID: 274409

Board Certified Specialty: No

MICHAEL T LAM

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1578974259

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

INTERNAL MEDICINE

MAJITHIA, AMIT

Provider ID: 255881

Board Certified Specialty: No

AMIT R MAJITHIA

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1801091459

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

D3. Directorio de proveedores especialistas


CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE


MARTINEZ, ARMANDO

Provider ID: 291422

Board Certified Specialty: No
ARMANDO R MARTINEZ

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8372
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

Provider Gender: Male


NPI: 1598261091

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


INTERNAL MEDICINE

NOKES, BRANDON

Provider ID: 287581

Board Certified Specialty: No
BRANDON T NOKES

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1487040051

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

POTOK, OLIVIA

Provider ID: 272707

Board Certified Specialty: No
OLIVIA A POTOK

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073951323

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



INTERNAL MEDICINE

SEBASKY, MEGHAN

Provider ID: 273963

Board Certified Specialty: No
MEGHAN M SEBASKY

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (619) 471-9186
 After Hours Phone: (619)
471-9186

Provider Gender: Female

NPI: 1538351408

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

SEBASKY, MEGHAN

Provider ID: 273964

Board Certified Specialty: No
MEGHAN M SEBASKY

D3. Directorio de proveedores especialistas

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1538351408

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

SMITH, CHELSEY

Provider ID: 239921

Board Certified Specialty: No
CHELSEY J SMITH

9350 CAMPUS POINT DR
STE 2B

LA JOLLA, CA 92037
Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1013264506

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

TAYLOR, DAVID

Provider ID: 274470

Board Certified Specialty: No
DAVID S TAYLOR

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033572995

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

WANG, ANGELA

Provider ID: 259536

Board Certified Specialty: No
ANGELA C WANG

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730133976

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

YADLAPATI, RENA

Provider ID: 238587

Board Certified Specialty: No
RENA H YADLAPATI

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273
After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1548597784

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

D3. Directorio de proveedores especialistas


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE


YADLAPATI, RENA

Provider ID: 238586

Board Certified Specialty: No
RENA H YADLAPATI

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1548597784

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE


YANG, JENNY

Provider ID: 283025

Board Certified Specialty: No

JENNY Z YANG

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346636453

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE


ZHANG, SHERRY

Provider ID: 272658

Board Certified Specialty: No
SHERRY S ZHANG



 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1588198147

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL

CARDIOLOGY


AL KHIAMI, BELAL


Provider ID: 275993

Board Certified Specialty: No
BELAL O AL KHIAMI

 9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

 Phone: (858) 657-8530

 After Hours Phone: (858)
657-8530

Provider Gender: Male

NPI: 1861623506

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, PIONEERS MEMORIAL

HOSPITAL, EL CENTRO

REGIONAL MEDICAL CENTER,

LOMA LINDA UNIVERSITY

D3. Directorio de proveedores especialistas


MED CTR MURRIETA,
TEMECULA VALLEY HOSPITAL
INC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERVENTIONAL CARDIOLOGY

CRUZ RODRIGUEZ, JOSE

Provider ID: 300062

Board Certified Specialty: No
JOSE B CRUZ RODRIGUEZ

 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1457770240

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL, EL

CENTRO REGIONAL MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

INTERVENTIONAL CARDIOLOGY


DAMANI, SAMIR

Provider ID: 303097

Board Certified Specialty: No
SAMIR B DAMANI

 9850 GENESEE AVE STE
650

LA JOLLA, CA 92037

 Phone: (858) 800-2480

Fax: (858) 216-1908

 After Hours Phone: (858)
800-2480

Provider Gender: Male

NPI: 1457379372

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

INTERVENTIONAL CARDIOLOGY

GOVEA, ALAYN

Provider ID: 300030

Board Certified Specialty: No
ALAYN GOVEA

 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1972997104

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
LAKEWOOD REGIONAL MED
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

INTERVENTIONAL CARDIOLOGY


TAUB, PAM

Provider ID: 277682

Board Certified Specialty: No
PAM R TAUB

 9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346355161

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 210604

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL


CARDIOLOGY

TAUB, PAM

Provider ID: 277681

Board Certified Specialty: No
PAM R TAUB

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346355161

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


ENCINITAS, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL

CARDIOLOGY

WETTERSTEN, NICHOLAS


Provider ID: 210604

Board Certified Specialty: No

NICHOLAS W WETTERSTEN

 9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

 Phone: (858) 657-8530

Fax: (858) 657-8814

 After Hours Phone: (858)
657-8530

Provider Gender: Male

NPI: 1063701068

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL

MEDICINE


BALLAS, JERASIMOS


Provider ID: 209561

Board Certified Specialty: No

JERASIMOS BALLAS

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871767384

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

EISENHOWER MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL

MEDICINE


EMERUWA, UKACHI

Provider ID: 300009

Board Certified Specialty: No

UKACHI N EMERUWA

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1245627421

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

MATERNAL AND FETAL

MEDICINE

D3. Directorio de proveedores especialistas

HULL, ANDREW

Provider ID: 209482

Board Certified Specialty: No
ANDREW D HULL

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-8745

After Hours Phone: (858)
657-8745

Provider Gender: Male

NPI: 1902862121

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

PALOMAR MEDICAL CENTER,

SCRIPPS MEMORIAL

HOSPITAL, UCSD LA JOLLA

JOHN SALLY THORNTON,

UCSD LA JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL

MEDICINE

LAURENT, LOUISE

Provider ID: 208639

Board Certified Specialty: No
LOUISE C LAURENT

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770532707

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

PALOMAR MEDICAL CENTER,

SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL

MEDICINE

MELBER, DORA

Provider ID: 240599

Board Certified Specialty: No
DORA J MELBER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1124413026

Provider English Spoken: Y
Provider Language(s)

Spoken: Hungarian, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL

MEDICINE

MOORE, THOMAS

Provider ID: 208642

Board Certified Specialty: No
THOMAS R MOORE

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-8745

After Hours Phone: (858)
657-8745

Provider Gender: Male

NPI: 1184682379

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N









Accessibility: CONTACT
PROVIDER

D3. Directorio de proveedores especialistas

 Hours: M-F
8:00AM-5:00PM
 Website: N/A








MATERNAL AND FETAL MEDICINE

WOELKERS, DOUGLAS

Provider ID: 209383
Board Certified Specialty: No
DOUGLAS A WOELKERS
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 657-7200
 After Hours Phone: (858)
657-7200
Provider Gender: Male
NPI: 1013965748
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, PALOMAR
MEDICAL CENTER, UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A








MATERNAL AND FETAL MEDICINE

WOLF, RICHARD

Provider ID: 209252
Board Certified Specialty: No
RICHARD B WOLF
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1497713846
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, PALOMAR
MEDICAL CENTER, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

BAI-TONG, SHIYU

Provider ID: 283287
Board Certified Specialty: No
SHIYU S BAI-TONG
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 249-5800
 After Hours Phone: (858)
249-5800
Provider Gender: Female
NPI: 1528454188
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

DELROSARIO, PAMELA

Provider ID: 295001
Board Certified Specialty: No
PAMELA G DELROSARIO
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 249-5800
Fax: (858) 249-5839
 After Hours Phone: (858)
249-5800
Provider Gender: Female
NPI: 1952691941
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD

D3. Directorio de proveedores especialistas

MEDICAL CTR, RADY


CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

HIETALATI, SAMANTHA

Provider ID: 294252

Board Certified Specialty: No
SAMANTHA M HIETALATI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 249-5800

Fax: (858) 249-5839

 After Hours Phone: (858)
249-5800

Provider Gender: Female

NPI: 1245617489

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

MARC-AURELE, KRISHELLE


Provider ID: 206209

Board Certified Specialty: No
KRISHELLE L MARC-AURELE

 9888 GENESEE AVE
LA JOLLA, CA 92037

 Phone: (858) 626-4123

Fax: (760) 633-7998

 After Hours Phone: (858)
626-4123

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEONATAL / PERINATAL MEDICINE


MARC-AURELE, KRISHELLE

Provider ID: 206207

Board Certified Specialty: No
KRISHELLE L MARC-AURELE

 9300 CAMPUS POINT DR

LA JOLLA, CA 92037

 Phone: (858) 249-5800

Fax: (858) 249-5839

 After Hours Phone: (858)
249-5800

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEONATAL / PERINATAL MEDICINE


MATOBA, NANA

Provider ID: 297977

Board Certified Specialty: No
NANA MATOBA

 9300 CAMPUS POINT DR
STE 8

LA JOLLA, CA 92037

 Phone: (858) 657-7000


Fax: (858) 249-5839

 After Hours Phone: (858)
657-7000

Provider Gender: Female

NPI: 1801952197



D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Japanese*
Cultural Competency: N
*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Website: N/A*

NEONATAL / PERINATAL MEDICINE

MATOBA, NANA

Provider ID: 299893
Board Certified Specialty: No
NANA MATOBA
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (858) 249-5800*
Fax: (858) 249-5839
 *After Hours Phone: (858)
249-5800*
Provider Gender: Female
NPI: 1801952197
 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Japanese*
Cultural Competency: N
*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT*

PROVIDER
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*


NEONATAL / PERINATAL MEDICINE

MESTAN, KAREN

Provider ID: 285931
Board Certified Specialty: Yes
KAREN K MESTAN
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (858) 249-5800*
Fax: (858) 249-5839

 *After Hours Phone: (858)
249-5800*


Provider Gender: Female
NPI: 1942253356


 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT
PROVIDER*



 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*



NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301824
Board Certified Specialty: No
KATHERINE N NYMAN
 9888 GENESEE AVE

LA JOLLA, CA 92037
 *Phone: (858) 626-4123*
Fax: (760) 633-7998
 *After Hours Phone: (858)
626-4123*


Provider Gender: Female
NPI: 1003260951

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


NEONATAL / PERINATAL MEDICINE

RAMOS, CARLOS

Provider ID: 206062
Board Certified Specialty: No
CARLOS G RAMOS
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (858) 249-5800*
Fax: (619) 543-3812

 *After Hours Phone: (858)
249-5800*

Provider Gender: Male
NPI: 1205047545

 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: UCSD
MEDICAL CTR, EL CENTRO*

D3. Directorio de proveedores especialistas

REGIONAL MEDICAL CENTER,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

SAJTI, ENIKO

Provider ID: 206170

Board Certified Specialty: No
ENIKO C SAJTI


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 249-5800
Fax: (858) 249-5839

 After Hours Phone: (858)
249-5800

Provider Gender: Female

NPI: 1649433103


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES

Provider ID: 303907

Board Certified Specialty: No
CHARLES W SAUER

 9888 GENESEE AVE
LA JOLLA, CA 92037

 Phone: (858) 626-4123
Fax: (760) 633-7998

 After Hours Phone: (858)
626-4123

Provider Gender: Male

NPI: 1538388988


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE


SAUER, CHARLES

Provider ID: 303908

Board Certified Specialty: No
CHARLES W SAUER

 9300 CAMPUS POINT DR
FL 8

LA JOLLA, CA 92037
 Phone: (858) 249-5800

Fax: (858) 249-5839
 After Hours Phone: (858)

249-5800

Provider Gender: Male


NPI: 1538388988

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes

D3. Directorio de proveedores especialistas

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


NEUROLOGY

BEVINS, ELIZABETH

Provider ID: 277726

Board Certified Specialty: No
ELIZABETH A BEVINS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1013395151


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


COUGHLIN, DAVID


Provider ID: 240950

Board Certified Specialty: No
DAVID G COUGHLIN

 9300 CAMPUS POINT DR

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1740543784


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY


IRAGUIMADOZ, VICENTE

Provider ID: 246701

Board Certified Specialty: No
VICENTE J IRAGUIMADOZ

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-8540

 After Hours Phone: (858)
657-8540

Provider Gender: Male

NPI: 1053326710

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

NEUROLOGY


LEE, DAVID


Provider ID: 246264

Board Certified Specialty: No
DAVID J LEE

 9350 CAMPUS POINT DR
STE LLB



LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871884130

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Korean


Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


QAYOUMI, WALI

Provider ID: 284371

Board Certified Specialty: No
WALI Z QAYOUMI

 9350 CAMPUS POINT DR
STE LLB

LA JOLLA, CA 92037

 Phone: (619) 284-3746

D3. Directorio de proveedores especialistas

Fax: (888) 579-8781

☎ After Hours Phone: (619)
284-3746

Provider Gender: Male

NPI: 1093178220

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEUROLOGY

QAYOUMI, WALI

Provider ID: 284369

Board Certified Specialty: No

WALI Z QAYOUMI

📍 9500 GILMAN DR STE 2069
LA JOLLA, CA 92093

☎ Phone: (858) 822-5881

Fax: (888) 539-8781

☎ After Hours Phone: (858)
822-5881

Provider Gender: Male

NPI: 1093178220

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEUROLOGY

SCHULTE, JESSICA

Provider ID: 284819

Board Certified Specialty: No

JESSICA D SCHULTE

📍 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (858) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1467870576

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
MEDICAL CENTER AT MOUNT

ZION, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA

Provider ID: 273225

Board Certified Specialty: No

PRATIBHA S BINDER

📍 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174758031

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

DEL CORE, LAURA

Provider ID: 291323

Board Certified Specialty: No

LAURA M DEL CORE

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

D3. Directorio de proveedores especialistas

Provider Gender: Female
NPI: 1790128759
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291324
Board Certified Specialty: No
LAURA M DELCORE
📍 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1790128759
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291335
Board Certified Specialty: No
AMY M DRIEBE
📍 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1730507567
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291334
Board Certified Specialty: No
AMY M DRIEBE
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1730507567
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes

Min/Max Age: 16\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

GUPTA, PRATIMA

Provider ID: 257546
Board Certified Specialty: No
PRATIMA GUPTA
📍 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1891749842
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT

Provider ID: 278916
Board Certified Specialty: No

D3. Directorio de proveedores especialistas

SCOTT A HARVEY

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 923-8273

Fax: (888) 539-8781

After Hours Phone: (800)
923-8273

Provider Gender: Male

NPI: 1457662868

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT

Provider ID: 278918

Board Certified Specialty: No

SCOTT A HARVEY

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1457662868

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

HOANG, MAI

Provider ID: 208295

Board Certified Specialty: No

MAI P HOANG

8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104143593

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

HOM-TEDLA, MARIANNE

Provider ID: 242752

Board Certified Specialty: No

MARIANNE S HOM-TEDLA

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1972047397

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

KLEIN, DAVID

Provider ID: 271558

Board Certified Specialty: No

DAVID A KLEIN

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1780073635

Provider English Spoken: Y

D3. Directorio de proveedores especialistas

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM

 *Website: N/A*

OBSTETRICS / GYNECOLOGY

KLEIN, DAVID


Provider ID: 271559


Board Certified Specialty: No

DAVID A KLEIN

 *8910 VILLA LA JOLLA DR
STE 200*


LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1780073635

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None


American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM

 *Website: N/A*

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH


Provider ID: 286230

Board Certified Specialty: No

LEAH M LAMALE-SMITH

 *8910 VILLA LA JOLLA DR
STE 200*

LA JOLLA, CA 92037


 *Phone: (800) 926-8273*


Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1396904876

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL
CTR, EISENHOWER MEDICAL
CTR*

Medi-Cal Open Panel: Yes


Min/Max Age: 16\None

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM

 *Website: N/A*

OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN


Provider ID: 200964


Board Certified Specialty: No

GILLIAN MACKAY

 *8910 VILLA LA JOLLA DR
STE 200*

LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1770702177

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL
CTR*

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

9:00AM-5:00PM

 *Website: N/A*

OBSTETRICS / GYNECOLOGY


MACKAY, GILLIAN

Provider ID: 303062

Board Certified Specialty: No

GILLIAN MACKAY

 *9300 CAMPUS POINT DR
LA JOLLA, CA 92037*

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1770702177

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY*

THORNTON, UCSD MEDICAL

D3. Directorio de proveedores especialistas

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA

Provider ID: 285740

Board Certified Specialty: No
AUDRA R MEADOWS

 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1467585521

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA

Provider ID: 285739

Board Certified Specialty: No
AUDRA R MEADOWS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-8745
Fax: (888) 539-8781

 After Hours Phone: (858)
657-8745

Provider Gender: Female

NPI: 1467585521

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY


MELENDEZ, ARIANA

Provider ID: 299920

Board Certified Specialty: No
ARIANA L MELENDEZ

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295232973

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299976

Board Certified Specialty: No
CHARLOTTE M PICKETT

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1447530696

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299977

Board Certified Specialty: No
CHARLOTTE M PICKETT

 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)

D3. Directorio de proveedores especialistas

926-8273

Provider Gender: Female


NPI: 1447530696

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

RIVAS, RENEE

Provider ID: 284295

Board Certified Specialty: No
RENEE N RIVAS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295263861

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OBSTETRICS / GYNECOLOGY

RIVAS, RENEE

Provider ID: 284297

Board Certified Specialty: No
RENEE N RIVAS

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295263861

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY

RIVAS, RENEE

Provider ID: 284296

Board Certified Specialty: No
RENEE N RIVAS

 9333 GENESEE AVE STE
340
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1295263861

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

SUYAMA, JULIE

Provider ID: 284289

Board Certified Specialty: No
JULIE A SUYAMA

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1306372800

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

D3. Directorio de proveedores especialistas

Min/Max Age: 16\None

American Sign Language (ASL): Board Certified Specialty: No
N SAMANTHA L THOMSON

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA

Provider ID: 285173

Board Certified Specialty: No
SAMANTHA L THOMSON

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689013468


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: CEDARS
SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA

Provider ID: 285175

Board Certified Specialty: No
SAMANTHA L THOMSON

 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037
 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689013468

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: CEDARS
SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OCCUPATIONAL THERAPIST

AMARAL, MARGARET

Provider ID: 258303

Board Certified Specialty: No
MARGARET L AMARAL

 9350 CAMPUS POINT DR
STE LLD


LA JOLLA, CA 92037
 Phone: (858) 657-6879

Fax: (858) 657-6873

 After Hours Phone: (858)
657-6879

Provider Gender: Female

NPI: 1689874521


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OCCUPATIONAL THERAPIST

COLLINS, RESENIA

Provider ID: 258356

Board Certified Specialty: No
RESENIA V COLLINS

 9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037
 Phone: (858) 657-6879

Fax: (858) 657-6873

 After Hours Phone: (858)
657-6879

Provider Gender: Female

NPI: 1184936718


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OCCUPATIONAL THERAPIST

MUNCADA, CAESAR

Provider ID: 288724

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
CEASAR B MUNCADA

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790268100

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OCCUPATIONAL THERAPIST

SMITH, EMILY

Provider ID: 258537

Board Certified Specialty: No
EMILY A SMITH

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (855) 543-0333

Fax: (858) 657-6873

After Hours Phone: (855)
543-0333

Provider Gender: Female

NPI: 1417337403

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OCCUPATIONAL THERAPIST

SOROKIN, LISA

Provider ID: 258362

Board Certified Specialty: No
LISA F SOROKIN

9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

Phone: (858) 657-6879

Fax: (858) 657-6873

After Hours Phone: (858)
657-6879

Provider Gender: Female

NPI: 1336445063

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

BAXTER, SALLY

Provider ID: 272787

Board Certified Specialty: No
SALLY L BAXTER

9415 CAMPUS POINT DR

LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (888) 539-8781

After Hours Phone: (858)
534-6290

Provider Gender: Female

NPI: 1912325184

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
7:00AM-5:00PM
SA 7:45AM-2:00PM

Website: N/A

OPHTHALMOLOGY

BEAZER, ALEX

Provider ID: 272802

Board Certified Specialty: No
ALEX P BEAZER

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1942662168

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

D3. Directorio de proveedores especialistas

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY


MOVAGHAR, MANSOOR

Provider ID: 215055

Board Certified Specialty: No
MANSOOR MOVAGHAR

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497792220

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


PUIG LLANO, MANUEL

Provider ID: 299965

Board Certified Specialty: No

MANUEL PUIG LLANO

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1427102979

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, German,
Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL


CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OPHTHALMOLOGY

SATTERFIELD, KELLIE


Provider ID: 305303

Board Certified Specialty: No

KELLIE R SATTERFIELD

 9834 GENESEE AVE STE
200

LA JOLLA, CA 92037


 Phone: (858) 457-3050

Fax: (858) 457-0851

 After Hours Phone: (858)
457-3050

Provider Gender: Female

NPI: 1629509336

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


SCHONBACH, ETIENNE

Provider ID: 284432

Board Certified Specialty: No

ETIENNE M SCHONBACH

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1073040580

 Provider English Spoken: Y


 Provider Language(s)
Spoken: German


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 299937

Board Certified Specialty: No

CATHERINE R SHEILS

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932605649

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 305309

Board Certified Specialty: No

CATHERINE R SHEILS

9834 GENESEE AVE STE
200
LA JOLLA, CA 92037

Phone: (858) 457-3050

Fax: (858) 457-0851

After Hours Phone: (858)
457-3050

Provider Gender: Female

NPI: 1932605649

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 299935

Board Certified Specialty: No

CATHERINE R SHEILS

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932605649

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPHTHALMOLOGY

SONG, DELU

Provider ID: 284425

Board Certified Specialty: No

DELU SONG

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437689536

Provider English Spoken: Y

Provider Language(s)

Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

TOPILOW, NICOLE

Provider ID: 284348

Board Certified Specialty: No

NICOLE TOPILOW

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273


Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1215468376

D3. Directorio de proveedores especialistas

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM


 Website: N/A

OPTOMETRIST

AOTO, KIM



Provider ID: 296798
Board Certified Specialty: No
KIM N AOTO

 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

 Phone: (800) 898-2020
Fax: (844) 897-3788

 After Hours Phone: (800)
898-2020


Provider Gender: Female
NPI: 1780935650


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 9:00AM-5:00PM
TU 8:30AM-4:30PM
W 7:30AM-4:15PM


TH 9:30AM-5:00PM
F 8:30AM-4:00PM
 Website: N/A

OPTOMETRIST

HOO, PAMELA



Provider ID: 269621
Board Certified Specialty: No
PAMELA A HOO

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (858) 534-6290
Fax: (858) 822-4438

 After Hours Phone: (858)
534-6290

Provider Gender: Female
NPI: 1275566010


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

OPTOMETRIST

JOMOC, CAITLIN


Provider ID: 299914
Board Certified Specialty: No
CAITLIN JOMOC

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1861164642

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


 Website: N/A

OPTOMETRIST

JOMOC, CAITLIN


Provider ID: 299915
Board Certified Specialty: No
CAITLIN JOMOC

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1861164642

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OPTOMETRIST

KIM, PHILIP

Provider ID: 287909
Board Certified Specialty: No

D3. Directorio de proveedores especialistas

PHILIP KIM

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

Provider Gender: Male

NPI: 1376929034

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

MCCLEAN, ESMERALDA

Provider ID: 269907

Board Certified Specialty: No

ESMERALDA C MCCLEAN

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 534-8293

After Hours Phone: (858)
534-6290

Provider Gender: Female

NPI: 1962817981

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

VO, ANDREW

Provider ID: 304148

Board Certified Specialty: No

ANDREW M VO

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790291565

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

VO, ANDREW

Provider ID: 201311

Board Certified Specialty: No

ANDREW M VO

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290

After Hours Phone: (858)
534-6290

Provider Gender: Male

NPI: 1790291565

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

YU, CAROL

Provider ID: 301682

Board Certified Specialty: No

CAROL Y YU

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639697451

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N



Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

D3. Directorio de proveedores especialistas


 Accessibility: CONTACT PROVIDER
 Website: N/A

OPTOMETRIST

YU, CAROL



Provider ID: 258078
Board Certified Specialty: No
CAROL Y YU

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1639697451

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

OPTOMETRIST

YU, CAROL



Provider ID: 301681
Board Certified Specialty: No
CAROL Y YU

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1639697451

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A

OTOLARYNGOLOGY

BRUMUND, KEVIN


Provider ID: 299637
Board Certified Specialty: No
KEVIN T BRUMUND

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1033193669

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


 Website: N/A

OTOLARYNGOLOGY

BRUMUND, KEVIN


Provider ID: 299633
Board Certified Specialty: No
KEVIN T BRUMUND

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1033193669

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


 Website: N/A

OTOLARYNGOLOGY

BRUMUND, KEVIN


Provider ID: 299636
Board Certified Specialty: No
KEVIN T BRUMUND

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1033193669


 Provider English Spoken: Y
Cultural Competency: N

D3. Directorio de proveedores especialistas

*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299459

*Board Certified Specialty: No
JOSEPH A CALIFANO III*

 *9400 CAMPUS POINT DR
LA JOLLA, CA 92093*

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male


NPI: 1881652972

 *Provider English Spoken: Y
Cultural Competency: N*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*


OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299460

*Board Certified Specialty: No
JOSEPH A CALIFANO III*

 *9350 CAMPUS POINT DR
LA JOLLA, CA 92037*

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1881652972

 *Provider English Spoken: Y
Cultural Competency: N*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*

OTOLARYNGOLOGY


CALIFANO, JOSEPH

Provider ID: 299458

*Board Certified Specialty: No
JOSEPH A CALIFANO III*

 *3855 HEALTH SCIENCES
DR*

LA JOLLA, CA 92093

 *Phone: (858) 822-6197*

Fax: (858) 822-6198

 *After Hours Phone: (858)
822-6197*

Provider Gender: Male

NPI: 1881652972


 *Provider English Spoken: Y
Cultural Competency: N*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*


OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299463

*Board Certified Specialty: No
JOSEPH A CALIFANO III*

 *9300 CAMPUS POINT DR
LA JOLLA, CA 92037*

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1881652972

 *Provider English Spoken: Y
Cultural Competency: N*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*


OTOLARYNGOLOGY

COFFEY, CHARLES

Provider ID: 299585

*Board Certified Specialty: No
CHARLES S COFFEY*

 *9300 CAMPUS POINT DR
LA JOLLA, CA 92037*

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1932297330

 *Provider English Spoken: Y
Cultural Competency: N*

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


COFFEY, CHARLES

Provider ID: 299584

Board Certified Specialty: No
CHARLES S COFFEY

 3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1932297330

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


COFFEY, CHARLES

Provider ID: 299581

Board Certified Specialty: No
CHARLES S COFFEY

 9350 CAMPUS POINT DR

LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1932297330

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


COFFEY, CHARLES

Provider ID: 299580

Board Certified Specialty: No
CHARLES S COFFEY

 9400 CAMPUS POINT DR

LA JOLLA, CA 92093


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1932297330

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


DECONDE, ADAM

Provider ID: 299570

Board Certified Specialty: No
ADAM S DECONDE

 9300 CAMPUS POINT DR

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1588988919

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


DECONDE, ADAM


Provider ID: 299565

Board Certified Specialty: No
ADAM S DECONDE

 9350 CAMPUS POINT DR

LA JOLLA, CA 92037


 Phone: (858) 657-8590

 After Hours Phone: (858) 657-8590


Provider Gender: Male

NPI: 1588988919

D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER


 *Hours: M-F*
8:00AM-5:00PM


 *Website: N/A*


OTOLARYNGOLOGY

DECONDE, ADAM

Provider ID: 299564
Board Certified Specialty: No
ADAM S DECONDE


 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

 *Phone: (858) 657-8590*

 *After Hours Phone: (858)*
657-8590

Provider Gender: Male


NPI: 1588988919


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM


 *Website: N/A*

OTOLARYNGOLOGY

DECONDE, ADAM

Provider ID: 299566
Board Certified Specialty: No
ADAM S DECONDE

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093


 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)*
926-8273

Provider Gender: Male

NPI: 1588988919

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER


 *Website: N/A*

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299533
Board Certified Specialty: No
RICK A FRIEDMAN

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093



 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)*
926-8273

Provider Gender: Male

NPI: 1982708558

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: PIH
HEALTH GOOD SAMARITAN
HOSPITAL, CHILDRENS HOSP
OF LOS ANGELES, SOUTH
COAST GLOBAL MEDICAL
CENTER INC, ANAHEIM
GLOBAL MEDICAL CENTER,
ORANGE COUNTY GLOBAL
MEDICAL CENTER INC,
CHAPMAN GLOBAL MEDICAL
CENTER INC, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER


 *Website: N/A*

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299534
Board Certified Specialty: No
RICK A FRIEDMAN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037



 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)*
926-8273

Provider Gender: Male

NPI: 1982708558

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: PIH

D3. Directorio de proveedores especialistas


HEALTH GOOD SAMARITAN HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTH COAST GLOBAL MEDICAL CENTER INC, ANAHEIM GLOBAL MEDICAL CENTER, ORANGE COUNTY GLOBAL MEDICAL CENTER INC, CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


FRIEDMAN, RICK

Provider ID: 299529

Board Certified Specialty: No

RICK A FRIEDMAN

 9350 CAMPUS POINT DR LA JOLLA, CA 92037


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982708558

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN

HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTH COAST GLOBAL MEDICAL CENTER INC, ANAHEIM GLOBAL MEDICAL CENTER, ORANGE COUNTY GLOBAL MEDICAL CENTER INC, CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


FRIEDMAN, RICK

Provider ID: 299528

Board Certified Specialty: No

RICK A FRIEDMAN

 9400 CAMPUS POINT DR LA JOLLA, CA 92093


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982708558

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN HOSPITAL, CHILDRENS HOSP

OF LOS ANGELES, SOUTH COAST GLOBAL MEDICAL CENTER INC, ANAHEIM GLOBAL MEDICAL CENTER, ORANGE COUNTY GLOBAL MEDICAL CENTER INC, CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


GILANI, SAPIDEH

Provider ID: 299563

Board Certified Specialty: No

SAPIDEH GILANI

 9300 CAMPUS POINT DR LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1003825571

 Provider English Spoken: Y Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

D3. Directorio de proveedores especialistas

American Sign Language (ASL): Fax: (888) 539-8781

N

 Accessibility: CONTACT PROVIDER


 Website: N/A


OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299562

Board Certified Specialty: No
SAPIDEH GILANI

 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1003825571

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299557

Board Certified Specialty: Yes
SAPIDEH GILANI

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1003825571

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299558

Board Certified Specialty: No
SAPIDEH GILANI

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1003825571

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER


 Website: N/A

OTOLARYNGOLOGY


GREENE, JACQUELINE

Provider ID: 298398

Board Certified Specialty: No
JACQUELINE J GREENE

 3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female


NPI: 1144583931

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


GREENE, JACQUELINE

Provider ID: 272958

Board Certified Specialty: No
JACQUELINE J GREENE

 9300 CAMPUS POINT DR
STE LLA

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female


NPI: 1144583931


 Provider English Spoken: Y


D3. Directorio de proveedores especialistas

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY

GREENE, JACQUELINE

Provider ID: 298395

Board Certified Specialty: No
JACQUELINE J GREENE

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1144583931

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OTOLARYNGOLOGY

GREENE, JACQUELINE

Provider ID: 298394

Board Certified Specialty: No
JACQUELINE J GREENE

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1144583931


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OTOLARYNGOLOGY

HARRIS, JEFFREY

Provider ID: 299578

Board Certified Specialty: No
JEFFREY P HARRIS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1417988783

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OTOLARYNGOLOGY

HARRIS, JEFFREY

Provider ID: 299574

Board Certified Specialty: No
JEFFREY P HARRIS

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1417988783

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OTOLARYNGOLOGY

HARRIS, JEFFREY

Provider ID: 299573

Board Certified Specialty: No
JEFFREY P HARRIS

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781



 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1417988783


 Provider English Spoken: Y

D3. Directorio de proveedores especialistas

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OTOLARYNGOLOGY




HARRIS, JEFFREY

Provider ID: 299577
Board Certified Specialty: No
JEFFREY P HARRIS
 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1417988783

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OTOLARYNGOLOGY




HOM, DAVID


Provider ID: 299513
Board Certified Specialty: No
DAVID B HOM
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1659305027

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OTOLARYNGOLOGY

HOM, DAVID




Provider ID: 299517
Board Certified Specialty: No
DAVID B HOM
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1659305027




 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299512
Board Certified Specialty: No
DAVID B HOM
 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1659305027

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299516

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
DAVID B HOM

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1659305027

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

HUSSEMAN, JACOB

Provider ID: 301051

Board Certified Specialty: No
JACOB W HUSSEMAN

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124034053

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299447

Board Certified Specialty: No
ELINA KARI

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780860536

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS

ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD

LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299444

Board Certified Specialty: No
ELINA KARI

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780860536

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS

ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD

LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY


KARI, ELINA

Provider ID: 299442

Board Certified Specialty: No
ELINA KARI





9350 CAMPUS POINT DR



D3. Directorio de proveedores especialistas

LA JOLLA, CA 92037
 Phone: (858) 857-8590
 After Hours Phone: (858) 857-8590
Provider Gender: Female
NPI: 1780860536
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY





KARI, ELINA

Provider ID: 299448
Board Certified Specialty: No
ELINA KARI
 9300 CAMPUS POINT DR LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1780860536
 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY







KARI, ELINA

Provider ID: 294828
Board Certified Specialty: No
ELINA KARI
 9350 CAMPUS POINT DR LA JOLLA, CA 92037
 Phone: (858) 857-8590
 After Hours Phone: (858) 857-8590
Provider Gender: Female
NPI: 1780860536
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299484
Board Certified Specialty: No
ANTHONY E MAGIT
 9300 CAMPUS POINT DR LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1891858379
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY


Provider ID: 299479
Board Certified Specialty: No
ANTHONY E MAGIT
 9350 CAMPUS POINT DR LA JOLLA, CA 92037

D3. Directorio de proveedores especialistas

 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1891858379

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299483

Board Certified Specialty: No
ANTHONY E MAGIT


 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1891858379

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299478

Board Certified Specialty: No
ANTHONY E MAGIT


 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


Provider Gender: Male

NPI: 1891858379

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299594

Board Certified Specialty: No
AKIHIRO MATSUOKA

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1669630653

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299588

Board Certified Specialty: No
AKIHIRO MATSUOKA


 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800)
926-8273


Provider Gender: Male

NPI: 1669630653

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299589

Board Certified Specialty: No
AKIHIRO MATSUOKA

D3. Directorio de proveedores especialistas

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669630653

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299593

Board Certified Specialty: No
AKIHIRO MATSUOKA

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669630653

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

NGUYEN, QUYEN

Provider ID: 299609

Board Certified Specialty: No
QUYEN T NGUYEN

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477524452

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

NGUYEN, QUYEN

Provider ID: 299608

Board Certified Specialty: No
QUYEN T NGUYEN

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477524452

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

NGUYEN, QUYEN

Provider ID: 299605

Board Certified Specialty: No
QUYEN T NGUYEN

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477524452

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

D3. Directorio de proveedores especialistas

 Website: N/A

OTOLARYNGOLOGY


NGUYEN, QUYEN


Provider ID: 299604

Board Certified Specialty: No

QUYEN T NGUYEN


 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-8590

 After Hours Phone: (858)
657-8590

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW


Provider ID: 299505

Board Certified Specialty: No

ANDREW M

VAHABZADEH-HAGH

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346506920

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD

REAGAN UCLA MED CTR,

SANTA MONICA UCLA MED

CTR, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

 Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW


Provider ID: 299510

Board Certified Specialty: No

ANDREW M

VAHABZADEH-HAGH

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346506920

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD

REAGAN UCLA MED CTR,

SANTA MONICA UCLA MED

CTR, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

 Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW


Provider ID: 299506

Board Certified Specialty: No

ANDREW M

VAHABZADEH-HAGH

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346506920

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD

REAGAN UCLA MED CTR,

SANTA MONICA UCLA MED

CTR, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

 Website: N/A

D3. Directorio de proveedores especialistas

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299504

Board Certified Specialty: No
ANDREW M

VAHABZADEH-HAGH

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (858) 822-6197

After Hours Phone: (858)
822-6197

Provider Gender: Male

NPI: 1346506920

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD

REAGAN UCLA MED CTR,

SANTA MONICA UCLA MED

CTR, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299638

Board Certified Specialty: No
DEBORAH WATSON

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-8590

Fax: (858) 657-8682

After Hours Phone: (858)
657-8590

Provider Gender: Female

NPI: 1346270816

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299643

Board Certified Specialty: No
DEBORAH WATSON

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346270816

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299644

Board Certified Specialty: No
DEBORAH WATSON

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346270816

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299640

Board Certified Specialty: Yes
DEBORAH WATSON

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female




NPI: 1346270816





D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OTOLARYNGOLOGY




WEISSBROD, PHILIP

Provider ID: 299612
Board Certified Specialty: No
PHILIP A WEISSBROD
 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
 *Phone: (858) 657-8590*
 *After Hours Phone: (858) 657-8590*
Provider Gender: Male
NPI: 1366590853

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

OTOLARYNGOLOGY

WEISSBROD, PHILIP


Provider ID: 299613
Board Certified Specialty: No
PHILIP A WEISSBROD
 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1366590853

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*




OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299611
Board Certified Specialty: No
PHILIP A WEISSBROD
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (858) 657-8590*
 *After Hours Phone: (858) 657-8590*
Provider Gender: Male
NPI: 1366590853




 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299616
Board Certified Specialty: No
PHILIP A WEISSBROD
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1366590853

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298415
Board Certified Specialty: No

D3. Directorio de proveedores especialistas

CAROL H YAN

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1619237260

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298411

Board Certified Specialty: No
CAROL H YAN

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1619237260

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298416

Board Certified Specialty: No
CAROL H YAN

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1619237260

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 242138

Board Certified Specialty: No
CAROL H YAN

9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037

Phone: (858) 657-8590

After Hours Phone: (858)
657-8590

Provider Gender: Female

NPI: 1619237260

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC CLINICAL

D3. Directorio de proveedores especialistas

AISAGBONHI, OMONIGHO

Provider ID: 275750

Board Certified Specialty: No
OMONIGHO A AISAGBONHI

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1043571045

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,

SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

AISAGBONHI, OMONIGHO

Provider ID: 201304

Board Certified Specialty: No
OMONIGHO A AISAGBONHI

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1043571045

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,

SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

ALLEN, ELIZABETH

Provider ID: 275757

Board Certified Specialty: No
ELIZABETH S ALLEN

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174814065

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

UCSD MEDICAL CTR, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,

SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

BROOME, HELEN

Provider ID: 275722

Board Certified Specialty: No
HELEN E BROOME

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

D3. Directorio de proveedores especialistas

Provider Gender: Female
NPI: 1184674145
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PATHOLOGY ANATOMIC CLINICAL

BUI, JACK

Provider ID: 275746
Board Certified Specialty: No
JACK D BUI

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1942529821

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PATHOLOGY ANATOMIC CLINICAL

DON, MICHELLE

Provider ID: 275816
Board Certified Specialty: No
MICHELLE D DON

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1205288396

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PATHOLOGY ANATOMIC CLINICAL

DON, MICHELLE

Provider ID: 247149

Board Certified Specialty: No
MICHELLE D DON

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 249-4410
After Hours Phone: (858)
249-4410

Provider Gender: Female
NPI: 1205288396

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
Website: N/A

PATHOLOGY ANATOMIC CLINICAL

ELKIND, JAE

Provider ID: 284903
Board Certified Specialty: No
JAE B ELKIND

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1922497700

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA

D3. Directorio de proveedores especialistas

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PATHOLOGY ANATOMIC


CLINICAL


HU, JINGJING

Provider ID: 243965

Board Certified Specialty: No
JINGJING HU


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1538574744

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD LA


JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PATHOLOGY ANATOMIC


CLINICAL


HU, JINGJING

Provider ID: 243966

Board Certified Specialty: No
JINGJING HU


 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1538574744

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PATHOLOGY ANATOMIC


CLINICAL

ROMA, ANDRES

Provider ID: 275827

Board Certified Specialty: No
ANDRES A ROMA

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1295912657

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PATHOLOGY ANATOMIC


CLINICAL

SHABAIK, AHMED

Provider ID: 275782

Board Certified Specialty: No
AHMED S SHABAIK

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1679521579

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 275814

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PATHOLOGY ANATOMIC

CLINICAL


VAVINSKAYA, VERA

Provider ID: 275840

Board Certified Specialty: No

VERA VAVINSKAYA

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174757181

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PATHOLOGY ANATOMIC

CLINICAL


ZARE, SOMAYE

Provider ID: 275814

Board Certified Specialty: No

SOMAYE Y ZARE

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1700334802

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PATHOLOGY ANATOMIC

CLINICAL


ZARE, SOMAYE

Provider ID: 203172

Board Certified Specialty: No

SOMAYE Y ZARE

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1700334802

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PATHOLOGY ANATOMIC

CLINICAL


ZHANG, HAIYAN

Provider ID: 203176

Board Certified Specialty: No

HAIYAN ZHANG

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1457617110

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,


SCRIPPS MEMORIAL


HOSPITAL, SCRIPPS MERCY


D3. Directorio de proveedores especialistas

HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS GREEN HOSPITAL,
SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PATHOLOGY ANATOMIC


CLINICAL

ZHANG, HAIYAN

Provider ID: 275841

Board Certified Specialty: No
HAIYAN ZHANG

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1457617110

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY


HOSPITAL CHULA VISTA,


SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS GREEN HOSPITAL,
SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

AINSWORTH, DELISSA


Provider ID: 243366

Board Certified Specialty: No
DELISSA M AINSWORTH

 8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1750734893

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

UCSD MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


ALBRIGHT, KELSEY

Provider ID: 284764

Board Certified Specialty: No
KELSEY A ALBRIGHT

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1235653148

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

ALLERS, JENNA

Provider ID: 301037

Board Certified Specialty: No
JENNA C ALLERS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

D3. Directorio de proveedores especialistas

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1730605486

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SALINAS VALLEY MEMORIAL HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

PHYSICIANS ASSISTANT

ARMEEN, GARY

Provider ID: 247036

Board Certified Specialty: No
GARY P ARMEEN JR

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1760774863

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

BOYD, LISA

Provider ID: 217650

Board Certified Specialty: No
LISA N BOYD

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1871859421

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

BRUECKNER, TAMMIE

Provider ID: 255557

Board Certified Specialty: No
TAMMIE N BRUECKNER

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1407212376

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

CHERRY, REENA

Provider ID: 269494

Board Certified Specialty: No
REENA W CHERRY

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1689729683

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER




D3. Directorio de proveedores especialistas

 Hours: M-F
8:00AM-5:00PM
 Website: N/A


PHYSICIANS ASSISTANT

CHERRY, REENA

Provider ID: 243349
Board Certified Specialty: No
REENA W CHERRY


 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1689729683

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


COOKISH, DAVID

Provider ID: 286591
Board Certified Specialty: No
DAVID ANDREW COOKISH

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1215338884

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


CRIFE, TAYLOR

Provider ID: 210983
Board Certified Specialty: No
TAYLOR M CRIFE

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1659827087

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

DEMASCO, MICHAEL

Provider ID: 278969
Board Certified Specialty: No
MICHAEL A DEMASCO


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1467926295

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PHYSICIANS ASSISTANT

DEMOOR, PATRICIA

Provider ID: 212879
Board Certified Specialty: No
PATRICIA A DEMOOR

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1477721702

D3. Directorio de proveedores especialistas

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

HASEGAWA, CHRIS

Provider ID: 247205
Board Certified Specialty: No
CHRIS HASEGAWA

8939 VILLA LA JOLLA DR
STE 110
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1225698962

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

HIGGINS, JOSHUA

Provider ID: 287135
Board Certified Specialty: No
JOSHUA B HIGGINS

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1861624181

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

HIGGINS, JOSHUA

Provider ID: 287136
Board Certified Specialty: No
JOSHUA B HIGGINS

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1861624181

Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298429
Board Certified Specialty: No
JACOB A HUNTER

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1114459765

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298431
Board Certified Specialty: No

D3. Directorio de proveedores especialistas

JACOB A HUNTER

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1114459765

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 287450

Board Certified Specialty: No

JACOB A HUNTER

9350 CAMPUS POINT DR
STE LLA

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1114459765

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298432

Board Certified Specialty: No

JACOB A HUNTER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1114459765

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 279334

Board Certified Specialty: No

JACOB A HUNTER

8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

Phone: (800) 826-8273

Fax: (888) 539-8781

After Hours Phone: (800)
826-8273

Provider Gender: Male

NPI: 1114459765

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

LIN, JOYCE

Provider ID: 265146

Board Certified Specialty: No

LIN, JOYCE

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 888-9268

Fax: (888) 539-8781

After Hours Phone: (800)
888-9268

Provider Gender: Female

NPI: 1427681022

Provider English Spoken: Y

Provider Language(s)
Spoken: Taiwanese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

D3. Directorio de proveedores especialistas

LIN, JOYCE

Provider ID: 265147

Board Certified Specialty: No

LIN, JOYCE

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093

Phone: (858) 554-1212

After Hours Phone: (858) 554-1212

Provider Gender: Female

NPI: 1427681022

Provider English Spoken: Y

Provider Language(s)
Spoken: Taiwanese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

LUONG, TRAN

Provider ID: 279015

Board Certified Specialty: No

TRAN H LUONG

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1821532292

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

LUONG, TRAN

Provider ID: 279014

Board Certified Specialty: No

TRAN H LUONG

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1821532292

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

MARTIN, HALEY

Provider ID: 305027

Board Certified Specialty: No

HALEY R MARTIN

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1093440836

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

MARTIN, HALEY

Provider ID: 305024

Board Certified Specialty: No

HALEY R MARTIN

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1093440836

Provider English Spoken: Y



Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N




D3. Directorio de proveedores especialistas

 Accessibility: CONTACT PROVIDER
 Website: N/A


PHYSICIANS ASSISTANT



MARTIN, HALEY

Provider ID: 305025
Board Certified Specialty: No
HALEY R MARTIN

 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1093440836

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Website: N/A



PHYSICIANS ASSISTANT

MCADAMS, JOSEPH




Provider ID: 280612
Board Certified Specialty: No
JOSEPH MCADAMS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1104371251

 Provider English Spoken: Y
 Provider Language(s)



Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


PHYSICIANS ASSISTANT




MERRILL, COREY

Provider ID: 258039
Board Certified Specialty: No
COREY M MERRILL

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1386032308

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT



OKADA, MICHELLE

Provider ID: 278016




Board Certified Specialty: No
MICHELLE R OKADA

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1497129860

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Japanese
Cultural Competency: N




Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

OKADA, MICHELLE





Provider ID: 278017
Board Certified Specialty: No
MICHELLE R OKADA

 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1497129860

 Provider English Spoken: Y




D3. Directorio de proveedores especialistas


 *Provider Language(s)*
Spoken: Japanese
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*



PHYSICIANS ASSISTANT

PELIO, DARREN

Provider ID: 293440
Board Certified Specialty: No
DARREN A PELIO

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
 *Phone: (858) 822-7967*
Fax: (858) 822-6395
 *After Hours Phone: (858)*
822-7967

Provider Gender: Male
NPI: 1386791028
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N



 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*



PHYSICIANS ASSISTANT

PELIO, DARREN

Provider ID: 293442
Board Certified Specialty: No
DARREN A PELIO

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 *Phone: (800) 926-8276*
Fax: (888) 539-8784

 *After Hours Phone: (800)*
926-8276
Provider Gender: Male
NPI: 1386791028
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*



PHYSICIANS ASSISTANT


PERREAULT, MARK

Provider ID: 283583
Board Certified Specialty: No
MARK R PERREAULT

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)*
926-8273

Provider Gender: Male
NPI: 1356749451
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*


8:00AM-5:00PM
 *Website: N/A*

PHYSICIANS ASSISTANT



PERREAULT, MARK

Provider ID: 283584
Board Certified Specialty: No
MARK R PERREAULT

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)*
926-8273

Provider Gender: Male
NPI: 1356749451
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER



 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

PHYSICIANS ASSISTANT




ROBERTS, AUDREY

Provider ID: 253254
Board Certified Specialty: No
AUDREY ELIZABETH
ZANZUCCHI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (619) 543-5540*
 *After Hours Phone: (619)*
543-5540

Provider Gender: Female
NPI: 1265960256
 *Provider English Spoken: Y*
 *Provider Language(s)*

D3. Directorio de proveedores especialistas






Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

PHYSICIANS ASSISTANT

ROBERTS, AUDREY

Provider ID: 253255
Board Certified Specialty: No
AUDREY ELIZABETH
ZANZUCCHI

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 *Phone: (858) 657-7876*
 *After Hours Phone: (858)*
657-7876
Provider Gender: Female
NPI: 1265960256



 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

PHYSICIANS ASSISTANT

SAIKHON, TALIA

Provider ID: 293439

Board Certified Specialty: No
TALIA N SAIKHON
 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273
Provider Gender: Female
NPI: 1699263905
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*




PHYSICIANS ASSISTANT

SANCHEZ, MICHAEL

Provider ID: 206907
Board Certified Specialty: No
MICHAEL R SANCHEZ

 8939 VILLA LA JOLLA DR
STE 110
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)*
926-8273
Provider Gender: Male
NPI: 1184135006

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS




MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

PHYSICIANS ASSISTANT

SCHWARTZEL, KEVIN

Provider ID: 214276
Board Certified Specialty: No
KEVIN N SCHWARTZEL

 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273

Provider Gender: Male
NPI: 1104277847
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: SU 8:00AM-8:00PM*
M-F 8:00AM-5:00PM
SA 8:00AM-8:00PM
 *Website: N/A*

PHYSICIANS ASSISTANT

SHAUL, SHERA

D3. Directorio de proveedores especialistas

Provider ID: 247975

Board Certified Specialty: No
SHERA M SHAUL

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1336659507

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SHAUL, SHERA

Provider ID: 247976

Board Certified Specialty: No
SHERA M SHAUL

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8373

After Hours Phone: (800)
926-8373

Provider Gender: Female

NPI: 1336659507

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SPEH, BRIAN

Provider ID: 305010

Board Certified Specialty: No
BRIAN A SPEH

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124593926

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

TESFAI, HELEN

Provider ID: 277072

Board Certified Specialty: No
HELEN S TESFAI

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1942724042

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299602

Board Certified Specialty: No
TAMARA A WAHLIN

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083823322

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299596

Board Certified Specialty: No
TAMARA A WAHLIN

9400 CAMPUS POINT DR

D3. Directorio de proveedores especialistas

LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1083823322
🗒 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299601
Board Certified Specialty: No
TAMARA A WAHLIN
📍 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1083823322
🗒 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

PHYSICIANS ASSISTANT

WEIR, JACQUELINE
Provider ID: 278202
Board Certified Specialty: No
JACQUELINE R WEIR
📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (800) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932494499
🗒 Provider English Spoken: Y
🗒 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PSYCHOLOGIST

BAILIS, JESSICA

Provider ID: 300043
Board Certified Specialty: No
JESSICA R BAILIS
📍 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1760739049

🗒 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

PSYCHOLOGIST

BOOTH, CHRISTOPHER



Provider ID: 209117
Board Certified Specialty: No
CHRISTOPHER R BOOTH
📍 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1568893162
🗒 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PSYCHOLOGIST

BOOTH, CHRISTOPHER

Provider ID: 209118
Board Certified Specialty: No
CHRISTOPHER R BOOTH
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

D3. Directorio de proveedores especialistas

 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1568893162


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

BOUTELLE, KERRI

Provider ID: 302876

Board Certified Specialty: No
KERRI N BOUTELLE

 3344 N TORREY PINES CT
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1780620906

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER
 Website: N/A

PSYCHOLOGIST


BOUTELLE, KERRI


Provider ID: 240034

Board Certified Specialty: No
KERRI N BOUTELLE

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1780620906

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST


BOUTELLE, KERRI

Provider ID: 258988

Board Certified Specialty: No
KERRI N BOUTELLE

 8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037

 Phone: (858) 246-1654

 After Hours Phone: (858)

246-1654

Provider Gender: Male

NPI: 1780620906

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

CHESHER, NICHOLAS

Provider ID: 273812

Board Certified Specialty: No
NICHOLAS J CHESHER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1124539697

 Provider English Spoken: Y
Cultural Competency: N




Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N



D3. Directorio de proveedores especialistas

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

PSYCHOLOGIST

CRANDAL, BRENT


Provider ID: 291463
Board Certified Specialty: No
BRENT R CRANDAL



 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
 *Phone: (800) 926-8372*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8372*

Provider Gender: Male

NPI: 1588739452

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*


PSYCHOLOGIST

DUARTE, KRISTEN




Provider ID: 255480
Board Certified Specialty: No
KRISTEN L DUARTE

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*

Provider Gender: Female
NPI: 1093119364

 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*


Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*


PSYCHOLOGIST

DUARTE, KRISTEN

Provider ID: 255479
Board Certified Specialty: No
KRISTEN L DUARTE



 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*

Provider Gender: Female
NPI: 1093119364

 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
*American Sign Language (ASL):
N*



 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

PSYCHOLOGIST

EICHEN, DAWN


Provider ID: 259524
Board Certified Specialty: No
DAWN M EICHEN

 8950 VILLA LA JOLLA DR
STE C212
LA JOLLA, CA 92037
 *Phone: (858) 246-1654*
Fax: (858) 246-3181




 *After Hours Phone: (858)
246-1654*

Provider Gender: Female

NPI: 1861043366

 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

PSYCHOLOGIST

EICHEN, DAWN

Provider ID: 245715
Board Certified Specialty: No
DAWN M EICHEN

 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037



D3. Directorio de proveedores especialistas

 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1861043366
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST








EICHEN, DAWN

Provider ID: 302888
Board Certified Specialty: No
DAWN M EICHEN
 3344 N TORREY PINES CT
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1861043366
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PSYCHOLOGIST



LASSWELL, EVE

Provider ID: 208260
Board Certified Specialty: No
EVE N LASSWELL
 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1013483635
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST





LINKE, SARAH

Provider ID: 273640
Board Certified Specialty: No
SARAH E LINKE
 8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1487026415
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST


MAGINOT-CHESSER, TAMARA


Provider ID: 273224
Board Certified Specialty: No
TAMARA R MAGINOT
CHESSER
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 534-7792
Fax: (619) 471-9017
 After Hours Phone: (858) 534-7792
Provider Gender: Female
NPI: 1043441165
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes

D3. Directorio de proveedores especialistas

Min/Max Age: 0\None

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

MENDEZ, ANDRES

Provider ID: 279058

Board Certified Specialty: No
ANDRES G MENDEZ


 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1841482692

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST


PELHAM, WILLIAM

Provider ID: 307681

Board Certified Specialty: No
WILLIAM E PELHAM


 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037
 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1306629399

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST


REED, KRISTIE

Provider ID: 302867

Board Certified Specialty: No
KRISTIE L REED


 3344 N TORREY PINES CT
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1679869556

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST

REED, KRISTIE

Provider ID: 291395

Board Certified Specialty: No
KRISTIE L REED

 8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037
 Phone: (800) 926-8372

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

Provider Gender: Female

NPI: 1679869556


 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST

TARLE, STEPHANIE


Provider ID: 303116

Board Certified Specialty: No
STEPHANIE J TARLE

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037
 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1659920403

 Provider English Spoken: Y

Cultural Competency: N

D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PSYCHOLOGIST


ZLATAR, ZVINKA

Provider ID: 272712

Board Certified Specialty: No

ZVINKA Z ZLATAR

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1497139059

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PULMONARY DISEASES

BAILEY, JACOB

Provider ID: 299925

Board Certified Specialty: No

JACOB A BAILEY

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1598150039

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PULMONARY DISEASES


JOSHUA, JISHA


Provider ID: 238060

Board Certified Specialty: No

JISHA K JOSHUA


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1023436417

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Malayalam

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PULMONARY DISEASES


MCGUIRE, WILLIAM

Provider ID: 299987

Board Certified Specialty: No

WILLIAM C MCGUIRE

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1841684081

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SHARP


MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PULMONARY DISEASES

PEARCE, ALEX

Provider ID: 300054

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

ALEX K PEARCE

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265896856

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

BERMAN, ZACHARY

Provider ID: 269319

Board Certified Specialty: No
ZACHARY T BERMAN

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033521190

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

BRANCH, CODY

Provider ID: 283676

Board Certified Specialty: No
CODY BRANCH

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1851770622

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

CARSWELL, AIMEE

Provider ID: 303056

Board Certified Specialty: No
AIMEE P CARSWELL

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 554-1212

Fax: (858) 795-1195

After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1619156635

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 283227

Board Certified Specialty: No
KAREN Y CHENG

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427430511

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC

FAZELI, SOUDABEH

Provider ID: 299993
Board Certified Specialty: No
SOUDABEH FAZELI

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639553613

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

FORCIER, NANCY

Provider ID: 286955

Board Certified Specialty: No
NANCY J FORCIER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1497721724

Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
Providence Mission Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

FOWLER, KATHRYN

Provider ID: 201290

Board Certified Specialty: No

KATHRYN J FOWLER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255457941

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,

SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

GRISSOM, MURRAY

Provider ID: 271568

Board Certified Specialty: No

MURRAY J GRISSOM

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1720465396

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

Stanford Health Care,

STANFORD HEALTH CARE

TRI-VALLEY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

HANNSUN, GEMMY

D3. Directorio de proveedores especialistas

Provider ID: 282790
Board Certified Specialty: No
GEMMY HANNSUN
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1992120026
🗣 Provider English Spoken: Y
🗣 Provider Language(s)
Spoken: Khmer, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

HORKY, LAURA

Provider ID: 241855
Board Certified Specialty: No
LAURA L HORKY
📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1598967812
🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

HORKY, LAURA

Provider ID: 241854
Board Certified Specialty: No
LAURA L HORKY
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1598967812
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

HORKY, LAURA

Provider ID: 241855
Board Certified Specialty: No
LAURA L HORKY
📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1598967812
🗣 Provider English Spoken: Y
Cultural Competency: N

JAFFRAY, PAUL

Provider ID: 299959
Board Certified Specialty: No
PAUL M JAFFRAY
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1275700999
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Los Angeles
General Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

RADIOLOGY DIAGNOSTIC


JAZBEH, SAMMER


Provider ID: 271128
Board Certified Specialty: No
SAMMER JAZBEH
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1770825457
🗣 Provider English Spoken: Y
🗣 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: UCSD


D3. Directorio de proveedores especialistas

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
PROVIDENCE LITTLE CO OF
MARY MED CTR TORRANCE,
PROVIDENCE LITTLE CO OF
MARY MED CTR SAN PEDRO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

KHURANA, AMAN

Provider ID: 307767

Board Certified Specialty: No
AMAN KHURANA

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1427496710


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER

Provider ID: 283144

Board Certified Specialty: No
DHIMITER KONDILI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699125450

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:


EISENHOWER MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

MARKS, ROBERT

Provider ID: 300066

Board Certified Specialty: No
ROBERT M MARKS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952389934

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ST MARY
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

RITCHIE, DAVID

Provider ID: 300033

Board Certified Specialty: No
DAVID J RITCHIE

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1407201916

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A



RADIOLOGY DIAGNOSTIC

SADAT, SAYED

Provider ID: 299967

Board Certified Specialty: No
SAYED W SADAT

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
 After Hours Phone: (800)

926-8273

Provider Gender: Male

D3. Directorio de proveedores especialistas

NPI: 1679000806

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC


SCHULTZ, HEATHER

Provider ID: 240343

Board Certified Specialty: No
HEATHER M SCHULTZ

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1871910810

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC


SEARLEMAN, ADAM

Provider ID: 299950

Board Certified Specialty: No

ADAM C SEARLEMAN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1134570641

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

SLATER, JERRY

Provider ID: 283311

Board Certified Specialty: No
JERRY SLATER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1851746382

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,


LOMA LINDA UNIVERSITY
MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

SPENGLER, NATHAN

Provider ID: 303050

Board Certified Specialty: No
NATHAN M SPENGLER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1992919666

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC

TADDONIO, MICHAEL

Provider ID: 240406

Board Certified Specialty: No
MICHAEL A TADDONIO

 9300 CAMPUS POINT DR

D3. Directorio de proveedores especialistas

LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1386987261
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC

TADROS, ANTHONY

Provider ID: 268545
Board Certified Specialty: No
ANTHONY S TADROS

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1306112057

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL

CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC

THOMPSON, COLE

Provider ID: 299990
Board Certified Specialty: No
COLE P THOMPSON

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1700315264

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC

UNSDORFER, KYLE

Provider ID: 300036
Board Certified Specialty: No
KYLE M UNSDORFER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1285165183
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC

VAHDAT, NOUSHIN

Provider ID: 300069
Board Certified Specialty: No
NOUSHIN VAHDAT

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1396700852

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC

YORK, VINCENT

Provider ID: 283518

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
VINCENT M YORK

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790146611

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

ZAPALA, MATTHEW

Provider ID: 307677

Board Certified Specialty: No
MATTHEW A ZAPALA

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346482809

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S

HOSPITAL OAKLAND, UCSF

MEDICAL CENTER, UCSF

Medical Center At Mission Bay,

UCSF MEDICAL CENTER AT

MOUNT ZION

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

BERGERON, PATRICK

Provider ID: 206533

Board Certified Specialty: No
PATRICK BERGERON

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285061390

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

BERGERON, PATRICK

Provider ID: 258296

Board Certified Specialty: No
PATRICK BERGERON

📍 9350 CAMPUS POINT DR

STE LLD

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285061390

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

BUNOSKY, ABIGAIL

Provider ID: 246021

Board Certified Specialty: No
ABIGAIL S BUNOSKY

📍 9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780018416

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL


THERAPIST


CHIEN, PEI

Provider ID: 214699

Board Certified Specialty: No
PEI S CHIEN

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891260238

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST


CHIEN, PEI

Provider ID: 258324

Board Certified Specialty: No
PEI S CHIEN

 9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891260238

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST


HOUSELY, ALEXIS

Provider ID: 299971

Board Certified Specialty: No

ALEXIS J HOUSELY

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689321416

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Website: N/A

REGISTERED PHYSICAL

THERAPIST


MAROLLA, ALICE

Provider ID: 241145

Board Certified Specialty: No
ALICE R MAROLLA

 9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477018729

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST



RUDD, CHRISTOPHER




Provider ID: 207559

Board Certified Specialty: No
CHRISTOPHER D RUDD

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

D3. Directorio de proveedores especialistas

 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1831539337
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

RUDD, CHRISTOPHER


Provider ID: 258372
Board Certified Specialty: No
CHRISTOPHER D RUDD




 9350 CAMPUS POINT DR STE LLD
LA JOLLA, CA 92037

 Phone: (855) 543-0333
Fax: (858) 657-6873

 After Hours Phone: (855) 543-0333

Provider Gender: Male
NPI: 1831539337

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL



CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST


SKINNER, NICOLE

Provider ID: 206546
Board Certified Specialty: No
NICOLE J SKINNER


 9350 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1386964997

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM


 Website: N/A

REGISTERED PHYSICAL THERAPIST

TRIMM, CASSIDY


Provider ID: 258443
Board Certified Specialty: No
CASSIDY M TRIMM

 9350 CAMPUS POINT DR STE LLD
LA JOLLA, CA 92037


 Phone: (855) 543-0333
Fax: (858) 657-6873


 After Hours Phone: (855) 543-0333

Provider Gender: Male
NPI: 1740708478

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM


 Website: N/A

REGISTERED PHYSICAL THERAPIST

TRIMM, CASSIDY

Provider ID: 258442
Board Certified Specialty: No
CASSIDY M TRIMM


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (855) 543-0333
Fax: (858) 657-6873

 After Hours Phone: (855) 543-0333

Provider Gender: Male
NPI: 1740708478

D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

REGISTERED PHYSICAL


THERAPIST

VASQUEZ, BENJAMIN


Provider ID: 258480

Board Certified Specialty: No
BENJAMIN P VASQUEZ

 9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

 *Phone: (858) 657-6879*

Fax: (858) 657-6873

 *After Hours Phone: (858)*
657-6879

Provider Gender: Male

NPI: 1568938413

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

REGISTERED PHYSICAL


THERAPIST


VASQUEZ, BENJAMIN

Provider ID: 200968

Board Certified Specialty: No
BENJAMIN P VASQUEZ

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)*
926-8273

Provider Gender: Male

NPI: 1568938413

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

REGISTERED PHYSICAL


THERAPIST

WILLIAMS, STACY

Provider ID: 258496

Board Certified Specialty: No
STACY M WILLIAMS

 9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

 *Phone: (858) 657-6879*

Fax: (858) 657-6873

 *After Hours Phone: (858)*
657-6879

Provider Gender: Female

NPI: 1689962169

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

REGISTERED PHYSICAL


THERAPIST

YU, AUDRINE


Provider ID: 258481

Board Certified Specialty: No
AUDRINE A YU

 9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

 *Phone: (858) 657-6879*

Fax: (858) 657-6873

 *After Hours Phone: (858)*
657-6879

Provider Gender: Female

NPI: 1639271208




 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

D3. Directorio de proveedores especialistas

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SPEECH PATHOLOGIST

SCHIEDERMAYER, BENJAMIN

Provider ID: 288938
Board Certified Specialty: No
BENJAMIN F

SCHIEDERMAYER

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1164979837


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM



 Website: N/A

SPEECH PATHOLOGIST

SCHIEDERMAYER, BENJAMIN

Provider ID: 288939
Board Certified Specialty: No
BENJAMIN F

SCHIEDERMAYER

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1164979837


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


SPEECH PATHOLOGIST

UNGER, LINDSEY

Provider ID: 265338
Board Certified Specialty: No
LINDSEY A UNGER



 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1972936813

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Sign Language

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

SURGERY COLON SURGERY

LIU, SHANGLEI

Provider ID: 273364
Board Certified Specialty: No
SHANGLEI LIU

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1043558653

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UNIVERSITY HSP
OF SAN DIEGO CO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY COLON SURGERY

LOPEZ, NICOLE

Provider ID: 286388
Board Certified Specialty: No
NICOLE E LOPEZ

 3855 HEALTH SCIENCES
DR

D3. Directorio de proveedores especialistas

LA JOLLA, CA 92093
Phone: (858) 822-6100
After Hours Phone: (858) 822-6100

Provider Gender: Female
NPI: 1518163005

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY COLON SURGERY **PARRY, LISA**

Provider ID: 278551
Board Certified Specialty: No
LISA A PARRY

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1235369067

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY COLON SURGERY **RAMAMOORTHY, SONIA**

Provider ID: 286371
Board Certified Specialty: No
SONIA L RAMAMOORTHY

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1801812656

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

AL-NOURI, OMAR

Provider ID: 211905
Board Certified Specialty: No
OMAR AL-NOURI

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1770742264

Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL **AL-NOURI, OMAR**

Provider ID: 211904
Board Certified Specialty: No
OMAR AL-NOURI

9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037
Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1770742264

Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

D3. Directorio de proveedores especialistas


CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


SURGERY GENERAL


ARMANI, AVA

Provider ID: 282142

Board Certified Specialty: No
AVA ARMANI

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

 Phone: (858) 822-6100

 After Hours Phone: (858)
822-6100

Provider Gender: Female

NPI: 1861759383

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
MEDICAL CENTER, UCSF


Medical Center At Mission Bay,
UCSF MEDICAL CENTER AT
MOUNT ZION, UCSD LA JOLLA


JOHN SALLY THORNTON,
UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


SURGERY GENERAL


CLARY, BRYAN

Provider ID: 202568

Board Certified Specialty: No
BRYAN M CLARY

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982787131

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL


HORGAN, SANTIAGO

Provider ID: 286380

Board Certified Specialty: No
SANTIAGO HORGAN


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (619) 471-0755

 After Hours Phone: (619)
471-0755

Provider Gender: Male

NPI: 1932297231

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL


JACOBSEN, GARTH

Provider ID: 201728

Board Certified Specialty: No
GARTH R JACOBSEN

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (619) 471-0755

 After Hours Phone: (619)
471-0755

Provider Gender: Male

NPI: 1265649966


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

D3. Directorio de proveedores especialistas

 Website: N/A


SURGERY GENERAL

SANTORELLI, JARRETT

Provider ID: 272304

Board Certified Specialty: No
JARRETT E SANTORELLI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033529201

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL


VASCULAR

BARLEBEN, ANDREW

Provider ID: 275373

Board Certified Specialty: No
ANDREW R BARLEBEN

 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497936900

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY GENERAL


VASCULAR


BARLEBEN, ANDREW

Provider ID: 275371

Board Certified Specialty: Yes
ANDREW R BARLEBEN

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497936900

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY GENERAL


VASCULAR

GAFFEY, ANN

Provider ID: 287012

Board Certified Specialty: No
ANN GAFFEY MD

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1316232010

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY GENERAL

VASCULAR

HOWE, STEVEN

Provider ID: 206760

Board Certified Specialty: No
STEVEN C HOWE

D3. Directorio de proveedores especialistas

9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
Phone: (858) 657-7777
Fax: (858) 657-5058
After Hours Phone: (858)
657-7777
Provider Gender: Male
NPI: 1497702740
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, TRI
CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY NEUROLOGICAL

BARBA, DAVID

Provider ID: 275678
Board Certified Specialty: No
DAVID BARBA

9350 CAMPUS POINT DR
STE 2A
LA JOLLA, CA 92037
Phone: (619) 543-5540
Fax: (619) 287-7663
After Hours Phone: (619)
543-5540
Provider Gender: Male
NPI: 1093730251
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY NEUROLOGICAL

BEAUMONT, THOMAS

Provider ID: 214126
Board Certified Specialty: No
THOMAS L BEAUMONT

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Phone: (858) 657-8540
After Hours Phone: (858)
657-8540
Provider Gender: Male
NPI: 1497067573
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY NEUROLOGICAL **BEN-HAIM, SHARONA**

Provider ID: 244070
Board Certified Specialty: No
SHARONA BEN-HAIM

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1942469663

Provider English Spoken: Y
Provider Language(s)
Spoken: Hebrew, Spanish

Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY NEUROLOGICAL

BLASKIEWICZ, DONALD

Provider ID: 270282
Board Certified Specialty: No
DONALD J BLASKIEWICZ

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273

D3. Directorio de proveedores especialistas

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1215176839

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY NEUROLOGICAL

MARSHALL, LAWRENCE

Provider ID: 244149

Board Certified Specialty: No
LAWRENCE F MARSHALL

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1750306171

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: German, Spanish
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY NEUROLOGICAL

MURTHY, NIKHIL

Provider ID: 299995

Board Certified Specialty: No
NIKHIL K MURTHY

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (619) 543-5540

Fax: (888) 539-8781

☎ After Hours Phone: (619) 543-5540

Provider Gender: Male

NPI: 1710371273

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

SURGERY NEUROLOGICAL

MURTHY, NIKHIL

Provider ID: 299994

Board Certified Specialty: No
NIKHIL K MURTHY

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1710371273

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

SURGERY NEUROLOGICAL

OSORIO, JOSEPH

Provider ID: 242006

Board Certified Specialty: No
JOSEPH A OSORIO

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1437416591

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY NEUROLOGICAL


OSORIO, JOSEPH


Provider ID: 242005

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
JOSEPH A OSORIO

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437416591

 *Provider English Spoken: Y*
Cultural Competency: N


*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY*


*THORNTON, UCSD MEDICAL
CTR*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


SURGERY NEUROLOGICAL


PHAM, MARTIN

Provider ID: 244159

Board Certified Specialty: No
MARTIN H PHAM

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1609130921

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY*

THORNTON, UCSD MEDICAL


CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


SURGERY NEUROLOGICAL


U, HOI

Provider ID: 244133

Board Certified Specialty: Yes
HOI S U

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1164468146

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY*


*THORNTON, UCSD MEDICAL
CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

SURGERY ORTHOPEDIC


ANDRY, JAMES

Provider ID: 302085


Board Certified Specialty: No
JAMES P ANDRY

 9834 GENESEE AVE STE
228

LA JOLLA, CA 92037

 Phone: (858) 455-9942

Fax: (858) 455-6473

 After Hours Phone: (858)
455-9942

Provider Gender: Male

NPI: 1679726103

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

*Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL*

*ENCINITAS, SCRIPPS MERCY
HOSPITAL, SHARP CHULA*

*VISTA MED CTR, SHARP
CORONADO HOSP AND*

*HEALTHCARE CTR, Sharp
Grossmont Hospital, SHARP*

*MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL, TRI*


CITY MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*

SURGERY ORTHOPEDIC


BUKATA, SUSAN

Provider ID: 277947

Board Certified Specialty: No
SUSAN V BUKATA

D3. Directorio de proveedores especialistas

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932140639


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC


CHIARAPPA, FRANK

Provider ID: 244460

Board Certified Specialty: No
FRANK E CHIARAPPA

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1932536828

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC

CHOI, JIHOON

Provider ID: 284786

Board Certified Specialty: No
JIHOON CHOI

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8181

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285097741

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC

CHOI, JIHOON

Provider ID: 284787

Board Certified Specialty: No
JIHOON CHOI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285097741

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


SURGERY ORTHOPEDIC


FLINT, JAMES

Provider ID: 203177

Board Certified Specialty: No
JAMES H FLINT

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1629239140

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


SURGERY ORTHOPEDIC

GOEB, YANNICK

Provider ID: 284793

*Board Certified Specialty: No
YANNICK L GOEB*

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1730542747

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: German, Spanish*

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


SURGERY ORTHOPEDIC

GOEB, YANNICK

Provider ID: 284792

*Board Certified Specialty: No
YANNICK L GOEB*

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093


 *Phone: (800) 926-8273*


Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1730542747

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: German, Spanish*

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

SURGERY ORTHOPEDIC

KUSNEZOV, NICHOLAS

Provider ID: 303194


Board Certified Specialty: No

NICHOLAS A KUSNEZOV

 9834 GENESEE AVE STE
228
LA JOLLA, CA 92037


 *Phone: (858) 455-9942*

Fax: (858) 455-6473

 *After Hours Phone: (858)
455-9942*

Provider Gender: Male

NPI: 1396185161

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: TWIN

CITIES COMMUNITY

HOSPITAL, TRI CITY MEDICAL

CTR, PARADISE VALLEY

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, Sharp

Grossmont Hospital, Sharp

Grossmont Hospital, SHARP

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

SURGERY ORTHOPEDIC

PALLIA, CHRISTOPHER


Provider ID: 302103

Board Certified Specialty: No


CHRISTOPHER S PALLIA

 9834 GENESEE AVE STE
228

LA JOLLA, CA 92037

 *Phone: (858) 455-9942*

Fax: (858) 455-6473

 *After Hours Phone: (858)
455-9942*

Provider Gender: Male

NPI: 1497751457

 *Provider English Spoken: Y*


Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

D3. Directorio de proveedores especialistas

MEMORIAL HOSPITAL, SHARP  Website: N/A

MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC


SULLIVAN, THOMAS

Provider ID: 285246

Board Certified Specialty: No

THOMAS B SULLIVAN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437565488

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

SURGERY ORTHOPEDIC


SULLIVAN, THOMAS

Provider ID: 285245

Board Certified Specialty: No

THOMAS B SULLIVAN

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437565488

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY PLASTIC


HINCHCLIFF, KATHARINE

Provider ID: 277289

Board Certified Specialty: No

KATHARINE M HINCHCLIFF

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1346674561

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY PLASTIC


REID, CHRISTOPHER


Provider ID: 224796

Board Certified Specialty: No

CHRISTOPHER M REID

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982964276

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

D3. Directorio de proveedores especialistas


 Hours: M-F
8:00AM-5:00PM
 Website: N/A


SURGERY THORACIC

BOYS, JOSHUA

Provider ID: 243533
Board Certified Specialty: No
JOSHUA A BOYS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-7777

 After Hours Phone: (858)
657-7777

Provider Gender: Male

NPI: 1114368990


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM


 Website: N/A

SURGERY THORACIC

KEARNS, MARK

Provider ID: 274297
Board Certified Specialty: No
MARK J KEARNS

 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037

 Phone: (858) 647-8817


Fax: (858) 853-9878

 After Hours Phone: (858)

647-8817

Provider Gender: Male

NPI: 1033683719

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: CEDARS


SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY THORACIC

KEARNS, MARK

Provider ID: 274296

Board Certified Specialty: No
MARK J KEARNS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-8817


Fax: (888) 539-8781

 After Hours Phone: (858)
657-8817

Provider Gender: Male

NPI: 1033683719

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: CEDARS

SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM


 Website: N/A

SURGERY THORACIC

POLLEMA, TRAVIS

Provider ID: 210576
Board Certified Specialty: No
TRAVIS L POLLEMA

 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871752956

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

SURGERY THORACIC

RAMIREZ, ALFREDO

Provider ID: 256390

Board Certified Specialty: No

ALFREDO R RAMIREZ

9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1003829417

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY HSP OF SAN
DIEGO CO, UCSD MEDICAL
CTR, UCSD LA JOLLA JOHN
SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY THORACIC

ZANDER, ASHLEY

Provider ID: 291383

Board Certified Specialty: No

ASHLEY L ZANDER

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780940031

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY THORACIC

ZANDER, ASHLEY

Provider ID: 291382

Board Certified Specialty: No

ASHLEY L ZANDER

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780940031

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY THORACIC

ZANDER, ASHLEY

Provider ID: 291381

Board Certified Specialty: No

ASHLEY L ZANDER

9300 CAMPUS POINT DR

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780940031

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

UROLOGY

CRAWFORD, ELWARD

Provider ID: 244131

Board Certified Specialty: No

ELWARD D CRAWFORD

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 657-7876

Fax: (888) 539-8781

After Hours Phone: (858)
657-7876

Provider Gender: Male

NPI: 1902814379

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

D3. Directorio de proveedores especialistas

UROLOGY

HSIEH, TUNG CHIN

Provider ID: 294878

Board Certified Specialty: No
TUNG CHIN HSIEH

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 249-3534

After Hours Phone: (858)
249-3534

Provider Gender: Male

NPI: 1073758652

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

UROLOGY

KATZ, JONATHAN

Provider ID: 299917

Board Certified Specialty: No
JONATHAN E KATZ

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952756207

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

UROLOGY

WANG, LUKE

Provider ID: 299934

Board Certified Specialty: No
LUKE L WANG

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033630173

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

LA MESA

CARDIOVASCULAR DISEASE

KOTHA, PURUSHOTHAM

Provider ID: 32053

Board Certified Specialty: Yes
PURUSHOTHAM KOTHA

8860 CENTER DR STE 400

LA MESA, CA 91942

Phone: (619) 229-1995

Fax: (619) 229-1109

After Hours Phone: (619)
229-1995

Provider Gender: Male

NPI: 1093730814

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish,
Telugu

Cultural Competency: N

Hospital Affiliation: ALVARADO
HOSPITAL LLC, GROSSMONT
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

CARDIOVASCULAR DISEASE

REDDY, REDDIWANDLA

Provider ID: 265393

Board Certified Specialty: No
REDDIWANDLA S REDDY

5565 GROSSMONT
CENTER DR STE 202
LA MESA, CA 91942

Phone: (619) 461-6130

Fax: (619) 461-3108

After Hours Phone: (619)
461-6130

Provider Gender: Male

NPI: 1710996384

Provider English Spoken: Y

Provider Language(s)
Spoken: Kannada, Spanish,

D3. Directorio de proveedores especialistas

Telugu

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A


CARDIOVASCULAR DISEASE

SHEREV, DIMITRI

Provider ID: 290704

Board Certified Specialty: No
DIMITRI A SHEREV

 8851 CENTER DR STE 304
LA MESA, CA 91942



 Phone: (619) 867-0557

Fax: (619) 867-0558

 After Hours Phone: (619)
867-0557

Provider Gender: Male

NPI: 1154323996

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Bulgarian, Russian,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL,
ALVARADO COMMUNITY
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
ALVARADO HOSPITAL LLC,

SHARP CHULA VISTA MED

CTR, SHARP CHULA VISTA
MED CTR, TRI CITY MEDICAL

CTR, SCRIPPS MERCY


HOSPITAL CHULA VISTA, Sharp
Grossmont Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

LANE, KIMBERLY

Provider ID: 295955

Board Certified Specialty: No
KIMBERLY A LANE

 8851 CENTER DR STE 501
LA MESA, CA 91942

 Phone: (619) 697-2456

Fax: (858) 429-7930

 After Hours Phone: (619)
697-2456

Provider Gender: Female

NPI: 1457670119


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


RESELLI, LYNDSEY

Provider ID: 217692

Board Certified Specialty: No
LYNDSEY RESELLI

 8881 FLETCHER PKWY STE
200
LA MESA, CA 91942

 Phone: (619) 464-6434

 After Hours Phone: (619)
464-6434

Provider Gender: Female

NPI: 1558854000


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE


PRACTITIONER


RESELLI, LYNDSEY

Provider ID: 217693

Board Certified Specialty: No
LYNDSEY RESELLI

 8881 FLETCHER PKWY STE
205
LA MESA, CA 91942

 Phone: (619) 464-6434

 After Hours Phone: (619)
464-6434

Provider Gender: Female

NPI: 1558854000


 Provider English Spoken: Y

D3. Directorio de proveedores especialistas

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

BELLOMO, THOMAS

Provider ID: 205600

Board Certified Specialty: No
THOMAS N BELLOMO

 5565 GROSSMONT
CENTER DR STE 2 STE 2
LA MESA, CA 91942

 Phone: (619) 713-5375

Fax: (619) 713-5379

 After Hours Phone: (619)
713-5375

Provider Gender: Male

NPI: 1700926698

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM
 Website: N/A


EMERGENCY MEDICINE

QUINONES-PEREZ, BIANCA

Provider ID: 206948

Board Certified Specialty: No
BIANCA N QUINONES-PEREZ

 5565 GROSSMONT
CENTER DR STE 2 STE 2
LA MESA, CA 91942

 Phone: (619) 713-5375

Fax: (619) 713-5379

 After Hours Phone: (619)
713-5375

Provider Gender: Female

NPI: 1124360565

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 Website: N/A

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE


Provider ID: 268693

Board Certified Specialty: No

ELAINE ANDERSON

 5565 GROSSMONT

CENTER DR
LA MESA, CA 91942


 Phone: (619) 589-5414

Fax: (619) 589-7391

 After Hours Phone: (619)
589-5414

Provider Gender: Female

NPI: 1063558856

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL CARDIOLOGY


TAGHIZADEH, BEHZAD

Provider ID: 269161


Board Certified Specialty: No

TAGHIZADEH, BEHZAD

 8851 CENTER DR STE 405
LA MESA, CA 91942


 Phone: (619) 582-2404

Fax: (619) 582-2915

 After Hours Phone: (619)
582-2404

Provider Gender: Male

NPI: 1275514986

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

INTERVENTIONAL


CARDIOLOGY

YELLEN, LAURENCE

Provider ID: 269173

*Board Certified Specialty: No
LAURENCE G YELLEN*

 *8851 CENTER DR STE 405
LA MESA, CA 91942*

 *Phone: (619) 582-2404
Fax: (619) 582-2915*

 *After Hours Phone: (619)
582-2404*

Provider Gender: Male

NPI: 1477680551

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Farsi, Spanish*

Cultural Competency: N

Hospital Affiliation:


*GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC,
USC Arcadia Hospital*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

MATERNAL AND FETAL


MEDICINE

ADAMI, REBECCA

Provider ID: 272676

*Board Certified Specialty: No
REBECCA R ADAMI*


 *5555 GROSSMONT
CENTER DR
LA MESA, CA 91942*

 *Phone: (858) 966-6710
Fax: (858) 966-6711*

 *After Hours Phone: (858)
966-6710*

Provider Gender: Female

NPI: 1992149447

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

MATERNAL AND FETAL


MEDICINE

MCCULLOUGH, DEIRDRE

Provider ID: 244873

*Board Certified Specialty: No
DEIRDRE M MCCULLOUGH*

 *5555 GROSSMONT
CENTER DR
LA MESA, CA 91942*

 *Phone: (858) 966-6710
Fax: (858) 966-6711*

 *After Hours Phone: (858)*

966-6710

*Provider Gender: Female
NPI: 1639153018*

 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
Sharp Grossmont Hospital,
SHARP MEMORIAL HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

MATERNAL AND FETAL


MEDICINE

MELBER, DORA

Provider ID: 296997

*Board Certified Specialty: No
DORA J MELBER*

 *8851 CENTER DR STE 201
LA MESA, CA 91942*


 *Phone: (858) 966-6710
Fax: (858) 966-6711*

 *After Hours Phone: (858)
966-6710*

Provider Gender: Female

NPI: 1124413026

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Hungarian, Spanish*

Cultural Competency: N

Hospital Affiliation: UCSD LA

D3. Directorio de proveedores especialistas

JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL


MEDICINE

REIMERS, REBECCA

Provider ID: 294654

Board Certified Specialty: No
REBECCA M REIMERS

 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL


MEDICINE

REIMERS, REBECCA

Provider ID: 294656

Board Certified Specialty: No
REBECCA M REIMERS

 8851 CENTER DR STE 201
LA MESA, CA 91942

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL


MEDICINE

RICHARDSON, ALVIE

Provider ID: 277317

Board Certified Specialty: No
ALVIE C RICHARDSON

 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1154305977

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, Sharp Grossmont
Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL


MEDICINE

SCHWENDEMANN, WADE

Provider ID: 277305

Board Certified Specialty: No
WADE D SCHWENDEMANN

 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1477563302

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY


D3. Directorio de proveedores especialistas


CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, Sharp Grossmont Hospital, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

WILLIAMS, KRISTIN

Provider ID: 277384

Board Certified Specialty: No
KRISTIN M WILLIAMS

 5555 GROSSMONT CENTER DR
LA MESA, CA 91942

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1992847131


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, SAN MATEO MEDICAL CTR,

SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, CALIFORNIA PACIFIC MED CTR, CALIFORNIA PACIFIC MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY

MOHAMMAD, AHMAD SHAH

Provider ID: 39868

Board Certified Specialty: No
AHMAD SHAH S MOHAMMAD

 8851 CENTER DR STE 307
LA MESA, CA 91942


 Phone: (619) 337-7900


Fax: (619) 337-7902

 After Hours Phone: (619) 337-7900

Provider Gender: Male

NPI: 1902973472

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Farsi,
French, German, Pashto,
Persian, Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


HAIGHT, BRUCE

Provider ID: 295984

Board Certified Specialty: No

BRUCE T HAIGHT

 5565 GROSSMONT CENTER DR STE 2-3
LA MESA, CA 91942

 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619) 465-2020

Provider Gender: Male

NPI: 1427029628

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:30AM-4:00PM
F 8:00AM-0:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

OPHTHALMOLOGY

HAIGHT, BRUCE

Provider ID: 305885

Board Certified Specialty: No

BRUCE T HAIGHT

5565 GROSSMONT
CENTER DR BLDG 3 STE
551

LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Provider Gender: Male

NPI: 1427029628

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM
TU-W 8:30AM-4:00PM
TH 8:00AM-4:00PM
F 8:00AM-0:00PM

Website: N/A

OPHTHALMOLOGY

HAIGHT, BRUCE

Provider ID: 269112

Board Certified Specialty: No

BRUCE T HAIGHT

5565 GROSSMONT
CENTER DR BLDG 3 STE
551

LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Provider Gender: Male

NPI: 1427029628

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM
TU-W 8:30AM-4:00PM
TH 8:00AM-4:00PM
F 8:00AM-0:00PM

Website: N/A

OPHTHALMOLOGY

HAIGHT, BRUCE

Provider ID: 288660

Board Certified Specialty: No

BRUCE T HAIGHT

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Provider Gender: Male

NPI: 1427029628

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

HUDSON, HENRY

Provider ID: 297578

Board Certified Specialty: No

HENRY L HUDSON

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Phone: (626) 412-4040

Fax: (760) 267-9160

After Hours Phone: (626)
412-4040

Provider Gender: Male

NPI: 1851349195

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, Sharp

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-4:30PM

Website: N/A

D3. Directorio de proveedores especialistas

OPHTHALMOLOGY

HUDSON, HENRY

Provider ID: 297577

Board Certified Specialty: Yes

HENRY L HUDSON

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Phone: (626) 206-0633

Fax: (760) 267-9160

After Hours Phone: (626)
206-0633

Provider Gender: Male

NPI: 1851349195

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, TRI

CITY MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, Sharp

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

HUDSON, HENRY

Provider ID: 306768

Board Certified Specialty: Yes

HENRY L HUDSON

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Phone: (626) 206-0633

Fax: (760) 267-9160

After Hours Phone: (626)
206-0633

Provider Gender: Male

NPI: 1851349195

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, TRI

CITY MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, Sharp

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 6\99

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

AOTO, KIM

Provider ID: 288652

Board Certified Specialty: No

KIM N AOTO

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)

722-8460

Provider Gender: Female

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

MOSHTAGHI, OMID

Provider ID: 302380

Board Certified Specialty: No

OMID MOSHTAGHI

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Phone: (619) 464-3353

Fax: (619) 464-6720

After Hours Phone: (619)
464-3353

Provider Gender: Male

NPI: 1730675927

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, Sharp

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER


D3. Directorio de proveedores especialistas


 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY

SAEZ, NEIL

Provider ID: 302431
Board Certified Specialty: No
NEIL A SAEZ


 5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942


 Phone: (619) 464-3353
Fax: (619) 464-6720

 After Hours Phone: (619)
464-3353

Provider Gender: Male

NPI: 1518456508

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

GROSS, MATTHEW

Provider ID: 297177
Board Certified Specialty: No

MATTHEW F GROSS

 5565 GROSSMONT
CENTER DR STE 2 STE 2
LA MESA, CA 91942

 Phone: (619) 713-5375

Fax: (619) 713-5379

 After Hours Phone: (619)
713-5375

Provider Gender: Male

NPI: 1942223664

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM


 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

PARKER, SHERINE

Provider ID: 205786
Board Certified Specialty: No
SHERINE B PARKER

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942


 Phone: (619) 713-5375


Fax: (619) 713-5379

 After Hours Phone: (619)
713-5375

Provider Gender: Female

NPI: 1477626513

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: GLENDALE
ADVENTIST MED CTR,
GLENDALE MEMORIAL HOSP
AND HEALTH CTR, TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

VARGAS, JACLYN

Provider ID: 285936
Board Certified Specialty: No
JACLYN F VARGAS

 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1619359718


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, Los Angeles General

D3. Directorio de proveedores especialistas

Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRICS

CLAY, CORRIE

Provider ID: 278807

Board Certified Specialty: No
CORRIE T CLAY

 8881 FLETCHER PKWY STE 200
LA MESA, CA 91942

 Phone: (619) 464-6434

Fax: (619) 464-5109

 After Hours Phone: (619)
464-6434

Provider Gender: Female

NPI: 1437207750

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT


HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS

Medi-Cal Open Panel: Yes


Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-6:00PM

SA 11:30AM-3:30PM

 Website: N/A


PHYSICIANS ASSISTANT

FERRARA, SAMANTHA

Provider ID: 306005

Board Certified Specialty: No
SAMANTHA L FERRARA

 7339 EL CAJON BLVD STE 1
LA MESA, CA 91942

 Phone: (619) 698-0606

Fax: (619) 698-0609

 After Hours Phone: (619)
698-0606

Provider Gender: Female

NPI: 1437822434


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:30PM


 Website: N/A


PHYSICIANS ASSISTANT

HINKLE, CORINNE

Provider ID: 305425

Board Certified Specialty: No
CORINNE C HINKLE

 7339 EL CAJON BLVD STE 1
LA MESA, CA 91942

 Phone: (619) 698-0606

Fax: (619) 698-0609

 After Hours Phone: (619)
698-0606

Provider Gender: Female

NPI: 1508451949

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: Valleywise


Health Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

RAYMOND, ALAIN

Provider ID: 269057

Board Certified Specialty: No
ALAIN L RAYMOND

 8851 CENTER DR STE 505
LA MESA, CA 91942

 Phone: (619) 461-3880


Fax: (619) 461-3895

 After Hours Phone: (619)
461-3880

Provider Gender: Male

NPI: 1164729125

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Haitian
Creole


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

D3. Directorio de proveedores especialistas

PHYSICIANS ASSISTANT

WHITE, KYLE

Provider ID: 302382

Board Certified Specialty: No

KYLE WHITE

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Phone: (619) 464-3353

Fax: (619) 464-7509

After Hours Phone: (619)
464-3353

Provider Gender: Male

NPI: 1922768860

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PODIATRIST

CAINE, SAMUEL

Provider ID: 308638

Board Certified Specialty: No

SAMUEL CAINE

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Phone: (619) 303-7130

Fax: (619) 303-7150

After Hours Phone: (619)
303-7130

Provider Gender: Male

NPI: 1396230298

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, SHARP MEMORIAL

HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PODIATRIST

CAINE, SAMUEL

Provider ID: 308213

Board Certified Specialty: No

SAMUEL CAINE

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Phone: (619) 303-7130

Fax: (619) 303-7150

After Hours Phone: (619)
303-7130

Provider Gender: Male

NPI: 1396230298

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, SHARP MEMORIAL

HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIATION ONCOLOGY

CARMONA, RUBEN

Provider ID: 303099

Board Certified Specialty: No

RUBEN CARMONA

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Phone: (619) 740-4500

Fax: (619) 740-8499

After Hours Phone: (619)
740-4500

Provider Gender: Male

NPI: 1275929242

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp

Grossmont Hospital, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIATION ONCOLOGY

COLEMAN, LORI

Provider ID: 221089
Board Certified Specialty: No
LORI A COLEMAN

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Phone: (619) 740-4500
Fax: (619) 740-8499

After Hours Phone: (619)
740-4500

Provider Gender: Female
NPI: 1053348920

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
PALOMAR MEDICAL CENTER,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIATION ONCOLOGY

VOLPP, PAUL

Provider ID: 221104

Board Certified Specialty: No
PAUL B VOLPP

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Phone: (619) 740-4500
Fax: (619) 740-8499

After Hours Phone: (619)
740-4500

Provider Gender: Male

NPI: 1225186232

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,
GROSSMONT HOSPITAL,
PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RHEUMATOLOGY

KOTHA, ROSHAN

Provider ID: 63454

Board Certified Specialty: No
ROSHAN KOTHA

8860 CENTER DR STE 400
LA MESA, CA 91942

Phone: (619) 229-1995
Fax: (619) 229-1109

After Hours Phone: (619)
229-1995

Provider Gender: Female

NPI: 1417117839

Provider English Spoken: Y
Provider Language(s)
Spoken: Hindi, Spanish,
Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

BALLARD, BROOKE

Provider ID: 262205

Board Certified Specialty: No

BROOKE L BALLARD

8860 CENTER DR STE 350
LA MESA, CA 91942

Phone: (619) 286-9480
Fax: (619) 286-4568

After Hours Phone: (619)
286-9480

Provider Gender: Female

NPI: 1841447950

Provider English Spoken: Y
Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: ALVARADO
HOSPITAL LLC, SHARP

CORONADO HOSP AND
HEALTHCARE CTR, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

D3. Directorio de proveedores especialistas

American Sign Language (ASL): 8:00AM-5:00PM

N  Website: N/A

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

Email:
tracy@alvaradoortho.com

LAKE ELSINORE


OBSTETRICS / GYNECOLOGY


FRANCIS, LARRY

Provider ID: 290293

Board Certified Specialty: No
LARRY N FRANCIS


 30195 FRASER DR
LAKE ELSINORE, CA 92530

 Phone: (951) 252-2720
Fax: (760) 414-3892

 After Hours Phone: (951)
252-2720

Provider Gender: Male

NPI: 1215008552

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:


SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SHARP MEMORIAL HOSPITAL,
POMONA VALLEY HOSP MED
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F


OPTOMETRIST

GEE, JENNIFER

Provider ID: 290211

Board Certified Specialty: No
JENNIFER W GEE

 30195 FRASER DR
LAKE ELSINORE, CA 92530

 Phone: (951) 252-2720

Fax: (760) 414-3892

 After Hours Phone: (951)
252-2720

Provider Gender: Female

NPI: 1336589332

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:


COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC
MEDICAL CENTER - D P A P H

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Website: N/A


OPTOMETRIST

MORA, WENDY

Provider ID: 290239

Board Certified Specialty: No
WENDY A MORA

 30195 FRASER DR
LAKE ELSINORE, CA 92530

 Phone: (951) 252-2720

Fax: (760) 414-3892

 After Hours Phone: (951)

252-2720

Provider Gender: Female

NPI: 1376958389

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OPTOMETRIST

TAM, EMILY

Provider ID: 290319

Board Certified Specialty: No
EMILY TAM

 30195 FRASER DR
LAKE ELSINORE, CA 92530

 Phone: (951) 252-2720


Fax: (760) 414-3892

 After Hours Phone: (951)
252-2720

Provider Gender: Female

NPI: 1497161236

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin,
Yue Chinese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

LAKESIDE

D3. Directorio de proveedores especialistas

CHIROPRACTOR

HOURIHAN, KEITH

Provider ID: 257549

Board Certified Specialty: No

KEITH M HOURIHAN

10039 VINE ST
LAKESIDE, CA 92040

Phone: (619) 390-9975

Fax: (858) 633-4690

After Hours Phone: (619)
390-9975

Provider Gender: Male

NPI: 1306916994

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CHIROPRACTOR

MCCOWN, BARRY

Provider ID: 301344

Board Certified Specialty: No

BARRY J MCCOWN

10039 VINE ST
LAKESIDE, CA 92040

Phone: (619) 390-9975

Fax: (360) 462-2744

After Hours Phone: (619)
390-9975

Provider Gender: Male

NPI: 1487781035

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CHIROPRACTOR

MCCOWN, BARRY

Provider ID: 303816

Board Certified Specialty: No

BARRY J MCCOWN

10039 VINE ST
LAKESIDE, CA 92040

Phone: (619) 390-9975

Fax: (360) 462-2744

After Hours Phone: (619)
390-9975

Provider Gender: Male

NPI: 1487781035

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

GUNPAT, JOSHUA

Provider ID: 308229

Board Certified Specialty: No

JOSHUA V GUNPAT

10039 VINE ST
LAKESIDE, CA 92040

Phone: (619) 390-9975

Fax: (360) 462-2744

After Hours Phone: (619)
390-9975

Provider Gender: Male

NPI: 1114458775

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

BRUNETTO, HEIDI

Provider ID: 290407

Board Certified Specialty: No

HEIDI M BRUNETTO

10039 VINE ST
LAKESIDE, CA 92040

Phone: (619) 390-9975

Fax: (360) 462-2744

After Hours Phone: (619)
390-9975

Provider Gender: Female

NPI: 1023250453

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH

D3. Directorio de proveedores especialistas

8:00AM-5:00PM
Website: N/A

MENIFEE

CERTIFIED NURSE PRACTITIONER

VAHDAT, VALERIE

Provider ID: 306581

Board Certified Specialty: No
VALERIE K VAHDAT

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586

Phone: (951) 216-2200

Fax: (858) 633-4699

After Hours Phone: (951)
216-2200

Provider Gender: Female

NPI: 1093474090

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SMITH, KELLI

Provider ID: 272954

Board Certified Specialty: No
KELLI A SMITH

30420 HAUN RD
MENIFEE, CA 92584

Phone: (951) 676-4193

After Hours Phone: (951)
676-4193

Provider Gender: Female
NPI: 1841771664

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MURRIETA

ANESTHESIOLOGY

HYLTON, DIANA

Provider ID: 241738

Board Certified Specialty: No
DIANA J HYLTON

25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932527751

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, SOUTHWEST

HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

KRAUSE, MARTIN

Provider ID: 287655

Board Certified Specialty: No
MARTIN KRAUSE

25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

Phone: (951) 696-6000

Fax: (951) 677-9757

After Hours Phone: (951)
696-6000

Provider Gender: Male

NPI: 1417243239

Provider English Spoken: Y

Provider Language(s)

Spoken: German

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HEAD, KRISTIN

D3. Directorio de proveedores especialistas

Provider ID: 268658

Board Certified Specialty: No

KRISTIN N HEAD

25170 HANCOCK AVE STE 1
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1699078923

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MIRACLE, ANGELYN

Provider ID: 300259

Board Certified Specialty: No

ANGELYN M MIRACLE

25170 HANCOCK AVE STE
200

MURRIETA, CA 92562

Phone: (951) 461-9300

Fax: (951) 461-9399

After Hours Phone: (951)
461-9300

Provider Gender: Female

NPI: 1144539842

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 8:30AM-0:00PM
M-F 8:00AM-5:00PM
SA 8:30AM-0:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

SNYDER, MICHELLE

Provider ID: 210676

Board Certified Specialty: No

MICHELLE V SNYDER

41011 CALIFORNIA OAKS
RD STE 104

MURRIETA, CA 92562

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1851561054

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

STEVENSON, REHEIA

Provider ID: 210794

Board Certified Specialty: No

REHEIA A STEVENSON

41011 CALIFORNIA OAKS
RD STE 104

MURRIETA, CA 92562

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346696044

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

SYED-UDDIN, SUMIYAH

Provider ID: 297771


Board Certified Specialty: No


SUMIYAH SYED-UDDIN


25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

D3. Directorio de proveedores especialistas


 Phone: (951) 696-6124


 Fax: (951) 696-6293

 After Hours Phone: (951) 696-6124

Provider Gender: Female

NPI: 1225606478

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Urdu

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

EMERGENCY MEDICINE

LI, JINGHONG


Provider ID: 255941


Board Certified Specialty: No

JINGHONG LI

 25500 MEDICAL CENTER
DR


MURRIETA, CA 92562

 Phone: (951) 696-6000

 After Hours Phone: (951) 696-6000

Provider Gender: Female

NPI: 1619014479

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL


CARDIOLOGY


AL KHIAMI, BELAL


Provider ID: 275994

Board Certified Specialty: No

BELAL O AL KHIAMI

 28062 BAXTER RD
MURRIETA, CA 92563


 Phone: (951) 290-4000

 Fax: (888) 539-8781

 After Hours Phone: (951) 290-4000

Provider Gender: Male

NPI: 1861623506

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, PIONEERS MEMORIAL

HOSPITAL, EL CENTRO

REGIONAL MEDICAL CENTER,

LOMA LINDA UNIVERSITY

MED CTR MURRIETA,

TEMECULA VALLEY HOSPITAL

INC


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL

CARDIOLOGY

WETTERSTEN, NICHOLAS


Provider ID: 210605


Board Certified Specialty: No

NICHOLAS W WETTERSTEN

 41011 CALIFORNIA OAKS
RD STE 104

MURRIETA, CA 92562

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1063701068

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL

MEDICINE

MELBER, DORA

Provider ID: 296988

Board Certified Specialty: No

DORA J MELBER

D3. Directorio de proveedores especialistas

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1124413026

Provider English Spoken: Y

Provider Language(s)
Spoken: Hungarian, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 296992

Board Certified Specialty: No
DORA J MELBER

25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1124413026

Provider English Spoken: Y N

Provider Language(s)
Spoken: Hungarian, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294649

Board Certified Specialty: No
REBECCA M REIMERS

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294652

Board Certified Specialty: No
REBECCA M REIMERS

25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301820

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

KATHERINE N NYMAN

25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

Phone: (951) 696-6000

Fax: (951) 696-6105

After Hours Phone: (951)
696-6000

Provider Gender: Female

NPI: 1003260951

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL MEDICINE

WEISS, KATHERINE

Provider ID: 264676

Board Certified Specialty: Yes

KATHERINE J WEISS

25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

Phone: (951) 696-6000

Fax: (951) 696-6105

After Hours Phone: (951)
696-6000

Provider Gender: Female

NPI: 1053541862

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

NEONATAL / PERINATAL MEDICINE

WEST, JULIE

Provider ID: 297071

Board Certified Specialty: No

JULIE E WEST

25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

Phone: (951) 696-6000

Fax: (951) 696-6105

After Hours Phone: (951)
696-6000

Provider Gender: Female

NPI: 1811151848

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

NEUROLOGY

GOLD, JEFFREY

Provider ID: 283334

Board Certified Specialty: No

JEFFREY J GOLD

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1568773984

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL

OAKLAND, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

JINDAL, ANUJA

Provider ID: 215521

Board Certified Specialty: No

ANUJA V JINDAL

25170 HANCOCK AVE

D3. Directorio de proveedores especialistas

MURRIETA, CA 92562
☎ Phone: (951) 600-1640
Fax: (951) 600-1760
🕒 After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1194046581
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

NEUROLOGY

SAHAGIAN, MICHELLE

Provider ID: 283166
Board Certified Specialty: No
MICHELLE L SAHAGIAN
📍 25170 HANCOCK AVE FL 1 MURRIETA, CA 92562
☎ Phone: (951) 600-1640
Fax: (951) 600-1760
🕒 After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1275604035
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

NEUROLOGY CHILD

GOLD, JEFFREY

Provider ID: 215691
Board Certified Specialty: No
JEFFREY J GOLD
📍 25170 HANCOCK AVE MURRIETA, CA 92562
☎ Phone: (951) 600-1640
🕒 After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1568773984
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

Provider ID: 215442
Board Certified Specialty: No
NATALIE M GUIDO-ESTRADA
📍 25170 HANCOCK AVE MURRIETA, CA 92562
☎ Phone: (951) 600-1640
Fax: (951) 600-1760
🕒 After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1528353521
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

NEUROLOGY CHILD

GUIDO-ESTRADA, NATALIE

Provider ID: 215666
Board Certified Specialty: No
OLIVIA S KIMMCMANUS
📍 25170 HANCOCK AVE MURRIETA, CA 92562
☎ Phone: (951) 600-1640
🕒 After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1174870067
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA

NEUROLOGY CHILD

KIMMCMANUS, OLIVIA

Provider ID: 215666
Board Certified Specialty: No
OLIVIA S KIMMCMANUS
📍 25170 HANCOCK AVE MURRIETA, CA 92562
☎ Phone: (951) 600-1640
🕒 After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1174870067
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA

D3. Directorio de proveedores especialistas

IRVINE MED CTR, CHILDRENS HOSPITAL OF ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

Website: N/A

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA

Provider ID: 273227

Board Certified Specialty: No
PRATIBHA S BINDER

25405 HANCOCK AVE STE 217
MURRIETA, CA 92562

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1174758031

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

BANSAL, PREETI

Provider ID: 215606

Board Certified Specialty: No

PREETI BANSAL

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951) 600-1640

Provider Gender: Female
NPI: 1871664631

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT
HOSPITAL, SHARP MARY

BIRCH HOSP FOR WOMEN
AND NEWBORNS, SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL

HOSPITAL, TRI CITY MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

BHATIA, SHAGUN

Provider ID: 267317

Board Certified Specialty: No
SHAGUN K BHATIA

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951) 600-1640

Provider Gender: Female

NPI: 1104237353

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

HENNEIN, LAUREN

Provider ID: 297010

Board Certified Specialty: No
LAUREN M HENNEIN

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951) 600-1640

Provider Gender: Female

NPI: 1699216010

Provider English Spoken: Y
Cultural Competency: N

D3. Directorio de proveedores especialistas

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY


MOLL, ANGELA

Provider ID: 215687

Board Certified Specialty: No
ANGELA M MOLL

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1861648602

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA



Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


OPHTHALMOLOGY


MOVAGHAR, MANSOOR

Provider ID: 216415

Board Certified Specialty: No
MANSOOR MOVAGHAR


 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 Phone: (858) 309-7702

 After Hours Phone: (858)
309-7702

Provider Gender: Male

NPI: 1497792220

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY


OHALLORAN, HENRY

Provider ID: 215685

Board Certified Specialty: No
HENRY S OHALLORAN

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1235287947

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY

BLISS, MORGAN

Provider ID: 215684

Board Certified Specialty: No
MORGAN R BLISS

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1760707657

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

D3. Directorio de proveedores especialistas

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY


CARVALHO, DANIELA

Provider ID: 215332

Board Certified Specialty: No
DANIELA CARVALHO


 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1154492916

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY


FRIESEN, TZYYNONG

Provider ID: 244898

TZYYNONG L FRIESEN


 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1400

 After Hours Phone: (951)
600-1400

Provider Gender: Female

NPI: 1952740177

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY


JIANG, WEN

Provider ID: 215564

Board Certified Specialty: No
WEN A JIANG


 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1659305753

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY


KARI, ELINA

Provider ID: 254089

Board Certified Specialty: No
ELINA KARI

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1780860536

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY

D3. Directorio de proveedores especialistas

KARI, ELINA

Provider ID: 254296

Board Certified Specialty: No

ELINA KARI

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1780860536

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

PATEL, VIJAY

Provider ID: 297034

Board Certified Specialty: No

VIJAY PATEL

25170 HANCOCK AVE STE 1
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)

600-1640

Provider Gender: Male

NPI: 1508250747

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY

COLLINS, CATHLEEN

Provider ID: 215733

Board Certified Specialty: No

CATHLEEN A COLLINS

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1205128089

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: LUCILE
SALTER PACKARD CHILDRENS
HOSP, Stanford Health Care,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

BORQUEZ, ALEJANDRO

Provider ID: 284119

Board Certified Specialty: Yes
ALEJANDRO A BORQUEZ

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1114277787

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A




PEDIATRIC CARDIOLOGY

DAVIS, CHRISTOPHER

Provider ID: 215743

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
CHRISTOPHER K DAVIS

 25170 HANCOCK AVE
MURRIETA, CA 92562
 Phone: (951) 600-1640
 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1760691950

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: RADY


**CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL**

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*

PEDIATRIC CARDIOLOGY

DUMMER, KIRSTEN

Provider ID: 215645

Board Certified Specialty: No
KRISTEN B DUMMER

 25170 HANCOCK AVE
MURRIETA, CA 92562
 Phone: (951) 600-1640
 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1780642280

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: RADY


**CHILDRENS HOSPITAL SAN
DIEGO**

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*




 *Website: N/A*

PEDIATRIC CARDIOLOGY

MCCANDLESS, RACHEL

Provider ID: 215601

Board Certified Specialty: No
RACHEL T MCCANDLESS

 25170 HANCOCK AVE
MURRIETA, CA 92562
 Phone: (951) 600-1640
 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1487821815

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: RADY

**CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF**

CHILDREN'S HOSPITAL


OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*




PEDIATRIC CARDIOLOGY

NARAYAN, HARI

Provider ID: 239114

Board Certified Specialty: No

HARI K NARAYAN

 25170 HANCOCK AVE
MURRIETA, CA 92562
 Phone: (951) 600-1640
 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1376705707

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: RADY


**CHILDRENS HOSPITAL SAN
DIEGO**

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*

PEDIATRIC CARDIOLOGY

SILVASEPULVEDA, JOSE

Provider ID: 215679

Board Certified Specialty: No
JOSE A SILVASEPULVEDA

 25170 HANCOCK AVE
MURRIETA, CA 92562
 Phone: (951) 600-1640
 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1417222472

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: RADY

D3. Directorio de proveedores especialistas


CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: Yes
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY


WILLIAMS, MATTHEW

Provider ID: 215678

Board Certified Specialty: No
MATTHEW R WILLIAMS

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1831423250

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSF BENIOFF CHILDREN'S
HOSPITAL OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE


DEVERA, GEMMIE


Provider ID: N/A

GEMMIE S DEVERA

 25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

 Phone: (951) 696-6124

 After Hours Phone: (951)
696-6124

Provider Gender: Female

NPI: 1366622078

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE


DO, STEPHANIE

Provider ID: 216969


Board Certified Specialty: No
STEPHANIE T DO

 25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

 Phone: (951) 696-6124

Fax: (951) 696-6293

 After Hours Phone: (951)
696-6124

Provider Gender: Female

NPI: 1750513644

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Martin
Luther King Jr Community
Hospital, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY


MEDICINE

GROSS, MATTHEW

Provider ID: 297173

Board Certified Specialty: No
MATTHEW F GROSS

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 Phone: (858) 966-7800

Fax: (858) 966-8231

 After Hours Phone: (858)
966-7800

Provider Gender: Male

NPI: 1942223664

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR



Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER



D3. Directorio de proveedores especialistas


 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**

INDRA, SEAN


Provider ID: 302626
Board Certified Specialty: No
SEAN W INDRA

 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
 Phone: (951) 696-6124
Fax: (951) 696-6293

 After Hours Phone: (951)
696-6124

Provider Gender: Male

NPI: 1427349091


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


 Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**

KINGDON, JOANNA

Provider ID: 302318
Board Certified Specialty: No
JOANNA E KINGDON



 25170 HANCOCK AVE STE

150
MURRIETA, CA 92562
 Phone: (858) 966-7800
Fax: (858) 966-8231

 After Hours Phone: (858)
966-7800

Provider Gender: Female

NPI: 1609495399

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER



 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM


 Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**

MESIWALA, ADNAN


Provider ID: 275655
Board Certified Specialty: No
ADNAN K MESIWALA


 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
 Phone: (951) 696-6161
Fax: (951) 696-6105

 After Hours Phone: (951)
696-6161

Provider Gender: Male

NPI: 1528483955

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Gujarati
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**

MILLS, DAVID

Provider ID: 302147
Board Certified Specialty: No
DAVID M MILLS


 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

 Phone: (951) 696-6124
Fax: (951) 696-6293

 After Hours Phone: (951)
696-6124

Provider Gender: Male

NPI: 1194145946

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT

D3. Directorio de proveedores especialistas


PROVIDER
 Website: N/A


PEDIATRIC EMERGENCY **MEDICINE**


OZCAN, ALI

Provider ID: 287924

Board Certified Specialty: No
ALI K OZCAN


 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562


 Phone: (951) 696-6124
Fax: (951) 696-6293

 After Hours Phone: (951)
696-6124

Provider Gender: Male

NPI: 1265867683

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Turkish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, LOMA LINDA


UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**


PARK, BRIAN

Provider ID: 302353


Board Certified Specialty: No
BRIAN L PARK

 25500 MEDICAL CENTER

DR
MURRIETA, CA 92562

 Phone: (951) 696-6124

Fax: (951) 696-6293

 After Hours Phone: (951)
696-6124

Provider Gender: Male

NPI: 1710418744

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**


RANASURIYA, DUNISHA


Provider ID: 216972

Board Certified Specialty: No
DUNISHA G RANASURIYA

 25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

 Phone: (951) 696-6161

 After Hours Phone: (951)
696-6161

Provider Gender: Female

NPI: 1740468057

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN


DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**


SCHROTER, STEPHANIE


Provider ID: 243831

Board Certified Specialty: No
STEPHANIE SCHROTER

 25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

 Phone: (951) 696-6124

 After Hours Phone: (951)
696-6124

Provider Gender: Female

NPI: 1073951828

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN


DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**


D3. Directorio de proveedores especialistas


SHETH, SARIKA

Provider ID: 248172


Board Certified Specialty: No

SARIKA K SHETH

 25500 MEDICAL CENTER DR
MURRIETA, CA 92562

 Phone: (951) 696-6124

Fax: (951) 696-6293

 After Hours Phone: (951) 696-6124

Provider Gender: Female

NPI: 1336503234

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE


SOUDER, CHRISTOPHER

Provider ID: 301634


Board Certified Specialty: Yes

CHRISTOPHER D SOUDER

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951) 600-1640

Provider Gender: Male

NPI: 1851540199

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S


HOSPITAL OAKLAND

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY


MEDICINE


TANG, ANDREW

Provider ID: 294678


Board Certified Specialty: No

ANDREW S TANG

 25500 MEDICAL CENTER DR
MURRIETA, CA 92562

 Phone: (951) 696-6124

Fax: (951) 696-6293

 After Hours Phone: (951) 696-6124

Provider Gender: Male

NPI: 1184071516

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY


MEDICINE


TRAN, THERESA

Provider ID: 301835

Board Certified Specialty: No

THERESA T TRAN

 25500 MEDICAL CENTER DR
MURRIETA, CA 92562

 Phone: (951) 696-6124


Fax: (951) 696-6293

 After Hours Phone: (951) 696-6124

Provider Gender: Female

NPI: 1417496985

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish,
Vietnamese


Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRIC ENDOCRINOLOGY


SINGH, PUJA

Provider ID: 302819

Board Certified Specialty: No

PUJA SINGH

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 Phone: (951) 600-1640


Fax: (951) 600-1760

D3. Directorio de proveedores especialistas

 After Hours Phone: (951) 600-1640

Provider Gender: Female

NPI: 1841721172

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PEDIATRIC

GASTROENTEROLOGY


CHU, CHRISTOPHER

Provider ID: 301640


Board Certified Specialty: No

CHRISTOPHER CHU

 25170 HANCOCK AVE FL 1 MURRIETA, CA 92562


 Phone: (951) 600-1640


Fax: (951) 600-1760

 After Hours Phone: (951) 600-1640

Provider Gender: Male

NPI: 1912369273

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish, Yue Chinese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY

LENHART-PENDERGRASS,

PATRICIA


Provider ID: 294382

Board Certified Specialty: No

PATRICIA M

LENHART-PENDERGRASS

 25170 HANCOCK AVE FL 1 MURRIETA, CA 92562


 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951) 600-1640

Provider Gender: Female

NPI: 1144615659

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


PEDIATRIC PULMONOLOGY

RAO, APARNA


Provider ID: 215528

Board Certified Specialty: No
APARNA R RAO

 25170 HANCOCK AVE MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951) 600-1640

Provider Gender: Female

NPI: 1649222340

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PEDIATRICS


LOPEZ, XIMENA

Provider ID: 302857

Board Certified Specialty: No

XIMENA LOPEZ

 25170 HANCOCK AVE FL 1 MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760


 After Hours Phone: (951) 600-1640

Provider Gender: Female

NPI: 1740316405


 Provider English Spoken: Y


D3. Directorio de proveedores especialistas

 *Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


PEDIATRICS

NGO, MAI

Provider ID: 302112

*Board Certified Specialty: No
MAI P NGO*

 *25170 HANCOCK AVE STE 1
MURRIETA, CA 92562*

 *Phone: (951) 600-1640*

Fax: (951) 600-1760

 *After Hours Phone: (951)
600-1640*

Provider Gender: Female

NPI: 1508910787

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Vietnamese*

Cultural Competency: N

Hospital Affiliation: UCSF

*BENIOFF CHILDREN'S
HOSPITAL OAKLAND, UCSF
MEDICAL CENTER, RADY
CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT*

*PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A*


PEDIATRICS


PATTERSON, MARY

Provider ID: 215677

*Board Certified Specialty: No
MARY E PATTERSON*

 *25170 HANCOCK AVE
MURRIETA, CA 92562*

 *Phone: (951) 600-1640*

 *After Hours Phone: (951)
600-1640*

Provider Gender: Female

NPI: 1912112020

 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


PEDIATRICS


VARGASTRUJILLO, MARCELA

Provider ID: 215602

*Board Certified Specialty: No
MARCELA VARGASTRUJILLO*

 *25170 HANCOCK AVE
MURRIETA, CA 92562*

 *Phone: (951) 600-1640*

 *After Hours Phone: (951)
600-1640*

*Provider Gender: Female
NPI: 1952534091*

 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


PHYSICAL MEDICINE / REHABILITATION

ALGRA, JEFFREY

Provider ID: 215644

*Board Certified Specialty: No
JEFFREY ALGRA*

 *25170 HANCOCK AVE
MURRIETA, CA 92562*


 *Phone: (951) 600-1640*

Fax: (951) 600-1760

 *After Hours Phone: (951)
600-1640*

Provider Gender: Male

NPI: 1457664518




 *Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*


D3. Directorio de proveedores especialistas

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PHYSICAL MEDICINE / REHABILITATION


BIFFL, SUSAN

Provider ID: 283113
Board Certified Specialty: No
SUSAN E BIFFL

 25170 HANCOCK AVE
MURRIETA, CA 92562
 Phone: (951) 600-1640
Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female
NPI: 1366589640


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PHYSICAL MEDICINE / REHABILITATION

DALAL, PRITHA

Provider ID: 215665
Board Certified Specialty: No
PRITHA B DALAL MD

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640
Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1609017532

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PHYSICAL MEDICINE / REHABILITATION

RYAN, KYLE

Provider ID: 275662
Board Certified Specialty: No
KYLE J RYAN

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 Phone: (951) 600-1640
Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1447645742

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PHYSICAL MEDICINE / REHABILITATION

SCOTT-WYARD, PHOEBE

Provider ID: 283086
Board Certified Specialty: No
PHOEBE R SCOTT-WYARD

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640
Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1336356203

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICAL MEDICINE / REHABILITATION

D3. Directorio de proveedores especialistas

SKALSKY, ANDREW

Provider ID: 215522

Board Certified Specialty: No

ANDREW J SKALSKY

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1487635272

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

ANWAR, YASMIN

Provider ID: 300845

Board Certified Specialty: Yes

YASMIN ANWAR

25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562

Phone: (951) 304-7546

Fax: (951) 696-5872

After Hours Phone: (951)
304-7546

Provider Gender: Female

NPI: 1588602247

Provider English Spoken: Y

Provider Language(s)

Spoken: Persian, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE

Provider ID: 302453

Board Certified Specialty: No

ANNETTE A RODRIGUES

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1205381845

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PULMONARY DISEASES

KUMAR, AVNEE

Provider ID: 300014

Board Certified Specialty: No

AVNEE J KUMAR

25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1750745394

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PULMONARY DISEASES

SURI, RAJAT

Provider ID: 283350

Board Certified Specialty: No

RAJAT SURI

25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

Phone: (951) 677-1111

Fax: (951) 677-9757

After Hours Phone: (951)
677-1111

Provider Gender: Male

NPI: 1144615337

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

D3. Directorio de proveedores especialistas

MEDICAL CTR, UCSD LA JOLLA 8:00AM-5:00PM
JOHN SALLY THORNTON Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

FAIRBANKS, TIMOTHY

Provider ID: 246979

Board Certified Specialty: No
TIMOTHY J FAIRBANKS

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1407010556

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

SURGERY GENERAL

KLING, KAREN

Provider ID: 215583

Board Certified Specialty: No
KAREN M KLING

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1982775144

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, NATIONAL
NAVAL MED CTR, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

VASCULAR

HOWE, STEVEN

Provider ID: 206761

Board Certified Specialty: No
STEVEN C HOWE

28062 BAXTER RD
MURRIETA, CA 92563

Phone: (877) 558-6248

After Hours Phone: (877)
558-6248

Provider Gender: Male

NPI: 1497702740

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, TRI
CITY MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

CHENG, YU-TSUN

Provider ID: 301902

Board Certified Specialty: No
YU-TSUN CHENG

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1992982854

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY


D3. Directorio de proveedores especialistas

HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC

UPASANI, VIDYADHAR

Provider ID: 283160

Board Certified Specialty: No
VIDYADHAR V UPASANI

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1548417652

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY PEDIATRIC


THANGARAJAH, HARIHARAN

Provider ID: 215420

Board Certified Specialty: No
HARIHARAN THANGARAJAH


 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1598979593

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY THORACIC

HOWE, STEVEN


Provider ID: 210169

Board Certified Specialty: No
STEVEN C HOWE

 41011 CALIFORNIA OAKS
RD STE 104
MURRIETA, CA 92562


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497702740

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, TRI
CITY MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY THORACIC

POLLEMA, TRAVIS


Provider ID: 210577

Board Certified Specialty: No
TRAVIS L POLLEMA

 41011 CALIFORNIA OAKS
RD STE 104
MURRIETA, CA 92562


 Phone: (858) 657-7777

Fax: (888) 539-8781

 After Hours Phone: (858)
657-7777

Provider Gender: Male

NPI: 1871752956

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Accessibility: CONTACT
PROVIDER

D3. Directorio de proveedores especialistas



 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NATIONAL CITY


CERTIFIED NURSE PRACTITIONER




CUNNINGHAM, ISIS

Provider ID: 302115
Board Certified Specialty: No
ISIS Y CUNNINGHAM

 655 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
 Phone: (619) 470-1945
Fax: (619) 475-5048
 After Hours Phone: (619)
470-1945

Provider Gender: Female
NPI: 1770124927

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER


DE CASTRO, SHARLENE JOYCE

Provider ID: 299158
Board Certified Specialty: No
SHARLENE JOYCE J DE
CASTRO

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426
Fax: (619) 339-5657
 After Hours Phone: (844)
200-2426

Provider Gender: Female
NPI: 1750019824



 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-TH
8:00AM-6:00PM
F 8:00AM-5:00PM
 Website: N/A



CERTIFIED NURSE PRACTITIONER

DRISCOLL, SUSAN

Provider ID: 301775
Board Certified Specialty: No
SUSAN D DRISCOLL



 330 E 8TH ST
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
Fax: (619) 259-2807
 After Hours Phone: (619)
662-4100

Provider Gender: Female
NPI: 1477755684

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\None
American Sign Language (ASL):
N

 Accessibility: CONTACT




PROVIDER

 Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM
 Website: N/A



CERTIFIED NURSE PRACTITIONER




DRISCOLL, SUSAN

Provider ID: 301774
Board Certified Specialty: No
SUSAN D DRISCOLL

 340 E 8TH ST
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
Fax: (619) 259-2807
 After Hours Phone: (619)
662-4100

Provider Gender: Female
NPI: 1477755684

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

GULLY, MICHELLE

Provider ID: 299422
Board Certified Specialty: No
MICHELLE D GULLY

 1428 HIGHLAND AVE

D3. Directorio de proveedores especialistas

NATIONAL CITY, CA 91950
☎ Phone: (844) 200-2426
Fax: (619) 434-1613
🕒 After Hours Phone: (844) 200-2426
Provider Gender: Female
NPI: 1801557947

🗉 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

LIM, IMELDA

Provider ID: 294308
Board Certified Specialty: No
IMELDA B LIM

📍 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
☎ Phone: (844) 200-2426
Fax: (619) 474-3919
🕒 After Hours Phone: (844) 200-2426
Provider Gender: Female
NPI: 1093130395

🗉 Provider English Spoken: Y
🗉 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT

PROVIDER
🕒 Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

MIDORO, ABEGAILLE

Provider ID: 303827
Board Certified Specialty: No
ABEGAILLE A MIDORO

📍 2835 HIGHLAND AVE STE B
NATIONAL CITY, CA 91950
☎ Phone: (844) 200-2426
Fax: (619) 477-2628
🕒 After Hours Phone: (844) 200-2426

Provider Gender: Female
NPI: 1952925851
🗉 Provider English Spoken: Y
🗉 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

MIDORO, ABEGAILLE

Provider ID: 303830
Board Certified Specialty: No

ABEGAILLE A MIDORO
📍 2835 HIGHLAND AVE STE A
NATIONAL CITY, CA 91950
☎ Phone: (844) 200-2426
Fax: (619) 477-1286
🕒 After Hours Phone: (844) 200-2426
Provider Gender: Female
NPI: 1952925851

🗉 Provider English Spoken: Y
🗉 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM
🌐 Website: N/A




CERTIFIED NURSE PRACTITIONER

NOVENO, HILARIO JR

Provider ID: 297836
Board Certified Specialty: No
HILARIO JR C NOVENO JR
📍 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
☎ Phone: (844) 200-2426
Fax: (619) 474-4008
🕒 After Hours Phone: (844) 200-2426
Provider Gender: Male
NPI: 1124486865

🗉 Provider English Spoken: Y
🗉 Provider Language(s)
Spoken: Arabic, Spanish,



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Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-6:00PM
 Website: N/A

CHIROPRACTOR

GILIBERTO, JOSEPH

Provider ID: 291548
Board Certified Specialty: No
JOSEPH A GILIBERTO
 2835 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
Fax: (619) 399-5959
 After Hours Phone: (844)
200-2426
Provider Gender: Male
NPI: 1821463159






 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish




Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

DERMATOLOGY

LIN, SHINKO






Provider ID: 308216




Board Certified Specialty: Yes
SHINKO K LIN
 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
 Phone: (619) 267-8303
Fax: (619) 267-4835
 After Hours Phone: (619)
267-8303
Provider Gender: Female
NPI: 1205130036
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:30AM-4:30PM
 Website: N/A

DERMATOLOGY



LIN, SHINKO



Provider ID: 306319
Board Certified Specialty: Yes
SHINKO K LIN
 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
 Phone: (619) 267-8303
Fax: (619) 267-4835
 After Hours Phone: (619)
267-8303
Provider Gender: Female
NPI: 1205130036
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:30AM-4:30PM
 Website: N/A

FAMILY PRACTICE

NAVARRO, VANESSA MARIA

Provider ID: 301784
Board Certified Specialty: No
VANESSA MARIA M NAVARRO
 2400 E 8TH ST
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
Fax: (619) 259-2807
 After Hours Phone: (619)
662-4100
Provider Gender: Female
NPI: 1952563421

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Filipino, Spanish,
Tagalog

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

D3. Directorio de proveedores especialistas



 Hours: M-F
8:00AM-5:00PM
 Website: N/A

FAMILY PRACTICE

ROBERTS, POMAI

Provider ID: 301278



Board Certified Specialty: No
POMAI ROBERTS

 1136 D AVE
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
Fax: (619) 336-2323

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1023278314

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM

 Website: N/A


INTERVENTIONAL


CARDIOLOGY

CAMACHO, BENJAMIN

Provider ID: 290137

Board Certified Specialty: No
BENJAMIN O CAMACHO



 1615 SWEETWATER RD STE
D

NATIONAL CITY, CA 91950
 Phone: (619) 474-2233
Fax: (619) 474-2211

 After Hours Phone: (619)
474-2233

Provider Gender: Male

NPI: 1699759936

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N


Hospital Affiliation:
GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

INTERVENTIONAL

CARDIOLOGY

CAMACHO, BENJAMIN

Provider ID: 35045



Board Certified Specialty: No
BENJAMIN O CAMACHO

 1615 SWEETWATER RD
NATIONAL CITY, CA 91950
 Phone: (619) 474-2233
Fax: (619) 474-2211

 After Hours Phone: (619)
474-2233

Provider Gender: Male


NPI: 1699759936

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-6:00PM

 Website: N/A

Email:

BCAMACHOMD@SBCGLOBAL.NET



INTERVENTIONAL

CARDIOLOGY

CAMACHO, BENJAMIN

Provider ID: 269129



Board Certified Specialty: No
BENJAMIN O CAMACHO

 1615 SWEETWATER RD
NATIONAL CITY, CA 91950
 Phone: (619) 474-2233
Fax: (619) 474-2211

 After Hours Phone: (619)
474-2233

Provider Gender: Male

NPI: 1699759936

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
9:00AM-6:00PM
Website: N/A
Email:
BCAMACHOMD@SBCGLOBAL.NET

INTERVENTIONAL **CARDIOLOGY**

DAMANI, SAMIR

Provider ID: 303098
Board Certified Specialty: No
SAMIR B DAMANI
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Phone: (858) 800-2480
Fax: (858) 216-1908
After Hours Phone: (858)
800-2480
Provider Gender: Male
NPI: 1457379372
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM
Website: N/A

INTERVENTIONAL **CARDIOLOGY**

PANDHI, JAY

Provider ID: 269087

Board Certified Specialty: No
JAY N PANDHI
655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Phone: (619) 512-1915
Fax: (619) 512-1913

After Hours Phone: (619)
512-1915
Provider Gender: Male
NPI: 1407997406
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR, SCRIPPS MERCY
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

INTERVENTIONAL **CARDIOLOGY**

ROUGH, STEVEN

Provider ID: 302044
Board Certified Specialty: No
STEVEN J ROUGH
1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Phone: (619) 434-4288
Fax: (619) 434-4315

After Hours Phone: (619)
434-4288

Provider Gender: Male

NPI: 1386821460
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
ALVARADO HOSP MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

INTERVENTIONAL **CARDIOLOGY**

ROUGH, STEVEN

Provider ID: 302043
Board Certified Specialty: No
STEVEN J ROUGH
1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Phone: (619) 434-4288
Fax: (619) 434-4315

After Hours Phone: (619)
434-4288

Provider Gender: Male

NPI: 1386821460

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
ALVARADO HOSP MED CTR

D3. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): Provider ID: 290784

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL


CARDIOLOGY

ROUGH, STEVEN

Provider ID: 301320

Board Certified Specialty: No
STEVEN J ROUGH

 1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950


 Phone: (619) 434-4288


Fax: (619) 434-4315

 After Hours Phone: (619)
434-4288

Provider Gender: Male

NPI: 1386821460

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
ALVARADO HOSP MED CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEPHROLOGY

COMUNALE, RODERICK

Board Certified Specialty: No

RODERICK A COMUNALE

 502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950


 Phone: (858) 551-0276

Fax: (858) 454-8796

 After Hours Phone: (858)
551-0276

Provider Gender: Male

NPI: 1568462109

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PARADISE
VALLEY HOSPITAL,

ALVARADO HOSPITAL LLC,
SCRIPPS MERCY HOSPITAL,
ALVARADO HOSP MED CTR,
KINDRED HOSPITAL SAN
DIEGO, KINDRED HOSPITAL

SAN DIEGO, SELECT

SPECIALTY HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 21\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


ASLIAN, AZITA

Provider ID: 301797

Board Certified Specialty: No

AZITA ASLIAN

 1136 D AVE
NATIONAL CITY, CA 91950


 Phone: (619) 662-4100


Fax: (619) 336-2323

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1851667661

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Faroese, Fataleka
Cultural Competency: N

Hospital Affiliation: Hemet


Global Medical Center, Menifee
Global Medical Center,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


DELROSARIO, GELEN

Provider ID: 269247

Board Certified Specialty: No

GELEN R DELROSARIO

 502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950

 Phone: (619) 475-1261

Fax: (619) 475-1267

D3. Directorio de proveedores especialistas

☎ After Hours Phone: (619) 475-1261

Provider Gender: Female

NPI: 1255643474

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): **OBSTETRICS / GYNECOLOGY**

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
9:00AM-5:00PM

🌐 Website: N/A

Email:

pquiroz_80@hotmail.com

OBSTETRICS / GYNECOLOGY

DELROSARIO, GELEN

Provider ID: 206092

Board Certified Specialty: No
GELEN R DELROSARIO

📍 502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950

☎ Phone: (619) 475-1261

Fax: (619) 475-1267

☎ After Hours Phone: (619)
475-1261

Provider Gender: Female

NPI: 1255643474

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
9:00AM-5:00PM

🌐 Website: N/A

Email:

pquiroz_80@hotmail.com

OBSTETRICS / GYNECOLOGY

DELROSARIO, GELEN

Provider ID: 257478

Board Certified Specialty: No
GELEN R DELROSARIO

📍 502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950

☎ Phone: (619) 475-1261

Fax: (619) 475-1267

☎ After Hours Phone: (619)
475-1261

Provider Gender: Female

NPI: 1255643474

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
9:00AM-5:00PM

🌐 Website: N/A

Email:

pquiroz_80@hotmail.com

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 302451

Board Certified Specialty: No
JENNIFER J WINESBURG

📍 2400 E 8TH ST STE 8
NATIONAL CITY, CA 91950

☎ Phone: (619) 662-4100

Fax: (619) 259-2807

☎ After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1811162456

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP

CORONADO HOSP AND
HEALTHCARE CTR,

GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OPHTHALMOLOGY

HAIGHT, BRUCE

Provider ID: 269113

Board Certified Specialty: No
BRUCE T HAIGHT

D3. Directorio de proveedores especialistas

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Phone: (800) 898-2020
Fax: (844) 897-3788

After Hours Phone: (800)
898-2020

Provider Gender: Male

NPI: 1427029628

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

AOTO, KIM

Provider ID: 268722

Board Certified Specialty: No
KIM N AOTO

2240 E PLAZA BLVD STE
F-G
NATIONAL CITY, CA 91950

Phone: (800) 898-2020
Fax: (844) 897-3788

After Hours Phone: (800)
898-2020

Provider Gender: Female
NPI: 1780935650

Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

KOO, ANITA

Provider ID: 307171

Board Certified Specialty: No
ANITA K KOO

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 474-2284
Fax: (619) 474-3919

After Hours Phone: (619)
474-2284

Provider Gender: Female
NPI: 1669825667

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

KOO, ANITA

Provider ID: 306903

Board Certified Specialty: No
ANITA K KOO

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950

Phone: (619) 425-7755
Fax: (619) 425-2138

After Hours Phone: (619)
425-7755

Provider Gender: Female
NPI: 1669825667

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

KOO, ANITA

Provider ID: 304538

Board Certified Specialty: No
ANITA K KOO

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950

Phone: (619) 425-7755
Fax: (619) 425-2138

After Hours Phone: (619)
425-7755

Provider Gender: Female
NPI: 1669825667

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

D3. Directorio de proveedores especialistas

KOO, ANITA

Provider ID: 307113

Board Certified Specialty: No
ANITA K KOO

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 474-2284

Fax: (619) 474-3919

After Hours Phone: (619)
474-2284

Provider Gender: Female

NPI: 1669825667

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PODIATRIST

ATMAR, AKMAL

Provider ID: 269784

Board Certified Specialty: No
AKMAL ATMAR

2345 E 8TH ST STE 105
NATIONAL CITY, CA 91950

Phone: (929) 287-4511

Fax: (877) 671-6835

After Hours Phone: (929)
287-4511

Provider Gender: Male

NPI: 1558656637

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Persian, Urdu

Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

PODIATRIST

CAINE, SAMUEL

Provider ID: 308212

Board Certified Specialty: No
SAMUEL CAINE

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Phone: (619) 292-2493

Fax: (619) 618-0222

After Hours Phone: (619)
292-2493

Provider Gender: Male

NPI: 1396230298

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SCRIPPS
MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY
HOSPITAL, SHARP MEMORIAL

HOSPITAL, SHARP CHULA
VISTA MED CTR, SHARP

CORONADO HOSP AND
HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PODIATRIST

CAINE, SAMUEL

Provider ID: 308637

Board Certified Specialty: No
SAMUEL CAINE

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Phone: (619) 292-2493

Fax: (619) 618-0222

After Hours Phone: (619)
292-2493

Provider Gender: Male

NPI: 1396230298

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SCRIPPS
MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY
HOSPITAL, SHARP MEMORIAL

HOSPITAL, SHARP CHULA
VISTA MED CTR, SHARP

CORONADO HOSP AND
HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PODIATRIST

DAVIDSON III, JOHN

Provider ID: 129542

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
JOHN A DAVIDSON III III

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Phone: (619) 427-3481

Fax: (619) 420-7807

After Hours Phone: (619)
427-3481

Provider Gender: Male

NPI: 1689069874

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-4:30PM

Website: N/A

PULMONARY DISEASES

LIM, ROSEMARIE

Provider ID: 262224

Board Certified Specialty: No
ROSEMARIE S LIM

610 EUCLID AVE STE 202
NATIONAL CITY, CA 91950

Phone: (619) 472-4900

Fax: (619) 472-4910

After Hours Phone: (619)
472-4900

Provider Gender: Female

NPI: 1841303419

Provider English Spoken: Y
Provider Language(s)
Spoken: Chinese, Mandarin,
Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-4:30PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

CHENG, BRANDON

Provider ID: 304531

Board Certified Specialty: No
BRANDON G CHENG

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Phone: (619) 482-3000

Fax: (619) 695-0050

After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1336894724

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
7:00AM-7:00PM
F 7:00AM-5:00PM

SA 8:00AM-1:00PM

Website: N/A

REGISTERED PHYSICAL **THERAPIST**

JIMENEZ, ANDREA

Provider ID: 299888

Board Certified Specialty: No
ANDREA L JIMENEZ

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1407440670

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7:00AM-7:00PM
Website: N/A

REGISTERED PHYSICAL **THERAPIST**

KARANDE, PRACHI

Provider ID: 287102

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

PRACHI KARANDE

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1699357525

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
7:00AM-6:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

NGUYEN, TIA

Provider ID: 305011

Board Certified Specialty: No
TIA NGUYEN

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Phone: (619) 482-3000

Fax: (619) 695-0050

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1457136269

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-TH
7:00AM-7:00PM
F 7:00AM-4:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

NGUYEN, TIA

Provider ID: 305012

Board Certified Specialty: No
TIA NGUYEN

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Phone: (619) 482-3000

Fax: (619) 695-0050

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1457136269

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
7:00AM-7:00PM
F 7:00AM-4:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

NOVENCIDO, ANDREW

Provider ID: 286784

Board Certified Specialty: No
ANDREW NOVENCIDO

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Phone: (619) 482-3000

Fax: (619) 695-0050

After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1447723937

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

NOVENCIDO, ANDREW

Provider ID: 301996

Board Certified Specialty: No
ANDREW NOVENCIDO

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Phone: (619) 482-3000

Fax: (619) 695-0050

After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1447723937

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

D3. Directorio de proveedores especialistas

REGISTERED PHYSICAL THERAPIST

SPARKS, TODD

Provider ID: 301110

Board Certified Specialty: No
TODD M SPARKS

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Phone: (619) 482-3000

Fax: (619) 695-0050

After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1265481139

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 7:00AM-7:00PM
TU 7:00AM-0:00PM
W-TH 7:00AM-7:00PM
F 7:00AM-0:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

SUGGS, SARAH

Provider ID: 298366

Board Certified Specialty: No
SARAH SUGGS

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619)

482-3000

Provider Gender: Female

NPI: 1083353650

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7:00AM-7:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

SUGGS, SARAH

Provider ID: 301430

Board Certified Specialty: No
SARAH SUGGS

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1083353650

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7:00AM-7:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

VILLANUEVA, GIOVANNI

Provider ID: 301533

Board Certified Specialty: No
GIOVANNI X VILLANUEVA

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Phone: (619) 482-3000

Fax: (619) 695-0050

After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1063046878

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7:00AM-7:00PM

Website: N/A

OCEANSIDE

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY

Provider ID: 308111

Board Certified Specialty: No
ROY C BROWNLOW

2125 S EL CAMINO REAL
STE 103

OCEANSIDE, CA 92054

Phone: (760) 610-0522



Fax: (760) 610-0523

After Hours Phone: (760)
610-0522

Provider Gender: Male


NPI: 1205949914

D3. Directorio de proveedores especialistas

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY

Provider ID: 308400

Board Certified Specialty: No
ROY C BROWNLOW



 2125 S EL CAMINO REAL
STE 103
OCEANSIDE, CA 92054

 Phone: (760) 610-0522
Fax: (760) 610-0523

 After Hours Phone: (760)
610-0522

Provider Gender: Male

NPI: 1205949914

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP


AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY PAIN MANAGEMENT


DAIRO, BRANDON

Provider ID: 299882

Board Certified Specialty: No
BRANDON DAIRO

 3231 WARING CT STE K
OCEANSIDE, CA 92056

 Phone: (760) 607-5350

 After Hours Phone: (760)
607-5350

Provider Gender: Male

NPI: 1689092470

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 18\100

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

CERTIFIED ACUPUNCTURIST GONZALEZ, ANDRES

Provider ID: 308047

Board Certified Specialty: No
ANDRES D GONZALEZ



 3988 VISTA WAY STE G
OCEANSIDE, CA 92056

 Phone: (760) 736-6767
Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1841857729


 Provider English Spoken: Y
 Provider Language(s)


Spoken: Chinese, Spanish
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE

Provider ID: 306979

Board Certified Specialty: No
MONIQUE APRIL

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000
Fax: (760) 414-3892





 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1093288730

 Provider English Spoken: Y

D3. Directorio de proveedores especialistas




 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*






CERTIFIED NURSE

PRACTITIONER

APRIL, MONIQUE

Provider ID: 306978
Board Certified Specialty: No
MONIQUE APRIL

 517 N HORNE ST
OCEANSIDE, CA 92054
 *Phone: (760) 631-5000*
Fax: (760) 414-3892
 *After Hours Phone: (760)
631-5000*
Provider Gender: Female
NPI: 1093288730




 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*


CERTIFIED NURSE


PRACTITIONER

BALDWIN, ANDREA

Provider ID: 294937
Board Certified Specialty: No
ANDREA M BALDWIN

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 *Phone: (760) 631-5000*
Fax: (760) 414-3892
 *After Hours Phone: (760)
631-5000*
Provider Gender: Female
NPI: 1497202121

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 2\None
*American Sign Language (ASL):
N*




 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-TU
8:00AM-5:00PM
W 8:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-6:00PM*
 *Website: N/A*






CERTIFIED NURSE

PRACTITIONER

BINETTE, DONYA

Provider ID: 303861
Board Certified Specialty: No
DONYA L BINETTE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 *Phone: (760) 736-6767*
Fax: (760) 736-8740
 *After Hours Phone: (760)
736-6767*
Provider Gender: Female
NPI: 1427325166




 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:30PM*
 *Website: N/A*


CERTIFIED NURSE

PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 301315
Board Certified Specialty: No
SAMUEL U CHILAKA

 517 N HORNE ST
OCEANSIDE, CA 92054
 *Phone: (760) 631-5000*
Fax: (760) 414-3892
 *After Hours Phone: (760)
631-5000*
Provider Gender: Male
NPI: 1679140644

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM*
 *Website: N/A*

D3. Directorio de proveedores especialistas

CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 301313

Board Certified Specialty: No
SAMUEL U CHILAKA

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054

☎ Phone: (760) 631-5000
Fax: (760) 414-3892

📞 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1679140644

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 301314

Board Certified Specialty: No
SAMUEL U CHILAKA

📍 4700 N RIVER RD
OCEANSIDE, CA 92057

☎ Phone: (760) 631-5000
Fax: (760) 414-3892

📞 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1679140644

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 303931

Board Certified Specialty: No
TYLER D CHRISTY

📍 4700 N RIVER RD
OCEANSIDE, CA 92057

☎ Phone: (760) 631-5000
Fax: (760) 414-3892

📞 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1689094971

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHRISTY, TYLER

Provider ID: 307299

Board Certified Specialty: No
TYLER D CHRISTY

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054

☎ Phone: (760) 631-5000
Fax: (760) 414-3892

📞 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1689094971

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 303930

Board Certified Specialty: No
TYLER D CHRISTY

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054

☎ Phone: (760) 631-5000
Fax: (760) 414-3892

📞 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1689094971


🗣 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

D3. Directorio de proveedores especialistas

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

CISZEK, ALEXANDRA

Provider ID: 306002

Board Certified Specialty: No
ALEXANDRA N CISZEK

 605 CROUCH ST
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female


NPI: 1578220612


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 2\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

GENOVESE, KELLY

Provider ID: 301304

Board Certified Specialty: No
KELLY K GENOVESE

 2210 MESA DR STE 5
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1326052457


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

HARRIS, PAMELA

Provider ID: 302289

Board Certified Specialty: No
PAMELA R HARRIS

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1407545221


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

HARRIS, PAMELA

Provider ID: 302290

Board Certified Specialty: No
PAMELA R HARRIS

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female


NPI: 1407545221


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

HEAD, KRISTIN

Provider ID: 268660

Board Certified Specialty: No
KRISTIN N HEAD

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056





 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020







D3. Directorio de proveedores especialistas

Provider Gender: Female
NPI: 1699078923

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER








HERNANDEZ, JESSICA

Provider ID: 302298
Board Certified Specialty: No
JESSICA A HERNANDEZ
 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1013668680
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

 Website: N/A




CERTIFIED NURSE PRACTITIONER


HERNANDEZ, JESSICA

Provider ID: 302300
Board Certified Specialty: No
JESSICA A HERNANDEZ
 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1013668680
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER








HERNANDEZ, JESSICA

Provider ID: 302299
Board Certified Specialty: No
JESSICA A HERNANDEZ
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1013668680

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 304495
Board Certified Specialty: No
JESSICA A HERNANDEZ
 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1013668680
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 304494

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
JESSICA A HERNANDEZ

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HUERTA, STEVEN

Provider ID: 307932

Board Certified Specialty: No
STEVEN T HUERTA

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1558607440

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HUERTA, STEVEN

Provider ID: 307934

Board Certified Specialty: No
STEVEN T HUERTA

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1558607440

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HUERTA, STEVEN

Provider ID: 307935

Board Certified Specialty: No
STEVEN T HUERTA

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1558607440

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 298084

Board Certified Specialty: No
BRIDGET M KELLEHER

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1245695006

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

D3. Directorio de proveedores especialistas

CERTIFIED NURSE **PRACTITIONER**

KELLEHER, BRIDGET

Provider ID: 298081

Board Certified Specialty: No

BRIDGET M KELLEHER

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE **PRACTITIONER**

KELLEHER, BRIDGET

Provider ID: 298082

Board Certified Specialty: No

BRIDGET M KELLEHER

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE **PRACTITIONER**

LANG, LESLIE

Provider ID: 308045

Board Certified Specialty: No

LESLIE A LANG

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1457366130

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE **PRACTITIONER**

MONTGOMERY JR, KEITH

Provider ID: 295285

Board Certified Specialty: No

KEITH MONTGOMERY JR JR

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1790978617

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:00AM-5:00PM
W 10:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE **PRACTITIONER**

MONTGOMERY JR, KEITH

Provider ID: 295286

Board Certified Specialty: No

KEITH MONTGOMERY JR JR

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

D3. Directorio de proveedores especialistas

NPI: 1790978617

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU
8:00AM-5:00PM
W 10:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MONTGOMERY JR, KEITH

Provider ID: 295287

Board Certified Specialty: No
KEITH MONTGOMERY JR JR

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male


NPI: 1790978617


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 6\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU
8:00AM-5:00PM
W 10:00AM-7:00PM
TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

PRITZKER, JOELY

Provider ID: 239772

Board Certified Specialty: No
JOELY R PRITZKER

 4700 N RIVER RD
OCEANSIDE, CA 92057


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619384351

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

RAYTA, NICOLE

Provider ID: 304682

Board Certified Specialty: No
NICOLE RAYTA

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female


NPI: 1689027542


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

SANACORA, RACHEL

Provider ID: 297730

Board Certified Specialty: No
RACHEL SANACORA

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1000

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1000

Provider Gender: Female

NPI: 1548987985


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO



Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D3. Directorio de proveedores especialistas

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 Website: N/A

CERTIFIED NURSE


PRACTITIONER

SANTIAGO, AMANDA

Provider ID: 242607

Board Certified Specialty: No
AMANDA C SANTIAGO

 4700 N RIVER RD
OCEANSIDE, CA 92057


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619488731

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295505

Board Certified Specialty: No
CHRISTOPHER TAYLOR

 4700 N RIVER RD
OCEANSIDE, CA 92057


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1851747166

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-2:00PM
SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295503

Board Certified Specialty: No
CHRISTOPHER TAYLOR

 517 N HORNE ST
OCEANSIDE, CA 92054


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1851747166

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-2:00PM

SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295506

Board Certified Specialty: No
CHRISTOPHER TAYLOR

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1851747166


 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-2:00PM
SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE MIDWIFE

KELLY, KATHERINE

Provider ID: 290312

Board Certified Specialty: No
KATHERINE M KELLY





 2210 MESA DR STE 5
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)



D3. Directorio de proveedores especialistas




736-6767
Provider Gender: Female
NPI: 1801134275
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE




PERLMAN, TAMARA


Provider ID: 290733
Board Certified Specialty: No
TAMARA L PERLMAN
 2210 MESA DR STE 5
OCEANSIDE, CA 92054
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760)
736-6767
Provider Gender: Female
NPI: 1730274374
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CHIROPRACTOR

ANDREWS, BRAD

Provider ID: 290542
Board Certified Specialty: No
BRAD R ANDREWS
 619 CROUCH ST
OCEANSIDE, CA 92054
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760)
736-6767
Provider Gender: Male
NPI: 1750791745

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None




American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER



 Website: N/A

CHIROPRACTOR

JU, NATHANIEL

Provider ID: 290221
Board Certified Specialty: No
NATHANIEL JU
 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Male
NPI: 1972883882




 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A



EMERGENCY MEDICINE

PHAM, LILY

Provider ID: 304934
Board Certified Specialty: No
LILY M PHAM

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (760) 547-1000
Fax: (760) 547-1021
 After Hours Phone: (760)
547-1000

Provider Gender: Female
NPI: 1811423072


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

FAMILY PRACTICE

SALAMANCA, OMAR

Provider ID: 295469

Board Certified Specialty: No
OMAR SALAMANCA

📍 605 CROUCH ST
OCEANSIDE, CA 92054

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

🕒 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1083000947

🗨 Provider English Spoken: Y

🗨 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: KERN
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 14\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

SA 8:00AM-4:30PM

🌐 Website: N/A

GASTROENTEROLOGY

NOVO, MEGAN

Provider ID: 308044

Board Certified Specialty: No
MEGAN E NOVO

📍 3923 WARING RD STE A
OCEANSIDE, CA 92056

☎ Phone: (760) 724-8782

Fax: (760) 842-7801

🕒 After Hours Phone: (760)
724-8782

Provider Gender: Female

NPI: 1770961971

🗨 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL, TRI CITY
MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, UCSD LA JOLLA

JOHN SALLY THORNTON,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, UNIVERSITY OF

CALIFORNIA IRVINE MED CTR,

UCSD MEDICAL CTR, UCSD

MEDICAL CTR, SCRIPPS

MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH

8:00AM-4:30PM

🌐 Website: N/A

INTERNAL MEDICINE

SHABANIAN, LEILA

Provider ID: 307537

Board Certified Specialty: No

LEILA SHABANIAN

📍 517 N HORNE ST
OCEANSIDE, CA 92054

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013963073

🗨 Provider English Spoken: Y

🗨 Provider Language(s)

Spoken: Farsi, French,
Persian

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, TRI CITY MEDICAL CTR,

PALOMAR HEALTH, SCRIPPS

MERCY HOSPITAL, PALOMAR

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

INTERNAL MEDICINE

SHABANIAN, LEILA

Provider ID: 307215

Board Certified Specialty: No

LEILA SHABANIAN

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013963073

🗨 Provider English Spoken: Y

🗨 Provider Language(s)

Spoken: Farsi, French,
Persian

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, TRI CITY MEDICAL CTR,

PALOMAR HEALTH, SCRIPPS

D3. Directorio de proveedores especialistas



MERCY HOSPITAL, PALOMAR N
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-TU
8:00AM-5:00PM
W 8:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE



MELBER, DORA

Provider ID: 296991
Board Certified Specialty: No
DORA J MELBER

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (858) 966-6710
Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female
NPI: 1124413026

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hungarian, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19



American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE


REIMERS, REBECCA

Provider ID: 294651
Board Certified Specialty: No
REBECCA M REIMERS

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (858) 966-6710
Fax: (858) 966-6711




 After Hours Phone: (858)
966-6710

Provider Gender: Female
NPI: 1801207634

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE


RICHARDSON, ALVIE

Provider ID: 264686

Board Certified Specialty: No




ALVIE C RICHARDSON
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (858) 966-6710
Fax: (858) 966-6711
 After Hours Phone: (858)
966-6710

Provider Gender: Male
NPI: 1154305977

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, Sharp Grossmont
Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE

Provider ID: 205437
Board Certified Specialty: No
WADE D SCHWENDEMANN




 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (858) 966-6710
Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Male
NPI: 1477563302

 Provider English Spoken: Y
Cultural Competency: N

D3. Directorio de proveedores especialistas

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, Sharp Grossmont Hospital, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

MATERNAL AND FETAL MEDICINE




WESTERMANN, MELISSA




Provider ID: 255793
Board Certified Specialty: No
MELISSA L WESTERMANN
 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056
 *Phone: (858) 966-6710*
Fax: (858) 966-6711
 *After Hours Phone: (858) 966-6710*
Provider Gender: Female
NPI: 1760730758
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER

CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

MATERNAL AND FETAL MEDICINE







WILLIAMS, KRISTIN

Provider ID: 206230
Board Certified Specialty: No
KRISTIN M WILLIAMS
 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056
 *Phone: (858) 966-6710*
Fax: (858) 966-6711
 *After Hours Phone: (858) 966-6710*
Provider Gender: Female
NPI: 1992847131
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, SAN MATEO MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND

NEWBORNS, TRI CITY MEDICAL CTR, CALIFORNIA PACIFIC MED CTR, CALIFORNIA PACIFIC MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

NEPHROLOGY

LIU, ANDREW

Provider ID: 305443
Board Certified Specialty: No
ANDREW C LIU
 3300 VISTA WAY STE B OCEANSIDE, CA 92056
 *Phone: (760) 967-9900*
Fax: (760) 967-6769
 *After Hours Phone: (760) 967-9900*
Provider Gender: Male
NPI: 1710481866
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Chinese, Mandarin*
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT*

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

NEPHROLOGY

LIU, ANDREW

Provider ID: 301573
Board Certified Specialty: No
ANDREW C LIU

3300 VISTA WAY
OCEANSIDE, CA 92056

Phone: (760) 967-9900
Fax: (760) 967-6769

After Hours Phone: (760)
967-9900

Provider Gender: Male

NPI: 1710481866

Provider English Spoken: Y
Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEPHROLOGY

LIU, ANDREW

Provider ID: 308522
Board Certified Specialty: No
ANDREW C LIU

3300 VISTA WAY
OCEANSIDE, CA 92056

Phone: (760) 967-9900
Fax: (760) 967-6769

After Hours Phone: (760)
967-9900

Provider Gender: Male

NPI: 1710481866

Provider English Spoken: Y
Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEUROLOGY

JINDAL, ANUJA

Provider ID: 206266
Board Certified Specialty: No

ANUJA V JINDAL

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020
Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1194046581

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY CHILD

SAHAGIAN, MICHELLE

Provider ID: 206075
Board Certified Specialty: No
MICHELLE L SAHAGIAN

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020
Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1275604035

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA

Provider ID: 273226
Board Certified Specialty: No

D3. Directorio de proveedores especialistas

PRATIBHA S BINDER

4002 VISTA WAY
OCEANSIDE, CA 92056

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174758031

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

BANSAL, PREETI

Provider ID: 205619

Board Certified Specialty: No
PREETI BANSAL

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (960) 547-1020

Fax: (760) 547-1021

After Hours Phone: (960)
547-1020

Provider Gender: Female

NPI: 1871664631

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT

HOSPITAL, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL, TRI CITY MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

BHATIA, SHAGUN

Provider ID: 267318

Board Certified Specialty: No
SHAGUN K BHATIA

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1104237353

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

HENNEIN, LAUREN

Provider ID: 297013

Board Certified Specialty: No

LAUREN M HENNEIN

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1699216010

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

JACOBSEN, BRADLEY


Provider ID: 302868

Board Certified Specialty: Yes


BRADLEY H JACOBSEN

D3. Directorio de proveedores especialistas

 3231 WARING CT STE S
OCEANSIDE, CA 92056

 Phone: (760) 631-6144

Fax: (760) 724-3920

 After Hours Phone: (760)
631-6144

Provider Gender: Male

NPI: 1760845184

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SHARP

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

MOLL, ANGELA

Provider ID: 205509

Board Certified Specialty: No
ANGELA M MOLL

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1861648602

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT

HOSPITAL, SHARP MEMORIAL

HOSPITAL, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY


MOVAGHAR, MANSOOR

Provider ID: 216416

Board Certified Specialty: No
MANSOOR MOVAGHAR


 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

 After Hours Phone: (760)
547-1020

Provider Gender: Male

NPI: 1497792220

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


OHALLORAN, HENRY

Provider ID: 205887

Board Certified Specialty: No

HENRY S OHALLORAN

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020

Provider Gender: Male

NPI: 1235287947

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


SHEILS, CATHERINE

Provider ID: 305308

Board Certified Specialty: No

CATHERINE R SHEILS

 3637 VISTA WAY
OCEANSIDE, CA 92056

 Phone: (760) 758-2008

D3. Directorio de proveedores especialistas

Fax: (760) 758-2004

☎ After Hours Phone: (760) 758-2008

Provider Gender: Female

NPI: 1932605649

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OPHTHALMOLOGY

SONG, DELU

Provider ID: 302871

Board Certified Specialty: No
DELU SONG

📍 3231 WARING CT STE S
OCEANSIDE, CA 92056

☎ Phone: (760) 631-6144

Fax: (760) 724-3920

☎ After Hours Phone: (760)
631-6144

Provider Gender: Male

NPI: 1437689536

🗉 Provider English Spoken: Y
🗉 Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OPTOMETRIST

GEE, JENNIFER

Provider ID: 290210

Board Certified Specialty: No
JENNIFER W GEE

📍 517 N HORNE ST
OCEANSIDE, CA 92054

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1336589332

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC

MEDICAL CENTER - D P APH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OPTOMETRIST

GEE, JENNIFER

Provider ID: 290927

Board Certified Specialty: No
JENNIFER W GEE

📍 4700 N RIVER RD
OCEANSIDE, CA 92057

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1336589332

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC

MEDICAL CENTER - D P APH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OPTOMETRIST

KIM, MICHAEL

Provider ID: 290902

Board Certified Specialty: No
MICHAEL S KIM

📍 4700 N RIVER RD
OCEANSIDE, CA 92057

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1164546313

🗉 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: SU 8:00AM-5:00PM
M-F 8:00AM-5:00PM*

 *Website: N/A*


OPTOMETRIST

KIM, MICHAEL

Provider ID: 290904

*Board Certified Specialty: No
MICHAEL S KIM*

 517 N HORNE ST
OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*

Fax: (760) 414-3892

 *After Hours Phone: (760)
631-5000*

Provider Gender: Male

NPI: 1164546313


 *Provider English Spoken: Y*
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: SU 8:00AM-5:00PM
M-F 8:00AM-5:00PM*

 *Website: N/A*


OPTOMETRIST

MORA, WENDY

Provider ID: 290237

*Board Certified Specialty: No
WENDY A MORA*

 517 N HORNE ST
OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*


Fax: (760) 414-3892

 *After Hours Phone: (760)*

631-5000

Provider Gender: Female

NPI: 1376958389

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


OPTOMETRIST

MORA, WENDY

Provider ID: 290929

*Board Certified Specialty: No
WENDY A MORA*

 4700 N RIVER RD
OCEANSIDE, CA 92057


 *Phone: (760) 631-5000*

Fax: (760) 414-3892

 *After Hours Phone: (760)
631-5000*

Provider Gender: Female

NPI: 1376958389

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


 *Website: N/A*


OPTOMETRIST

RING, ROBERT


Provider ID: 269380

*Board Certified Specialty: No
ROBERT A RING*

 3998 VISTA WAY STE 204
OCEANSIDE, CA 92056

 *Phone: (760) 726-9383*

Fax: (760) 726-9897

 *After Hours Phone: (760)
726-9383*

Provider Gender: Male

NPI: 1336228840

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M 10:00AM-7:00PM
TU-TH 9:00AM-5:00PM
F 9:00AM-0:00PM*

 *Website: N/A*


OPTOMETRIST

TAM, EMILY

Provider ID: 290317

*Board Certified Specialty: No
EMILY TAM*

 4700 N RIVER RD
OCEANSIDE, CA 92057

 *Phone: (760) 631-5000*


Fax: (760) 414-3892

 *After Hours Phone: (760)
631-5000*

Provider Gender: Female

NPI: 1497161236

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Chinese, Mandarin,*






D3. Directorio de proveedores especialistas



Yue Chinese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OPTOMETRIST

TAM, EMILY

Provider ID: 290318
Board Certified Specialty: No
EMILY TAM








 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1497161236
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin,
Yue Chinese

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OPTOMETRIST

TRAN, JESSICA





Provider ID: 303730
Board Certified Specialty: No
JESSICA A TRAN



 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1457922957
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 5\21
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 303731
Board Certified Specialty: No
JESSICA A TRAN

 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1457922957
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 5\21
American Sign Language (ASL):





N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F

8:00AM-5:00PM
 Website: N/A

OPTOMETRIST

TRAN, JESSICA


Provider ID: 304886
Board Certified Specialty: No
JESSICA A TRAN

 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1457922957
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




OPTOMETRIST

TRAN, JESSICA

Provider ID: 303732
Board Certified Specialty: No
JESSICA A TRAN

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1457922957
 Provider English Spoken: Y

D3. Directorio de proveedores especialistas





Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 5\21
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

OPTOMETRIST

TRAN, JESSICA

Provider ID: 304887
Board Certified Specialty: No
JESSICA A TRAN
 4700 N RIVER RD
OCEANSIDE, CA 92057
 *Phone: (760) 631-5000*
Fax: (760) 414-3892
 *After Hours Phone: (760) 631-5000*




Provider Gender: Female
NPI: 1457922957


 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*




OTOLARYNGOLOGY

BLISS, MORGAN

Provider ID: 206086
Board Certified Specialty: No
MORGAN R BLISS

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 *Phone: (760) 547-1020*
Fax: (760) 547-1021
 *After Hours Phone: (760) 547-1020*




Provider Gender: Female
NPI: 1760707657
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*


OTOLARYNGOLOGY

FRIESEN, TZYYNONG



Provider ID: 244899
Board Certified Specialty: No
TZYYNONG L FRIESEN

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 *Phone: (760) 547-1020*
 *After Hours Phone: (760) 547-1020*

Provider Gender: Female
NPI: 1952740177

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N




 *Accessibility: CONTACT*

PROVIDER
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*


OTOLARYNGOLOGY

LEUIN, SHELBY




Provider ID: 206111
Board Certified Specialty: No
SHELBY C LEUIN

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 *Phone: (760) 547-1020*
Fax: (760) 547-1021
 *After Hours Phone: (760) 547-1020*

Provider Gender: Female
NPI: 1124230909

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

OTOLARYNGOLOGY

PATEL, VIJAY

Provider ID: 297036
Board Certified Specialty: No
VIJAY PATEL

 3605 VISTA WAY STE 172

D3. Directorio de proveedores especialistas

OCEANSIDE, CA 92056
☎ Phone: (760) 547-1020
Fax: (760) 547-1021
🕒 After Hours Phone: (760) 547-1020
Provider Gender: Male
NPI: 1508250747
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

AGHILI, ROXANA

Provider ID: 303781
Board Certified Specialty: No
ROXANA AGHILI
📍 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056
☎ Phone: (760) 547-1000
Fax: (760) 547-1021
🕒 After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1851927883
🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: KAISER

FOUNDATION HOSPITAL SAN DIEGO, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: SU 1:00PM-10:00PM M-F 4:00PM-10:00PM SA 1:00PM-10:00PM
🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

BELLOMO, THOMAS

Provider ID: 205603
Board Certified Specialty: No
THOMAS N BELLOMO
📍 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056
☎ Phone: (760) 547-1020
Fax: (760) 547-1021
🕒 After Hours Phone: (760) 547-1020
Provider Gender: Male
NPI: 1700926698
🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: SU 1:00PM-10:00PM M-F 4:00PM-10:00PM SA 1:00PM-10:00PM
🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

CHOO, SUN

Provider ID: 296537
Board Certified Specialty: No
SUN H CHOO

📍 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056

☎ Phone: (760) 547-1000
Fax: (760) 547-1021

🕒 After Hours Phone: (760) 547-1000

Provider Gender: Female
NPI: 1700047628

🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: No
Min/Max Age: 0\19

American Sign Language (ASL):

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: SU 1:00PM-10:00PM M-F 4:00PM-10:00PM SA 1:00PM-10:00PM

🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

GORHAM, LAURA

Provider ID: 275786
Board Certified Specialty: No

D3. Directorio de proveedores especialistas

LAURA M GORHAM

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1000

Fax: (760) 547-1021

After Hours Phone: (760)
547-1000

Provider Gender: Female

NPI: 1316162324

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

GROSS, MATTHEW

Provider ID: 297175

Board Certified Specialty: No

MATTHEW F GROSS

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1000

Fax: (760) 547-1021

After Hours Phone: (760)
547-1000

Provider Gender: Male

NPI: 1942223664

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

KINGDON, JOANNA

Provider ID: 302319

Board Certified Specialty: No

JOANNA E KINGDON

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1000

Fax: (760) 547-1021

After Hours Phone: (760)
547-1000

Provider Gender: Female

NPI: 1609495399

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

PARK, RONALD

Provider ID: 295456

Board Certified Specialty: No

RONALD E PARK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1000

Fax: (760) 547-1021

After Hours Phone: (760)
547-1000

Provider Gender: Male

NPI: 1881695914

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

PARKER, SHERINE

Provider ID: 205787

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

SHERINE B PARKER

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1477626513

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: GLENDALE

ADVENTIST MED CTR,

GLENDALE MEMORIAL HOSP

AND HEALTH CTR, TRI CITY

MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO, VALLEY CHILDRENS

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

QUINONES-PEREZ, BIANCA

Provider ID: 206951

Board Certified Specialty: No
BIANCA N QUINONES-PEREZ

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1000

Fax: (760) 547-1021

After Hours Phone: (760)
547-1000

Provider Gender: Female

NPI: 1124360565

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

RUSSELL, SAMUEL

Provider ID: 301251

Board Certified Specialty: No
SAMUEL RUSSELL

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1000

Fax: (760) 547-1021

After Hours Phone: (760)
547-1000

Provider Gender: Male

NPI: 1215564265

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

TODD, SARAH

Provider ID: 302801

Board Certified Specialty: No
SARAH C TODD

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1000

Fax: (760) 547-1021

After Hours Phone: (760)
547-1000

Provider Gender: Female

NPI: 1407299787

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,

SANTA MONICA UCLA MED
CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

D3. Directorio de proveedores especialistas

PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA

Provider ID: 205813

Board Certified Specialty: No
KAMALA VAIDYA

📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

☎ Phone: (760) 547-1000

Fax: (760) 547-1021

🕒 After Hours Phone: (760)
547-1000

Provider Gender: Female

NPI: 1083840920

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

VARGAS, JACLYN

Provider ID: 296485

Board Certified Specialty: No
JACLYN F VARGAS

📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

☎ Phone: (760) 547-1000

Fax: (760) 547-1021

🕒 After Hours Phone: (760)
547-1000

Provider Gender: Female

NPI: 1619359718

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, Los Angeles General
Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

🌐 Website: N/A

PEDIATRIC GASTROENTEROLOGY

CHU, CHRISTOPHER

Provider ID: 301642

Board Certified Specialty: No

CHRISTOPHER CHU

📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

☎ Phone: (760) 547-1020

Fax: (760) 547-1021

🕒 After Hours Phone: (760)
547-1020

Provider Gender: Male

NPI: 1912369273

🗨 Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish, Yue
Chinese

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC PULMONOLOGY

LENHART-PENDERGRASS, PATRICIA

Provider ID: 294643

Board Certified Specialty: No

PATRICIA M

LENHART-PENDERGRASS

📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

☎ Phone: (760) 547-1020

Fax: (760) 547-1021

🕒 After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1144615659

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

D3. Directorio de proveedores especialistas

PHYSICAL MEDICINE / REHABILITATION

RICHARDSON, HENRY

Provider ID: 295852

Board Certified Specialty: No

HENRY A RICHARDSON

3231 WARING CT STE K
OCEANSIDE, CA 92056

Phone: (760) 607-5350

Fax: (760) 607-5365

After Hours Phone: (760)
607-5350

Provider Gender: Male

NPI: 1407052459

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICAL MEDICINE / REHABILITATION

RYAN, KYLE

Provider ID: 275661

Board Certified Specialty: No

KYLE J RYAN

3605 VISTA WAY
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Male

NPI: 1447645742

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

RAMOS, ELENA

Provider ID: 301307

Board Certified Specialty: No
ELENA R RAMOS

605 CROUCH ST BLDG C
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1306489570

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 2\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE

Provider ID: 302455

Board Certified Specialty: No

ANNETTE A RODRIGUES

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1205381845

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

WRIGHT, DEREK

Provider ID: 305530

Board Certified Specialty: No

DEREK J WRIGHT

3231 WARING CT STE K
OCEANSIDE, CA 92056

Phone: (760) 607-5350

Fax: (760) 607-5365


After Hours Phone: (760)

D3. Directorio de proveedores especialistas

607-5350

Provider Gender: Male

NPI: 1629674858

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PSYCHOLOGIST


COOK, SHERYL

Provider ID: 304924

Board Certified Specialty: No

SHERYL G COOK

 619 CROUCH ST STE 100
OCEANSIDE, CA 92054


 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1750420816

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 9:00AM-6:15PM
W 9:00AM-6:00PM

 Website: N/A

PSYCHOLOGIST


JENSEN, BRIAN

Provider ID: 290775

Board Certified Specialty: No

BRIAN M JENSEN

 619 CROUCH ST
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1518138049

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PSYCHOLOGIST


KRAPES, MICHAEL

Provider ID: 290097

Board Certified Specialty: No

MICHAEL B KRAPES

 2210 MESA DR STE 300
OCEANSIDE, CA 92054


 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1215233028

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

REGISTERED PHYSICAL THERAPIST


FARRAR, COURTNEY

Provider ID: 295874

Board Certified Specialty: No

COURTNEY L FARRAR

 3231 WARING CT STE K
OCEANSIDE, CA 92056

 Phone: (760) 607-5350

Fax: (760) 607-5365

 After Hours Phone: (760)
607-5350

Provider Gender: Male

NPI: 1124577952

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 13\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC


CIDAMBI, EMILY

Provider ID: 246469

Board Certified Specialty: No

EMILY O CIDAMBI

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (858) 966-6789

Fax: (858) 966-8519

 After Hours Phone: (858)
966-6789

Provider Gender: Female


NPI: 1659634699

 Provider English Spoken: Y
Cultural Competency: N

D3. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC

PRUSS, ERIKA

Provider ID: 303798

Board Certified Specialty: No
ERIKA L PRUSS

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020

Provider Gender: Female


NPI: 1538402441

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):  3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC


UPASANI, VIDYADHAR

Provider ID: 260954

Board Certified Specialty: No

VIDYADHAR V UPASANI

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020

Provider Gender: Male

NPI: 1548417652

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY PEDIATRIC

FAIRBANKS, TIMOTHY


Provider ID: 205498

Board Certified Specialty: No
TIMOTHY J FAIRBANKS

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020

Provider Gender: Male

NPI: 1407010556

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN


DIEGO, UCSD MEDICAL CTR,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY PEDIATRIC

KLING, KAREN

Provider ID: 206129

Board Certified Specialty: No
KAREN M KLING

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1982775144

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MARY BIRCH HOSP
FOR WOMEN AND

NEWBORNS, NATIONAL
NAVAL MED CTR, SHARP
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

D3. Directorio de proveedores especialistas

American Sign Language (ASL): **BROWNLOW, ROY**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PERRIS


CERTIFIED NURSE PRACTITIONER

BLAND, JACELIS

Provider ID: 296767

Board Certified Specialty: No
JACELIS BLAND

 1675 N PERRIS BLVD STE G1
PERRIS, CA 92571


 Phone: (760) 736-7676

Fax: (760) 736-6744

 After Hours Phone: (760)
736-7676

Provider Gender: Female

NPI: 1801522859

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:30PM


 Website: N/A


POWAY

ANESTHESIOLOGY PAIN MANAGEMENT

Provider ID: 308402

Board Certified Specialty: No
ROY C BROWNLOW

 15725 POMERADO RD STE
201
POWAY, CA 92064


 Phone: (760) 610-0522

Fax: (760) 610-0523

 After Hours Phone: (760)
610-0522

Provider Gender: Male

NPI: 1205949914

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP

AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes


Min/Max Age: 0\None


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY PAIN MANAGEMENT


BROWNLOW, ROY

Provider ID: 308113


Board Certified Specialty: No
ROY C BROWNLOW

 15725 POMERADO RD STE
201

POWAY, CA 92064

 Phone: (760) 610-0522

Fax: (760) 610-0523

 After Hours Phone: (760)
610-0522

Provider Gender: Male

NPI: 1205949914

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP


AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

JOHNSON, CHRISTINE

Provider ID: 295458

Board Certified Specialty: No
CHRISTINE JOHNSON

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000

Fax: (360) 462-2742

 After Hours Phone: (858)
218-3000

Provider Gender: Female

NPI: 1295049229

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PARADISE

D3. Directorio de proveedores especialistas

VALLEY HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 13\None

American Sign Language (ASL): Provider ID: 256378

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


WOLFE, AMANDA


Provider ID: 243582

Board Certified Specialty: No

AMANDA S WOLFE

 15525 POMERADO RD STE
B1
POWAY, CA 92064


 Phone: (858) 457-8333

 After Hours Phone: (858)
457-8333

Provider Gender: Female

NPI: 1063813475

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Russian, Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


WRIGHT, KIMBERLY

Board Certified Specialty: No

KIMBERLY D WRIGHT

 15611 POMERADO RD STE
400

POWAY, CA 92064


 Phone: (858) 675-3200

Fax: (858) 673-1587

 After Hours Phone: (858)
675-3200

Provider Gender: Female

NPI: 1811400708

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

DERMATOLOGY

LIN, SHINKO


Provider ID: 308217

Board Certified Specialty: No

SHINKO K LIN

 15725 POMERADO RD STE
102

POWAY, CA 92064


 Phone: (619) 267-8303


Fax: (619) 267-4835

 After Hours Phone: (619)
267-8303

Provider Gender: Female

NPI: 1205130036

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-4:30PM

 Website: N/A


DERMATOLOGY

LIN, SHINKO


Provider ID: 306320

Board Certified Specialty: No

SHINKO K LIN

 15725 POMERADO RD STE
102

POWAY, CA 92064

 Phone: (619) 267-8303


Fax: (619) 267-4835

 After Hours Phone: (619)
267-8303

Provider Gender: Female

NPI: 1205130036

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

D3. Directorio de proveedores especialistas

8:30AM-4:30PM
Website: N/A

FAMILY PRACTICE

FLINN, SCOTT

Provider ID: 270054
Board Certified Specialty: Yes
SCOTT D FLINN

15611 POMERADO RD STE
400
POWAY, CA 92064

Phone: (858) 675-3100
Fax: (858) 613-2938

After Hours Phone: (858)
675-3100

Provider Gender: Male

NPI: 1184694598

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

NAJAND, SADAF

Provider ID: 270055
Board Certified Specialty: No
SADAF NAJAND

15611 POMERADO RD STE
400
POWAY, CA 92064

Phone: (858) 675-3200

Fax: (858) 613-2938

After Hours Phone: (858)
675-3200

Provider Gender: Female

NPI: 1669769717

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

WHITE, KERI

Provider ID: 269491
Board Certified Specialty: No
KERI L WHITE

15611 POMERADO RD STE
400
POWAY, CA 92064

Phone: (858) 675-3200
Fax: (858) 613-2938

After Hours Phone: (858)
675-3200

Provider Gender: Female

NPI: 1295701159

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

9:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE

CHEN, ANDREW

Provider ID: 269315
Board Certified Specialty: No
ANDREW K CHEN

15611 POMERADO RD STE
400
POWAY, CA 92064

Phone: (858) 675-3100
Fax: (858) 613-2937

After Hours Phone: (858)
675-3100

Provider Gender: Male

NPI: 1134357007

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

THAPER, MOHINDERPAL

Provider ID: 270016
Board Certified Specialty: No
MOHINDERPAL S THAPER

15611 POMERADO RD STE
575
POWAY, CA 92064

Phone: (760) 489-1458

D3. Directorio de proveedores especialistas

Fax: (760) 489-1246

☎ After Hours Phone: (760) 489-1458

Provider Gender: Male

NPI: 1295795037

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Hindi, Punjabi

Cultural Competency: N

Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

INTERVENTIONAL CARDIOLOGY

BAYAT, HAMED

Provider ID: 269450

Board Certified Specialty: No
HAMED BAYAT

📍 15611 POMERADO RD STE 400

POWAY, CA 92064

☎ Phone: (858) 675-3110

Fax: (858) 675-3110

☎ After Hours Phone: (858) 675-3110

Provider Gender: Male

NPI: 1356344196

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: PALOMAR

HEALTH, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 9:00AM-5:00PM

🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES

Provider ID: 206164

Board Certified Specialty: No
CHARLES W SAUER

📍 15615 POMERADO RD
POWAY, CA 92064

☎ Phone: (858) 613-4143

Fax: (858) 613-4539

☎ After Hours Phone: (858) 613-4143

Provider Gender: Male

NPI: 1538388988

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL

CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL

HOSPITAL, SOUTHWEST HEALTHCARE RANCHO

SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

RANCHO SPRINGS HOSPITAL,

SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

WEST, JULIE

Provider ID: 297072

Board Certified Specialty: No
JULIE E WEST

📍 15615 POMERADO RD
POWAY, CA 92064

☎ Phone: (858) 613-4143

Fax: (858) 613-4539

☎ After Hours Phone: (858) 613-4143

Provider Gender: Female

NPI: 1811151848

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

DIEGO
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

D3. Directorio de proveedores especialistas

OBSTETRICS / GYNECOLOGY

COBB, DAMON

Provider ID: 206030

Board Certified Specialty: No

DAMON C COBB

15706 POMERADO RD STE 110

POWAY, CA 92064

Phone: (858) 485-0130

Fax: (858) 485-9424

After Hours Phone: (858) 485-0130

Provider Gender: Male

NPI: 1851435598

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, PALOMAR

MEDICAL CENTER, RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH
9:00AM-4:30PM
F 9:00AM-1:00PM

Website: N/A

OPHTHALMOLOGY

LOZIER, JEFFREY

Provider ID: 270187

Board Certified Specialty: Yes

JEFFREY R LOZIER

15611 POMERADO RD STE 400

POWAY, CA 92064

Phone: (858) 675-3100

Fax: (858) 618-1523

After Hours Phone: (858) 675-3100

Provider Gender: Male

NPI: 1225004450

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

OPTOMETRIST

KIM, MICHELLE

Provider ID: 270014

Board Certified Specialty: No

MICHELLE KIM

15611 POMERADO RD STE 400

POWAY, CA 92064

Phone: (858) 675-3140

Fax: (858) 613-2936

After Hours Phone: (858) 675-3140

Provider Gender: Female

NPI: 1457328825

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

CHATFIELD, ALEXANDRA

Provider ID: 276715

Board Certified Specialty: No

ALEXANDRA J CHATFIELD

15611 POMERADO RD STE 525

POWAY, CA 92064

Phone: (858) 485-0050

Fax: (858) 673-5187

After Hours Phone: (858) 485-0050

Provider Gender: Female

NPI: 1215584628

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PODIATRIST

BRAZIER, SETH

Provider ID: 306398

Board Certified Specialty: No

SETH J BRAZIER

15706 POMERADO RD STE

D3. Directorio de proveedores especialistas

102
POWAY, CA 92064
☎ Phone: (858) 485-1494
☎ Fax: (858) 485-1515
🕒 After Hours Phone: (858) 485-1494
Provider Gender: Male
NPI: 1033554324
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: KAWEAH
DELTA DISTRICT HOSP, SELMA
COMMUNITY HOSPITAL,
ADVENTIST MEDICAL CENTER,
ADVENTIST MED CTR
REEDLEY
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
9:00AM-5:00PM
🌐 Website: N/A

PODIATRIST

HAN, KYOUNG

Provider ID: 296326
Board Certified Specialty: No
KYOUNG M HAN
📍 15706 POMERADO RD STE
102
POWAY, CA 92064
☎ Phone: (858) 485-1494
☎ Fax: (858) 485-1515
🕒 After Hours Phone: (858)
485-1494
Provider Gender: Female
NPI: 1083954671

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Japanese, Korean
Cultural Competency: N
Hospital Affiliation:
SADDLEBACK MEMORIAL
MED CTR, PALOMAR HEALTH,
PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
9:00AM-5:00PM
🌐 Website: N/A

PODIATRIST

READ, TRENTON

Provider ID: 296656
Board Certified Specialty: No
TRENTON READ
📍 15706 POMERADO RD STE
102
POWAY, CA 92064
☎ Phone: (858) 485-1494
☎ Fax: (858) 485-1515
🕒 After Hours Phone: (858)
485-1494
Provider Gender: Male
NPI: 1952963431

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
9:00AM-5:00PM
🌐 Website: N/A

PSYCHOLOGIST

VALLEZ-BARLAM, ANDREA

Provider ID: 290629
Board Certified Specialty: No
ANDREA VALLEZ-BARLAM
📍 13010 POWAY RD
POWAY, CA 92064
☎ Phone: (858) 218-3000
☎ Fax: (858) 633-4688
🕒 After Hours Phone: (858)
218-3000
Provider Gender: Female
NPI: 1710902143
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: German, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
9:00AM-5:00PM
🌐 Website: N/A

RHEUMATOLOGY

RAO, SOUMYA

Provider ID: 46060
Board Certified Specialty: No
SOUMYA G RAO
📍 15611 POMERADO RD STE
400
POWAY, CA 92064
☎ Phone: (858) 675-3150
☎ Fax: (858) 924-1775
🕒 After Hours Phone: (858)

D3. Directorio de proveedores especialistas

675-3150
Provider Gender: Female
NPI: 1033388616
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Kannada,
Russian, Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

RHEUMATOLOGY

REDDY, SMITHA

Provider ID: 269402
Board Certified Specialty: No
SMITHA C REDDY

15725 POMERADO RD STE
117
POWAY, CA 92064

Phone: (858) 312-1717
Fax: (858) 435-0207

After Hours Phone: (858)
312-1717

Provider Gender: Female
NPI: 1750534715

Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Kannada,
Telugu
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, PALOMAR

HEALTH, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS GREEN HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER
 Hours: M-TH
8:00AM-4:00PM
 Website: N/A

SURGERY GENERAL

GROVE, JAY

Provider ID: 305851
Board Certified Specialty: No
JAY R GROVE

15611 POMERADO RD
POWAY, CA 92064

Phone: (858) 675-3100
Fax: (858) 673-5187

After Hours Phone: (858)
675-3100

Provider Gender: Male
NPI: 1912971334

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER, TRI CITY MEDICAL
CTR, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

SURGERY ORTHOPEDIC

BALIKIAN, PHILIP

Provider ID: 119552
Board Certified Specialty: Yes
PHILIP BALIKIAN

15611 POMERADO RD STE
400
POWAY, CA 92064

Phone: (858) 613-8900
Fax: (858) 618-1523

After Hours Phone: (858)
613-8900

Provider Gender: Male
NPI: 1407803687

Provider English Spoken: Y
 Provider Language(s)
Spoken: Armenian, Italian,
Spanish, Vietnamese
Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

BALIKIAN, PHILIP

Provider ID: 257485
Board Certified Specialty: Yes

D3. Directorio de proveedores especialistas

PHILIP BALIKIAN

15611 POMERADO RD STE
400

POWAY, CA 92064

Phone: (858) 613-8900

Fax: (858) 618-1523

After Hours Phone: (858)
613-8900

Provider Gender: Male

NPI: 1407803687

Provider English Spoken: Y

Provider Language(s)
Spoken: Armenian, Italian,
Spanish, Vietnamese

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

BRIED, JAMES

Provider ID: 269500

Board Certified Specialty: No
JAMES M BRIED

15611 POMERADO RD STE
525

POWAY, CA 92064

Phone: (858) 485-0050

Fax: (858) 485-5071

After Hours Phone: (858)
485-0050

Provider Gender: Male

NPI: 1891809257

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RAMONA

CERTIFIED NURSE

PRACTITIONER

SALAS, JESSICA

Provider ID: 269344

Board Certified Specialty: No
JESSICA M SALAS

211 13TH ST

RAMONA, CA 92065

Phone: (760) 789-5160

Fax: (760) 788-7962

After Hours Phone: (760)
789-5160

Provider Gender: Female

NPI: 1356817431

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CHIROPRACTOR

JIMENEZ, CLARIBEL

Provider ID: 307942

Board Certified Specialty: No
CLARIBEL JIMENEZ

220 ROTANZI ST
RAMONA, CA 92065

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1801255484

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

WELLS, TODD

Provider ID: 299118

Board Certified Specialty: No
TODD D WELLS

211 13TH ST

RAMONA, CA 92065

Phone: (760) 789-5160

Fax: (760) 722-5292

After Hours Phone: (760)
789-5160

Provider Gender: Male

NPI: 1952377806

Provider English Spoken: Y


Provider Language(s)

Spoken: Spanish, Tagalog

D3. Directorio de proveedores especialistas

Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

SAN DIEGO

ADOLESCENT MEDICINE


CHELVAKUMAR, GAYATHRI

Provider ID: 296674

Board Certified Specialty: No
GAYATHRI CHELVAKUMAR

 8110 BIRMINGHAM WAY FL 2

SAN DIEGO, CA 92123

 *Phone: (858) 966-8493*

Fax: (858) 966-8818

 *After Hours Phone: (858) 966-8493*

Provider Gender: Female

NPI: 1447473848

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

ALLERGY IMMUNOLOGY


JAMES, CHRISTINE

Provider ID: 284917

Board Certified Specialty: No
CHRISTINE JAMES

 8899 UNIVERSITY CENTER LN

SAN DIEGO, CA 92122

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1144589979

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

ALLERGY IMMUNOLOGY

RIEDL, MARC


Provider ID: 255768


Board Certified Specialty: Yes

MARC A RIEDL

 8899 UNIVERSITY CENTER LN STE 230

SAN DIEGO, CA 92122

 *Phone: (858) 657-5350*

 *After Hours Phone: (858) 657-5350*

Provider Gender: Male

NPI: 1285654889

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

ANESTHESIOLOGY


ALEXANDER, BRENTON


Provider ID: 242303

Board Certified Specialty: No
BRENTON S ALEXANDER

 200 W ARBOR DR

SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

Provider Gender: Male

NPI: 1811366644

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

D3. Directorio de proveedores especialistas

8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA

Provider ID: 300068

Board Certified Specialty: No

TOSHA D BECERRA SONGOLO

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265938724

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

ANESTHESIOLOGY

BRUNO, KELLY

Provider ID: 238903

Board Certified Specialty: No

KELLY A BRUNO

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891130993

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

CANO, SARAH

Provider ID: 200959

Board Certified Specialty: No

SARAH J CANO

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1750517306

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,

SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

CURRAN, BRIAN

Provider ID: 239002

Board Certified Specialty: No

BRIAN P CURRAN

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1710373642

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

FEJLEH, ASHLEY

Provider ID: 269502

Board Certified Specialty: No

ASHLEY N FEJLEH

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

D3. Directorio de proveedores especialistas

926-8273
Provider Gender: Female
NPI: 1609353465
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

ANESTHESIOLOGY

FUNDINGSLAND, BRENT

Provider ID: 280468
Board Certified Specialty: No
BRENT W FUNDINGSLAND
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1831166560
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SADDLEBACK
MEMORIAL MED CTR, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT

PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

ANESTHESIOLOGY

HYLTON, DIANA

Provider ID: 241735
Board Certified Specialty: Yes
DIANA J HYLTON
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1932527751
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

ANESTHESIOLOGY

MEYER, MEGAN

Provider ID: 239607
Board Certified Specialty: No

MEGAN S MEYER
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1720473044
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

ANESTHESIOLOGY

MILLAR, MELISSA

Provider ID: 201308
Board Certified Specialty: No
MELISSA B MILLAR
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (619) 543-5754
🕒 After Hours Phone: (619)
543-5754
Provider Gender: Female
NPI: 1417361981
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS MERCY


D3. Directorio de proveedores especialistas


HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,
SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY


NGUYEN, QUOC SY

Provider ID: 242188

Board Certified Specialty: No
QUOC-SY NGUYEN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871911644

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY


OSWALD, JESSICA

Provider ID: 239600

Board Certified Specialty: No
JESSICA C OSWALD

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427315118

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY

SHAW, SUSANNA

Provider ID: 255316

Board Certified Specialty: No
SUSANNA J SHAW

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1063685477

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY


SORIA, CLAIRE

Provider ID: 243294

Board Certified Specialty: No
CLAIRE S SORIA

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447516414

 Provider English Spoken: Y
Cultural Competency: N




Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

D3. Directorio de proveedores especialistas

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*


ANESTHESIOLOGY

SREJIC, UNA




Provider ID: 206383
Board Certified Specialty: Yes
UNA SREJIC

 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*

Provider Gender: Female
NPI: 1588723860

 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: Stanford
Health Care, UCSF Medical
Center At Mission Bay, UCSF
MEDICAL CENTER AT MOUNT
ZION, UCSF MEDICAL CENTER,
UCSD MEDICAL CTR*


Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*



ANESTHESIOLOGY

SUYDAM, STEVEN




Provider ID: 286569
Board Certified Specialty: No
STEPHEN M SUYDAM

 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)
926-8273*

Provider Gender: Male
NPI: 1386856821

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
*Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
TRI CITY MEDICAL CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP CHULA VISTA MED
CTR, SHARP CHULA VISTA
MED CTR, SHARP CORONADO
HOSP AND HEALTHCARE CTR,
RADY CHILDRENS HOSPITAL
SAN DIEGO, SCRIPPS GREEN
HOSPITAL*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

ANESTHESIOLOGY


TRIVEDI, SURAJ

Provider ID: 246749
Board Certified Specialty: No




SURAJ S TRIVEDI

 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*

Provider Gender: Male
NPI: 1699057885

 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*




Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*


ANESTHESIOLOGY

TSUDA, PAIGE

Provider ID: 271682
Board Certified Specialty: No
PAIGE S TSUDA

 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)
926-8273*

Provider Gender: Female
NPI: 1003261595

 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL*

D3. Directorio de proveedores especialistas

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): ERIC TZENG

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY


TULLY, JEFFREY

Provider ID: 283689

Board Certified Specialty: No

JEFFREY L TULLY

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871912493

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UC DAVIS

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY


TZENG, ERIC

Provider ID: 284577

Board Certified Specialty: No

ERIC TZENG

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1801258264

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY


YODER, ANDREA

Provider ID: 272804

Board Certified Specialty: No

ANDREA R YODER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1629463104

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY



YOUNAN, LAWRENCE

Provider ID: 240870

Board Certified Specialty: No


LAWRENCE J YOUNAN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1922432475

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY PAIN

D3. Directorio de proveedores especialistas

MANAGEMENT

CASTELLANOS, JOEL

Provider ID: 243553

Board Certified Specialty: No

JOEL P CASTELLANOS

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1700296514

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY PAIN

MANAGEMENT

DAIRO, BRANDON

Provider ID: 299880

Board Certified Specialty: No

BRANDON DAIRO

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Phone: (619) 325-1161

Fax: (619) 325-1717

After Hours Phone: (619)
325-1161

Provider Gender: Male

NPI: 1689092470

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\100

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY PAIN

MANAGEMENT

DAIRO, BRANDON

Provider ID: 300089

Board Certified Specialty: No

BRANDON DAIRO

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Phone: (619) 325-1161

Fax: (619) 325-1717

After Hours Phone: (619)
325-1161

Provider Gender: Male

NPI: 1689092470

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CARDIOVASCULAR DISEASE

ALANI, ANAS

Provider ID: 201252

Board Certified Specialty: Yes

ANAS A ALANI

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1154633709

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, ARROWHEAD REGIONAL

MEDICAL CENTER, LOMA

LINDA UNIVERSITY MED CTR,

RIVERSIDE COUNTY

REGIONAL MED CTR, LAC

RANCHO LOS AMIGOS

NATIONAL REHAB CENTER,

LOS ANGELES COUNTY

HARBOR UCLA MEDICAL

CENTER, LOS ANGELES

COUNTY HARBOR UCLA

MEDICAL CENTER

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

D3. Directorio de proveedores especialistas

American Sign Language (ASL): **CASTELLANOS, LUIS**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CARDIOVASCULAR DISEASE


CASTELLANOS, LUIS

Provider ID: 211764

Board Certified Specialty: No

LUIS R CASTELLANOS

 330 LEWIS ST FL 3
SAN DIEGO, CA 92103


 Phone: (858) 657-8530

Fax: (619) 543-2287

 After Hours Phone: (858)
657-8530

Provider Gender: Male

NPI: 1013059286

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, PIONEERS MEMORIAL

HOSPITAL, EL CENTRO

REGIONAL MEDICAL CENTER


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CARDIOVASCULAR DISEASE

Provider ID: 211765

Board Certified Specialty: No

LUIS R CASTELLANOS

 16950 VIA TAZON
SAN DIEGO, CA 92127


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1013059286

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, PIONEERS MEMORIAL

HOSPITAL, EL CENTRO

REGIONAL MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CARDIOVASCULAR DISEASE


LERNER, JONATHAN

Provider ID: 309267

Board Certified Specialty: No

JONATHAN H LERNER

 412 WASHINGTON ST
SAN DIEGO, CA 92103

 Phone: (619) 616-2100

Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1962899823

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CARDIOVASCULAR DISEASE


LERNER, JONATHAN

Provider ID: 303447

Board Certified Specialty: No

JONATHAN H LERNER

 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

 Phone: (619) 616-2100

Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1962899823

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

CARDIOVASCULAR DISEASE


MIZZELL, ANNA

Provider ID: 214020

*Board Certified Specialty: No
ANNA M MIZZELL*

 16950 VIA TAZON
SAN DIEGO, CA 92127

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1851561021

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: UCSD
MEDICAL CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


CARDIOVASCULAR DISEASE

PHREANER, NICHOLAS

Provider ID: 239946

*Board Certified Specialty: No
NICHOLAS J PHREANER*

 16950 VIA TAZON
SAN DIEGO, CA 92127

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)*

926-8273

Provider Gender: Male

NPI: 1023373040

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL
CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


CARDIOVASCULAR DISEASE

PROHASKA, THOMAS

Provider ID: 299912

*Board Certified Specialty: No
THOMAS A PROHASKA*

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1861889644

 *Provider English Spoken: Y
Cultural Competency: N*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

CARDIOVASCULAR DISEASE


SHEREV, DIMITRI

Provider ID: 301306


*Board Certified Specialty: No
DIMITRI A SHEREV*

 6402 EL CAJON BLVD STE
100

SAN DIEGO, CA 92115



 *Phone: (619) 582-4490*

Fax: (519) 582-4737

 *After Hours Phone: (619)
582-4490*

Provider Gender: Male

NPI: 1154323996

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Bulgarian, Russian,
Spanish*

Cultural Competency: N

*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,*

GROSSMONT HOSPITAL,

ALVARADO COMMUNITY

HOSPITAL, SHARP MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

ALVARADO HOSPITAL LLC,

SHARP CHULA VISTA MED

CTR, SHARP CHULA VISTA

MED CTR, TRI CITY MEDICAL

CTR, SCRIPPS MERCY

HOSPITAL CHULA VISTA, Sharp


Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

D3. Directorio de proveedores especialistas

8:00AM-5:00PM
Website: N/A

CARDIOVASCULAR DISEASE

YEANG, CALVIN

Provider ID: 238822

Board Certified Specialty: No
CALVIN YEANG

16950 VIA TAZON

SAN DIEGO, CA 92127

Phone: (858) 657-8530

After Hours Phone: (858)
657-8530

Provider Gender: Male

NPI: 1598011058

Provider English Spoken: Y

Provider Language(s)

Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 277967

Board Certified Specialty: No
JACQUELINE ARELLANO

9333 GENESEE AVE STE
200

SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 277968

Board Certified Specialty: No
JACQUELINE ARELLANO

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304137

Board Certified Specialty: No
JACQUELINE ARELLANO

4910 DIRECTORS PL

SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304138

Board Certified Specialty: No
JACQUELINE ARELLANO

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

D3. Directorio de proveedores especialistas

NPI: 1104129485

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 277966

Board Certified Specialty: No

JACQUELINE ARELLANO

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

CRAFT, KEVIN

Provider ID: 290942

Board Certified Specialty: No

KEVIN E CRAFT

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1659745610

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 277701

Board Certified Specialty: No

FIDES Q JULIAN

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

Provider English Spoken: Y

Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 277700

Board Certified Specialty: No

FIDES Q JULIAN

9333 GENESEE AVE STE
200

SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

D3. Directorio de proveedores especialistas


 *PROVIDER*
Hours: M-F
8:00AM-5:00PM
 *Website: N/A*

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 277699
Board Certified Specialty: No
FIDES Q JULIAN


 330 LEWIS ST
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)*
926-8273

Provider Gender: Female

NPI: 1407401128

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM


 *Website: N/A*

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304132
Board Certified Specialty: No
FIDES Q JULIAN

 200 W ARBOR DR
SAN DIEGO, CA 92103


 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)*
926-8273

Provider Gender: Female

NPI: 1407401128

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER


 *Website: N/A*

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304131
Board Certified Specialty: No
FIDES Q JULIAN


 4910 DIRECTORS PL
SAN DIEGO, CA 92121

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)*
926-8273

Provider Gender: Female

NPI: 1407401128

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER


 *Website: N/A*

CERTIFIED ACUPUNCTURIST

LAM, KHANH

Provider ID: 295380
Board Certified Specialty: No
KHANH M LAM

 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

 *Phone: (619) 325-1161*

Fax: (619) 325-1717

 *After Hours Phone: (619)*
325-1161

Provider Gender: Male

NPI: 1649594979

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Chinese, French,
Vietnamese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

CERTIFIED ACUPUNCTURIST

SEITZ, GRETCHEN

Provider ID: 246474
Board Certified Specialty: No
GRETCHEN E SEITZ

 9995 CARMEL MOUNTAIN
RD STE B10-B11

D3. Directorio de proveedores especialistas

SAN DIEGO, CA 92129
☎ Phone: (844) 200-2426
Fax: (858) 240-6470
📞 After Hours Phone: (844) 200-2426
Provider Gender: Female
NPI: 1396876959
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM
🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

AGUILA, YESENIA

Provider ID: 304624
Board Certified Specialty: No
YESENIA C AGUILA
📍 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
☎ Phone: (619) 266-3332
Fax: (619) 266-6000
📞 After Hours Phone: (619) 266-3332
Provider Gender: Female
NPI: 1245966092
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

ALSTEEN, STEPHANIE

Provider ID: 291389
Board Certified Specialty: No
STEPHANIE D ALSTEEN
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1013680982
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

AMOS, MARIA

Provider ID: 291439
Board Certified Specialty: No
MARIA AMOS
📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1235891953
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

ARVIZU, MARGARITA

Provider ID: 307976
Board Certified Specialty: No
MARGARITA ARVIZU
📍 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
☎ Phone: (844) 200-2426
Fax: (619) 474-4008
📞 After Hours Phone: (844) 200-2426
Provider Gender: Female
NPI: 1558058636
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-6:00PM
🌐 Website: N/A

D3. Directorio de proveedores especialistas

CERTIFIED NURSE PRACTITIONER

BAKER, TANYA

Provider ID: 255625

Board Certified Specialty: No
TANYA E BAKER

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (858) 534-8019

After Hours Phone: (858)
534-8019

Provider Gender: Female

NPI: 1699184259

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

BENARD, ROBERT

Provider ID: 268229

Board Certified Specialty: No
ROBERT A BENARD

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1184027724

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UNIVERSITY HSP
OF SAN DIEGO CO, Highland

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

BILOTTA, NATALIE

Provider ID: 291418

Board Certified Specialty: No
NATALIE J BILOTTA

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1144809393

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RIVERSIDE
COMMUNITY HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE PRACTITIONER

BROWN, VICTORIA

Provider ID: 307668

Board Certified Specialty: No
VICTORIA R BROWN

350 DICKINSON ST
SAN DIEGO, CA 92103

Phone: (800) 922-6827

After Hours Phone: (800)
922-6827

Provider Gender: Female

NPI: 1750033890

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE PRACTITIONER

BROWN, VICTORIA

Provider ID: 307669

Board Certified Specialty: No
VICTORIA R BROWN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1750033890

Provider English Spoken: Y

D3. Directorio de proveedores especialistas

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): ANH T BUI
N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*



CERTIFIED NURSE **PRACTITIONER**

BUENROSTRO, CHRISTINA


Provider ID: 243718
Board Certified Specialty: No
CHRISTINA BUENROSTRO


 4168 FRONT ST
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1851749253

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*



CERTIFIED NURSE **PRACTITIONER**

BUI, ANH

Provider ID: 304272
Board Certified Specialty: No


 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 810-8700*
Fax: (858) 633-4680
 *After Hours Phone: (858) 810-8700*

Provider Gender: Male
NPI: 1184309684

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Vietnamese*
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 14\None
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*



CERTIFIED NURSE **PRACTITIONER**

BUI, ANH

Provider ID: 304273
Board Certified Specialty: No
ANH T BUI


 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
Fax: (858) 633-4680
 *After Hours Phone: (858) 279-0925*

Provider Gender: Male
NPI: 1184309684

 *Provider English Spoken: Y*
 *Provider Language(s)*

Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 14\None
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

CERTIFIED NURSE **PRACTITIONER**



CAMARGO-LOWTHERS, ANGELICA

Provider ID: 295914
Board Certified Specialty: No
ANGELICA M

CAMARGO-LOWTHERS
 8010 FROST ST STE 220
SAN DIEGO, CA 92123
 *Phone: (858) 650-5000*
Fax: (858) 636-2903

 *After Hours Phone: (858) 650-5000*

Provider Gender: Female
NPI: 1912982539

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

CERTIFIED NURSE **PRACTITIONER**

D3. Directorio de proveedores especialistas

**CAMARGO-LOWTHERS,
ANGELICA**

Provider ID: 54944
Board Certified Specialty: No
ANGELICA M

CAMARGO-LOWTHERS

8010 FROST ST STE 510
SAN DIEGO, CA 92123

Phone: (858) 637-4700

Fax: (858) 637-4701

After Hours Phone: (858)
637-4700

Provider Gender: Female

NPI: 1912982539

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

**CAMARGO-LOWTHERS,
ANGELICA**

Provider ID: 307993

Board Certified Specialty: No
ANGELICA M

CAMARGO-LOWTHERS

8010 FROST ST STE 100
SAN DIEGO, CA 92123

Phone: (858) 640-5000

Fax: (858) 636-2903

After Hours Phone: (858)
640-5000

Provider Gender: Female

NPI: 1912982539

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

CAPOZZI, JENNIFER

Provider ID: 241031

Board Certified Specialty: No
JENNIFER E CAPOZZI

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1336258276

Provider English Spoken: Y

Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHANTALA, ELIZABETH

Provider ID: 291305

Board Certified Specialty: No
ELIZABETH A CHANTALA

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1942430442

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHAVEZ, ALEXANDRIA

Provider ID: 243357

Board Certified Specialty: No
ALEXANDRIA D CHAVEZ

4510 EXECUTIVE DR STE 7

SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1811543622

Provider English Spoken: Y


Cultural Competency: N


D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

CHEATHAM, BRITTANY

Provider ID: 291461

Board Certified Specialty: No
BRITTANY L CHEATHAM

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1184111684

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE PRACTITIONER

CHOATE, BERNADETTE


Provider ID: 286368

Board Certified Specialty: No
BERNADETTE R CHOATE

 4303 LA JOLLA VILLAGE

DR STE 2110

SAN DIEGO, CA 92122

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104173558

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

CHOATE, BERNADETTE

Provider ID: 286369

Board Certified Specialty: No
BERNADETTE R CHOATE

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104173558

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

COLEMAN, PAGE

Provider ID: 304288

Board Certified Specialty: No
PAGE COLEMAN

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105
 Phone: (619) 280-2058

Fax: (858) 633-4682

 After Hours Phone: (619)
280-2058

Provider Gender: Female

NPI: 1871365312


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

SA 8:00AM-2:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER

D3. Directorio de proveedores especialistas

CONNER, PAMELA

Provider ID: 299930

Board Certified Specialty: No

PAMELA M CONNER

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770558967

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

CONNOR, CAROLINE

Provider ID: 279835

Board Certified Specialty: No

CAROLINE L CONNOR

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1609081710

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

CONNOR, CAROLINE

Provider ID: 279836

Board Certified Specialty: No

CAROLINE L CONNOR

6030 VILLAGE WAY
SAN DIEGO, CA 92130

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1609081710

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

COSINO, ANJELICA

Provider ID: 201309

Board Certified Specialty: No

ANJELICA T COSINO

200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295238749

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

DAVIES, SUMMER

Provider ID: 253692

Board Certified Specialty: No

SUMMER R DAVIES

8899 UNIVERSITY CENTER
LN STE 220
SAN DIEGO, CA 92122

Phone: (800) 926-8273

D3. Directorio de proveedores especialistas

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1679850671

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

DAVIS, JANET

Provider ID: 255796

Board Certified Specialty: No
JANET M DAVIS

📍 330 LEWIS ST
SAN DIEGO, CA 92103

☎ Phone: (619) 471-9250
Fax: (619) 471-9275

☎ After Hours Phone: (619)
471-9250

Provider Gender: Female

NPI: 1164616280

🗉 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

DE DIOS, SARAH JANE

Provider ID: 300051

Board Certified Specialty: No
SARAH JANE J DE DIOS

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528632742

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

DEL VECCHIO, MEGAN

Provider ID: 301726

Board Certified Specialty: No
MEGAN J DEL VECCHIO

📍 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1437662863

🗉 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

DEL VECCHIO, MEGAN

Provider ID: 301725

Board Certified Specialty: No
MEGAN J DEL VECCHIO

📍 4510 EXECUTIVE DR
SAN DIEGO, CA 92121

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1437662863

🗉 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

DEUTSCH, KAREN

D3. Directorio de proveedores especialistas

Provider ID: 247981

Board Certified Specialty: No
KAREN G DEUTSCH

330 LEWIS ST

SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1740517127

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

DEUTSCH, KAREN

Provider ID: 247980

Board Certified Specialty: No
KAREN G DEUTSCH

4168 FRONT ST FL 3

SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1740517127

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

DOAN, ANGELA

Provider ID: 291425

Board Certified Specialty: No
ANGELA Q DOAN

4168 FRONT ST

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639638968

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

DOAN, ANGELA

Provider ID: 291426

Board Certified Specialty: No
ANGELA Q DOAN

4510 EXECUTIVE DR

SAN DIEGO, CA 92121

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

Provider Gender: Female

NPI: 1639638968

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

DRISCOLL, KARRIE

Provider ID: 286345

Board Certified Specialty: No
KARRIE A DRISCOLL

4303 LA JOLLA VILLAGE

DR STE 2110

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1396085098




Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

D3. Directorio de proveedores especialistas

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE


PRACTITIONER

DRISCOLL, SUSAN

Provider ID: 298968

Board Certified Specialty: No
SUSAN D DRISCOLL

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173


 Phone: (619) 662-4100

Fax: (619) 758-3384

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1477755684

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


DWYER, ERIN

Provider ID: 269863


Board Certified Specialty: No
ERIN DWYER

 4060 4TH AVE STE 310

SAN DIEGO, CA 92103


 Phone: (619) 297-4707

Fax: (858) 429-7927

 After Hours Phone: (619)
297-4707

Provider Gender: Female

NPI: 1003260894

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


ECLARINO, GALELEO

Provider ID: 296764

Board Certified Specialty: No
GALELEO E ECLARINO

 9995 CARMEL MOUNTAIN
RD STE B1011

SAN DIEGO, CA 92129


 Phone: (844) 200-2426

Fax: (858) 240-6470

 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1518687748

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

ERICKSON, LISA

Provider ID: 278982

Board Certified Specialty: No
LISA K ERICKSON

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1669442182

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

ERICKSON, LISA




Provider ID: 287444

Board Certified Specialty: No
LISA K ERICKSON

D3. Directorio de proveedores especialistas

 4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1669442182

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

FELD, KEREN
Provider ID: 297672
Board Certified Specialty: No
KEREN E FELD

 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
Fax: (858) 633-4681
 After Hours Phone: (619)
563-0250




Provider Gender: Female
NPI: 1730835083

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):


N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER **FISHER, SLOANE**


Provider ID: 301585
Board Certified Specialty: No
SLOANE FISHER

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800

Provider Gender: Female
NPI: 1538807003




 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, CHILDRENS HOSP OF
LOS ANGELES


Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL):




N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

CERTIFIED NURSE PRACTITIONER

GARTH, MELISSA
Provider ID: 274053
Board Certified Specialty: No
MELISSA A GARTH

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1689232977

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER **GIORGI, ASHLEY**

Provider ID: 304877
Board Certified Specialty: No
ASHLEY G GIORGI

 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
Fax: (858) 633-4681
 After Hours Phone: (619)
563-0250


Provider Gender: Female
NPI: 1952174203

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

D3. Directorio de proveedores especialistas

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

GOMEZ, LESLIE

Provider ID: 299468

Board Certified Specialty: No
LESLIE N GOMEZ

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528578713

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE PRACTITIONER

GOMEZ, LESLIE


Provider ID: 299467

Board Certified Specialty: No
LESLIE N GOMEZ

 8899 UNIVERSITY CENTER

LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528578713

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


CERTIFIED NURSE PRACTITIONER

GOMEZ, LESLIE

Provider ID: 299466

Board Certified Specialty: No
LESLIE N GOMEZ

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528578713

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


CERTIFIED NURSE PRACTITIONER

HA, THU

Provider ID: 293261

Board Certified Specialty: No
THU T HA

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700
Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1346443983

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


CERTIFIED NURSE PRACTITIONER


HA, THU

Provider ID: 293260

Board Certified Specialty: No
THU T HA

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925
Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

D3. Directorio de proveedores especialistas

Provider Gender: Female

NPI: 1346443983

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


HARKNESS, RUMIKO

Provider ID: 208841

Board Certified Specialty: No
RUMIKO HARKNESS


 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1487785093

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Japanese


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

HAROUSH, GAL


Provider ID: 302475

Board Certified Specialty: No
GAL HAROUSH

 4973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1992461230


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

HART, BECKY

Provider ID: 305337

Board Certified Specialty: No
BECKY M HART

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

Fax: (619) 687-1067

 After Hours Phone: (619)
233-8500

Provider Gender: Female

NPI: 1316626344


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

HEAD, KRISTIN


Provider ID: 268656

Board Certified Specialty: No
KRISTIN N HEAD

 7920 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 966-7484

Fax: (858) 966-4064

 After Hours Phone: (858)
966-7484

Provider Gender: Female

NPI: 1699078923

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HEFNER, ANNA

D3. Directorio de proveedores especialistas

Provider ID: 308420

Board Certified Specialty: No
ANNA M HEFNER

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (619) 434-1613

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1588913537

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-6:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HILL, GENIELYN

Provider ID: 299144

Board Certified Specialty: No
GENIELYN M HILL

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (619) 434-1613

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1710632435

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HILLIARD, THESALONICA

Provider ID: 284022

Board Certified Specialty: No

THESALONICA P HILLIARD

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (858) 578-4417

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1861956724

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HOOPER, BONNIE

Provider ID: 275254

Board Certified Specialty: No

BONNIE J HOOPER

9339 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Phone: (858) 454-4300

Fax: (858) 454-5088

After Hours Phone: (858)
454-4300

Provider Gender: Female

NPI: 1821062878

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HOOPER, BONNIE

Provider ID: 307208

Board Certified Specialty: No

BONNIE J HOOPER

9095 RIO SAN DIEGO DR
STE 300

SAN DIEGO, CA 92108

Phone: (619) 298-9809

Fax: (619) 298-9823

After Hours Phone: (619)

D3. Directorio de proveedores especialistas

298-9809
Provider Gender: Female
NPI: 1821062878
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA

Provider ID: 295393
Board Certified Specialty: No
MARTHA A IBARRA

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700

Provider Gender: Female
NPI: 1114957289

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes
Min/Max Age: 14\None
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
 Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W 8:30AM-5:30PM
TH 8:30AM-8:30PM
F 8:30AM-5:30PM
SA 9:00AM-4:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA

Provider ID: 295392
Board Certified Specialty: No
MARTHA A IBARRA

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Female
NPI: 1114957289

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes
Min/Max Age: 14\None
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
 Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W 8:30AM-5:30PM
TH 8:30AM-8:30PM

F 8:30AM-5:30PM
SA 9:00AM-4:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

JONES, CHRISTA

Provider ID: 275563
Board Certified Specialty: No
CHRISTA E JONES

200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1396371431

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

KEMP, KATHRINE

Provider ID: 301276
Board Certified Specialty: No
KATHRINE E KEMP

1501 IMPERIAL AVE

D3. Directorio de proveedores especialistas

SAN DIEGO, CA 92101
☎ Phone: (619) 645-6405
Fax: (619) 687-1067
🕒 After Hours Phone: (619) 645-6405

Provider Gender: Female
NPI: 1316615313

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

KI, TRISH

Provider ID: 293293
Board Certified Specialty: No
TRISH H KI

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 279-0925
Fax: (858) 633-4680

🕒 After Hours Phone: (858) 279-0925

Provider Gender: Female
NPI: 1376840199

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

KI, TRISH

Provider ID: 293294
Board Certified Specialty: No
TRISH H KI

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 810-8700
Fax: (858) 633-4680

🕒 After Hours Phone: (858) 810-8700

Provider Gender: Female
NPI: 1376840199

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

KIDANE, ZINNIA

Provider ID: 302426
Board Certified Specialty: No
ZINNIA A KIDANE

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 279-0925
Fax: (858) 633-4680

🕒 After Hours Phone: (858)

279-0925
Provider Gender: Female
NPI: 1780334110
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

KIDANE, ZINNIA

Provider ID: 302427
Board Certified Specialty: No
ZINNIA A KIDANE

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 810-8700
Fax: (858) 633-4680

🕒 After Hours Phone: (858) 810-8700

Provider Gender: Female
NPI: 1780334110

☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

D3. Directorio de proveedores especialistas

PRACTITIONER

LAFORTEZA, JOZELLE

Provider ID: 202666

Board Certified Specialty: No
JOZELLE B LAFORTEZA

📍 9333 GENESEE AVE STE 200

SAN DIEGO, CA 92121

📞 Phone: (800) 926-8273

📞 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1538578307

🗒️ Provider English Spoken: Y

🗒️ Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

LANE, KIMBERLY

Provider ID: 301601

Board Certified Specialty: No
KIMBERLY A LANE

📍 3444 KEARNY VILLA RD STE 202

SAN DIEGO, CA 92123

📞 Phone: (858) 430-1101

Fax: (858) 429-7929

📞 After Hours Phone: (858)

430-1101

Provider Gender: Female

NPI: 1457670119

🗒️ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

LANE, KIMBERLY

Provider ID: 301600

Board Certified Specialty: No
KIMBERLY A LANE

📍 3444 KEARNY VILLA RD STE 201

SAN DIEGO, CA 92123

📞 Phone: (858) 430-1101

Fax: (858) 221-5049

📞 After Hours Phone: (858)
430-1101

Provider Gender: Female

NPI: 1457670119

🗒️ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

LANE, KIMBERLY

Provider ID: 301597

Board Certified Specialty: No
KIMBERLY A LANE

📍 11770 BERNARDO PLAZA CT STE 270

SAN DIEGO, CA 92128

📞 Phone: (858) 485-0554

Fax: (858) 429-7933

📞 After Hours Phone: (858)
485-0554

Provider Gender: Female

NPI: 1457670119

🗒️ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

LANE, KIMBERLY

Provider ID: 301603

Board Certified Specialty: No
KIMBERLY A LANE

📍 4060 4TH AVE STE 310

SAN DIEGO, CA 92103

📞 Phone: (619) 297-4707

Fax: (858) 429-7927

📞 After Hours Phone: (619)
297-4707

Provider Gender: Female

NPI: 1457670119


🗒️ Provider English Spoken: Y

D3. Directorio de proveedores especialistas

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None

American Sign Language (ASL): N
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE

PRACTITIONER

MANRIQUEZ, LISETTE

Provider ID: 307103
Board Certified Specialty: No
LISETTE MANRIQUEZ

 286 EUCLID AVE STE 302
SAN DIEGO, CA 92114


 Phone: (619) 662-4100

Fax: (619) 428-7952

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1760058911

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE

PRACTITIONER

MANZO, CORINA

Provider ID: 304481
Board Certified Specialty: No
CORINA L MANZO

 2630 1ST AVE
SAN DIEGO, CA 92103


 Phone: (619) 234-2158

Fax: (619) 234-0206

 After Hours Phone: (619)
234-2158

Provider Gender: Female

NPI: 1669087326

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE

PRACTITIONER

MARTINEZ, CAROLYN

Provider ID: 293345
Board Certified Specialty: No
CAROLYN M MARTINEZ

 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1609101997

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


CERTIFIED NURSE

PRACTITIONER

MEDINA, RUBELETA

Provider ID: 296673
Board Certified Specialty: No
RUBELETA S MEDINA

 9995 CARMEL MOUNTAIN
RD STE B1011
SAN DIEGO, CA 92129

 Phone: (844) 200-2426

Fax: (858) 240-6470

 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1881153963

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

D3. Directorio de proveedores especialistas

PRACTITIONER

MENDOZA, GRETEL MARIE

Provider ID: 303202

Board Certified Specialty: No
GRETEL MARIE G MENDOZA

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (858) 578-4417

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1245652387

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-6:00PM
F 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MICK, SHARON

Provider ID: 299647

Board Certified Specialty: No
SHARON L MICK

16950 VIA TAZON

SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891061966

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MICK, SHARON

Provider ID: 299649

Board Certified Specialty: No
SHARON L MICK

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891061966

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MICK, SHARON

Provider ID: 299648

Board Certified Specialty: No
SHARON L MICK

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891061966

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MIDORO, ABEGAILLE

Provider ID: 303828

Board Certified Specialty: No
ABEGAILLE A MIDORO

9855 ERMA RD STE 105
SAN DIEGO, CA 92131

Phone: (844) 200-2426


Fax: (858) 536-8034

After Hours Phone: (844)
200-2426

D3. Directorio de proveedores especialistas

Provider Gender: Female

NPI: 1952925851

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU

8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MIDORO, ABEGAILLE


Provider ID: 303829

Board Certified Specialty: No

ABEGAILLE A MIDORO

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126


 Phone: (844) 200-2426

Fax: (858) 578-4417

 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1952925851

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-TU

8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MILLER, EVA


Provider ID: 255833


Board Certified Specialty: No

EVA M MILLER

 330 LEWIS ST


SAN DIEGO, CA 92103

 Phone: (619) 471-9210

 After Hours Phone: (619)
471-9210

Provider Gender: Female

NPI: 1043492523

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MOHEBBI, ATHENA


Provider ID: 201325

Board Certified Specialty: No

ATHENA MOHEBBI

 4520 EXECUTIVE DR STE
P2

SAN DIEGO, CA 92121


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1952627176

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MORAN, TIFFANY


Provider ID: 304275

Board Certified Specialty: No

TIFFANY T MORAN

 2630 1ST AVE

SAN DIEGO, CA 92103

 Phone: (619) 234-2158

Fax: (619) 234-0206

 After Hours Phone: (619)
234-2158

Provider Gender: Female

NPI: 1730730649

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

D3. Directorio de proveedores especialistas


 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

MULVEY, CAOILFHIONN


Provider ID: 291419
Board Certified Specialty: No
CAOILFHIONN M MULVEY

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1184386864

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

 Website: N/A


CERTIFIED NURSE PRACTITIONER

NEJATI, FRESHTA


Provider ID: 214112
Board Certified Specialty: No
FRESHTA NEJATI

 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131

 Phone: (800) 926-8273


 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1831598119

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM


 Website: N/A

CERTIFIED NURSE PRACTITIONER

NETZEL, JENNIFER


Provider ID: 291347
Board Certified Specialty: No
JENNIFER J NETZEL

 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1336896232

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


CERTIFIED NURSE PRACTITIONER

NETZEL, JENNIFER

Provider ID: 291348


Board Certified Specialty: No
JENNIFER J NETZEL

 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122


 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1336896232

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A

CERTIFIED NURSE PRACTITIONER

NETZEL, JENNIFER


Provider ID: 291346
Board Certified Specialty: No
JENNIFER J NETZEL

 9333 GENESEE AVE
SAN DIEGO, CA 92121

 Phone: (800) 926-8273
Fax: (888) 539-8781



 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1336896232

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

D3. Directorio de proveedores especialistas


 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*


CERTIFIED NURSE PRACTITIONER

NOVENO, HILARIO JR

Provider ID: 286911

Board Certified Specialty: No HILARIO JR C NOVENO JR



 4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Male

NPI: 1124486865

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, Spanish, Tagalog*


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*


CERTIFIED NURSE PRACTITIONER

NOVENO, HILARIO JR

Provider ID: 286912

Board Certified Specialty: No HILARIO JR C NOVENO JR


 4168 FRONT ST
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Male

NPI: 1124486865

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, Spanish, Tagalog*


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

CERTIFIED NURSE PRACTITIONER


O'CONNELL, STEFANY

Provider ID: 296846

Board Certified Specialty: No

STEFANY I O'CONNELL



 1016 OUTER RD
SAN DIEGO, CA 92154

 *Phone: (619) 429-3733*
Fax: (619) 628-5550

 *After Hours Phone: (619) 429-3733*

Provider Gender: Female

NPI: 1386378479

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*


CERTIFIED NURSE PRACTITIONER

OREJEL, EDITH

Provider ID: 296716

Board Certified Specialty: No EDITH G OREJEL



 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*
Fax: (858) 633-4680

 *After Hours Phone: (858) 279-0925*

Provider Gender: Female

NPI: 1073278180

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish, Spanish*

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M 8:30AM-5:30PM
TU 5:30PM-8:30PM
W 8:30AM-5:30PM
TH 5:30PM-8:30PM
F 8:30AM-5:30PM
SA 9:00AM-4:00PM*

 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

OREJEL, EDITH

D3. Directorio de proveedores especialistas

Provider ID: 296715

Board Certified Specialty: No

EDITH G OREJEL

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1073278180

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM
TU 5:30PM-8:30PM
W 8:30AM-5:30PM
TH 5:30PM-8:30PM
F 8:30AM-5:30PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

ORPILLA, IMELDA

Provider ID: 282962

Board Certified Specialty: No

IMELDA M ORPILLA

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (858) 578-4417

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1790785988

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:30AM-5:30PM
W 8:30AM-7:00PM
TH-F 8:30AM-5:30PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

ORPILLA, IMELDA

Provider ID: 243506

Board Certified Specialty: No

IMELDA M ORPILLA

9995 CARMEL MOUNTAIN
RD STE B10-B11

SAN DIEGO, CA 92129

Phone: (214) 590-5306

Fax: (858) 240-6470

After Hours Phone: (214)
590-5306

Provider Gender: Female

NPI: 1790785988

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

PAI, SARAH

Provider ID: 276870

Board Certified Specialty: No

SARAH A PAI

350 DICKINSON ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255762167

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

PATIAG, DANIEL

Provider ID: 293249




Board Certified Specialty: No

DANIEL B PATIAG

D3. Directorio de proveedores especialistas

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700
Provider Gender: Male
NPI: 1073169769

Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 14\None
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER




PATIAG, DANIEL

Provider ID: 293248
Board Certified Specialty: No
DANIEL B PATIAG

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680
 After Hours Phone: (858)
279-0925
Provider Gender: Male
NPI: 1073169769

Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 14\None

American Sign Language (ASL): Provider ID: 286222
N




 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER




PEREZ, ALLYSSA

Provider ID: 286223
Board Certified Specialty: No
ALLYSSA M PEREZ

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1497358915

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):


N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER




PEREZ, ALLYSSA

Board Certified Specialty: No
ALLYSSA M PEREZ

 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1497358915

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

PEREZ, ALLYSSA

Provider ID: 304162
Board Certified Specialty: No
ALLYSSA M PEREZ

 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1497358915

D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

*THORNTON, UCSD MEDICAL
CTR*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER

PETTIS, BETH

Provider ID: 286878

Board Certified Specialty: No

BETH S PETTIS

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1326638958

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM

 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER

RAJAEI, NILOUFAR


Provider ID: 291437

Board Certified Specialty: No

NILOUFAR RAJAEI

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122


 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1275904047

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Persian*


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER


RANDLE, CARRIE


Provider ID: 299296

Board Certified Specialty: No

CARRIE A RANDLE

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 *Phone: (858) 966-8800*

 *After Hours Phone: (858)
966-8800*

Provider Gender: Female

NPI: 1558557348

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: NAVAL


MEDICAL CTR SD RBE, RADY

*CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: No

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER


RIEGO, SUZANNE


Provider ID: 214477

Board Certified Specialty: No

SUZANNE N RIEGO

 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

 *Phone: (858) 292-7200*

 *After Hours Phone: (858)
292-7200*

Provider Gender: Female

NPI: 1144453754

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM

 *Website: N/A*

D3. Directorio de proveedores especialistas

CERTIFIED NURSE

PRACTITIONER

ROBERTSON, RACHAEL

Provider ID: 286940

Board Certified Specialty: No

RACHAEL A ROBERTSON

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1659912327

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

RODENMEYER, EVE

Provider ID: 295956

Board Certified Specialty: No

EVE RODENMEYER

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

Fax: (858) 633-4682

After Hours Phone: (619)
280-2058

Provider Gender: Female

NPI: 1225782022

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

ROSCOE, SYDNEY

Provider ID: 305039

Board Certified Specialty: No
SYDNEY R ROSCOE

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1992448864

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

ROSCOE, SYDNEY

Provider ID: 305038

Board Certified Specialty: No
SYDNEY R ROSCOE

350 DICKINSON ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1992448864

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

ROSCOE, SYDNEY

Provider ID: 305037

Board Certified Specialty: No
SYDNEY R ROSCOE

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1992448864

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

D3. Directorio de proveedores especialistas

CERTIFIED NURSE


PRACTITIONER

ROSS, CRYSTAL

Provider ID: 287763

Board Certified Specialty: No
CRYSTAL H ROSS

 350 DICKINSON ST
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1548683378

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

ROSS, CRYSTAL

Provider ID: 302559

Board Certified Specialty: No
CRYSTAL H ROSS

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250


Fax: (858) 633-4681

 After Hours Phone: (619)

563-0250

Provider Gender: Female

NPI: 1548683378

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

SA 8:00AM-2:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

ROSSI, CATHERINE

Provider ID: 291445

Board Certified Specialty: No
CATHERINE R ROSSI

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1649934126

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

ROZO, JOSE

Provider ID: 300037

Board Certified Specialty: No
JOSE A ROZO

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1528787132

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

SABIN, NANCY

Provider ID: 293288

Board Certified Specialty: No
NANCY J SABIN

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1285732586

D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY

Provider ID: 293287
Board Certified Specialty: No
NANCY J SABIN
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
Fax: (858) 633-4680
 *After Hours Phone: (858) 279-0925*




Provider Gender: Female
NPI: 1285732586


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*



CERTIFIED NURSE PRACTITIONER

SANACORA, RACHEL

Provider ID: 297728

Board Certified Specialty: No
RACHEL SANACORA
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 *Phone: (858) 966-8800*
 *After Hours Phone: (858) 966-8800*
Provider Gender: Female
NPI: 1548987985

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19


American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*




CERTIFIED NURSE PRACTITIONER

SANACORA, RACHEL

Provider ID: 297729
Board Certified Specialty: No
RACHEL SANACORA
 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
 *Phone: (619) 280-2905*
Fax: (619) 283-1614
 *After Hours Phone: (619) 280-2905*

Provider Gender: Female
NPI: 1548987985

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN




DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: SU 1:00PM-10:00PM M-F 4:00PM-10:00PM SA 1:00PM-10:00PM*
 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 293285
Board Certified Specialty: No
JOANNE SANTANGELO
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
Fax: (858) 633-4680
 *After Hours Phone: (858) 279-0925*

Provider Gender: Female
NPI: 1619370475

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 293286
Board Certified Specialty: No

D3. Directorio de proveedores especialistas

JOANNE SANTANGELO

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1619370475

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

SATTERWHITE, MAURINE

Provider ID: 293258

Board Certified Specialty: No
MAURINE C SATTERWHITE

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1225012842

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

SATTERWHITE, MAURINE

Provider ID: 293259

Board Certified Specialty: No
MAURINE C SATTERWHITE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1225012842

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

SEARS-WILEY, ELIZABETH

Provider ID: 276851

Board Certified Specialty: No
ELIZABETH SEARS-WILEY

350 DICKINSON ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1215394382

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

SELBY, BLAKE

Provider ID: 246423

Board Certified Specialty: No
BLAKE A SELBY

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1417194358

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, UCSD LA

JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL




CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

D3. Directorio de proveedores especialistas

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER


SELBY, BLAKE

Provider ID: 256646

*Board Certified Specialty: No
BLAKE A SELBY*

 *4520 EXECUTIVE DR
SAN DIEGO, CA 92121*

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1417194358

 *Provider English Spoken: Y
Cultural Competency: N*

Hospital Affiliation:

*UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, UCSD LA
JOLLA JOHN SALLY*


*THORNTON, UCSD MEDICAL
CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER


SENA, TIFFANY

Provider ID: 300229

*Board Certified Specialty: No
TIFFANY C SENA*

 *550 WASHINGTON ST STE
300*

SAN DIEGO, CA 92103

 *Phone: (619) 297-5437*

Fax: (619) 297-4567

 *After Hours Phone: (619)
297-5437*

Provider Gender: Female

NPI: 1710539523

 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation: SHARP
MEMORIAL HOSPITAL*


Medi-Cal Open Panel: No

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM*

 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER


SWARTZ, ERIN

Provider ID: 255787

*Board Certified Specialty: No
ERIN SWARTZ*

 *330 LEWIS ST
SAN DIEGO, CA 92103*

 *Phone: (858) 657-8530*

 *After Hours Phone: (858)
657-8530*

Provider Gender: Female

NPI: 1639571292


 *Provider English Spoken: Y
Cultural Competency: N*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER


TAING, JENNIFER

Provider ID: 201573

*Board Certified Specialty: No
JENNIFER S TAING*

 *4168 FRONT ST
SAN DIEGO, CA 92103*

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1649528357

 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER

TALBOT, ADRIANNE


Provider ID: 278183

D3. Directorio de proveedores especialistas




Board Certified Specialty: No
ADRIANNE V TALBOT

 4168 FRONT ST STE 1A
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1992048557

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*


CERTIFIED NURSE
PRACTITIONER

TOPPEN, LAURA

Provider ID: 215477
Board Certified Specialty: No
LAURA TOPPEN




 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1326563495

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*



CERTIFIED NURSE
PRACTITIONER

TREJO, ANA

Provider ID: 307672
Board Certified Specialty: No
ANA C TREJO

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1033717194
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

CERTIFIED NURSE
PRACTITIONER


TUCKER, LANIKA



Provider ID: 307659
Board Certified Specialty: No
LANIKA A TUCKER

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)

926-8273

Provider Gender: Female
NPI: 1477325181

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*



CERTIFIED NURSE
PRACTITIONER

TUCKER, LANIKA

Provider ID: 307657
Board Certified Specialty: No
LANIKA A TUCKER

 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1477325181
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

CERTIFIED NURSE
PRACTITIONER

VIBAL-POASTER, MARIA

Provider ID: 205651
Board Certified Specialty: No

D3. Directorio de proveedores especialistas

MARIA K VIBAL-POASTER

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1376046680

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

WALDRUP, LARHONDA

Provider ID: 299260
Board Certified Specialty: No
LARHONDA M WALDRUP

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5888
Fax: (858) 966-7483

After Hours Phone: (858)
966-5888

Provider Gender: Female
NPI: 1831627181

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

WHITEHURST, UNIQUE

Provider ID: 306075

Board Certified Specialty: No
UNIQUE D WHITEHURST

286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

Phone: (619) 662-4100
Fax: (619) 428-7952

After Hours Phone: (619)
662-4100

Provider Gender: Female
NPI: 1124800214

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

WOO, ANDY

Provider ID: 299916

Board Certified Specialty: No
ANDY B WOO

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1609450550

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST

ALFONSO, ALVIN

Provider ID: 256374

Board Certified Specialty: No
ALVIN M ALFONSO

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1952653404

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

D3. Directorio de proveedores especialistas

8:00AM-5:00PM
Website: N/A

CERTIFIED REGISTERED
NURSE ANESTHETIST

APPLEGET, JOSEPH

Provider ID: 239602

Board Certified Specialty: No
JOSEPH M APPLEGET

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1568980472

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RIVERSIDE
COMMUNITY HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED REGISTERED
NURSE ANESTHETIST

BARBA, ARNEL

Provider ID: 262186

Board Certified Specialty: No
ARNEL J BARBA

286 EUCLID AVE STE 109
SAN DIEGO, CA 92114
Phone: (619) 564-8249
After Hours Phone: (619)
564-8249

Provider Gender: Male

NPI: 1750366928

Provider English Spoken: Y
Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED REGISTERED
NURSE ANESTHETIST

BAYLIS, CHRISTOPHER

Provider ID: 240763

Board Certified Specialty: No
CHRISTOPHER M BAYLIS

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1174893358

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED REGISTERED
NURSE ANESTHETIST

BILLINGTON, KATHERINE

Provider ID: 262246

Board Certified Specialty: No
KATHERINE S BILLINGTON

286 EUCLID AVE STE 109
SAN DIEGO, CA 92114

Phone: (619) 564-8249
After Hours Phone: (619)
564-8249

Provider Gender: Female

NPI: 1962787366

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED REGISTERED
NURSE ANESTHETIST

BOEING, KRISTINA

Provider ID: 274397

Board Certified Specialty: No
KRISTINA K BOEING

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1205134301

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

D3. Directorio de proveedores especialistas

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE ANESTHETIST

BURROWS, TERENCE

Provider ID: 256694

Board Certified Specialty: No
TERENCE J BURROWS

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1023194560


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE ANESTHETIST

DOLLAND, STEVEN

Provider ID: 280552

Board Certified Specialty: No
STEVEN C DOLLAND

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982059044

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: KERN

MEDICAL CENTER, UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE ANESTHETIST

FERRITER, STACY

Provider ID: 265295

Board Certified Specialty: No
STACY K FERRITER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780725556

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE ANESTHETIST

GARCIA, CALVIN

Provider ID: 217365

Board Certified Specialty: No
CALVIN J GARCIA

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1427419944


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

GONZALEZ, LISA

Provider ID: 299905

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
LISA A GONZALEZ

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1083254205

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST

POLIKOWSKI, SAMANTHA

Provider ID: 291444

Board Certified Specialty: No
SAMANTHA E POLIKOWSKI

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1194134114

🗣 Provider English Spoken: Y
🗣 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: KAISER

**FOUNDATION HOSPITAL SAN
DIEGO**

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST

RAMIREZ, NICOLE

Provider ID: 291404

Board Certified Specialty: No
NICOLE A RAMIREZ

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1487213500

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST

SACKS, BRENT

Provider ID: 278003

Board Certified Specialty: No
BRENT A SACKS

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1982133591

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST

VINCENT, BERLIN

Provider ID: 291454

Board Certified Specialty: No
BERLIN VINCENT

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1144987801

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

D3. Directorio de proveedores especialistas

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

CHOI, NATHALIE

Provider ID: 301715

Board Certified Specialty: No
NATHALIE L CHOI

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073241618

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER,

SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

CHOI, NATHALIE

Provider ID: 301714

Board Certified Specialty: No
NATHALIE L CHOI

 4168 FRONT ST

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073241618

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER,


SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


EKHOLM, JANNA

Provider ID: 290584

Board Certified Specialty: No
JANNA L EKHOLM

 4290 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 563-0250

Fax: (858) 633-4681

 After Hours Phone: (619)
563-0250

Provider Gender: Female

NPI: 1588977151

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


GOODWIN, RACHEL

Provider ID: 210018

Board Certified Specialty: No
RACHEL K GOODWIN

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1518274919

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED



NURSE MIDWIFE

GOODWIN, RACHEL



Provider ID: 210019

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
RACHEL K GOODWIN

 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1518274919

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

CERTIFIED REGISTERED

NURSE MIDWIFE

GREAR MANN, MELISSA

Provider ID: 210053
Board Certified Specialty: No
MELISSA P GREAR MANN


 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1255384475

 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM




 *Website: N/A*

CERTIFIED REGISTERED

NURSE MIDWIFE

GREAR MANN, MELISSA

Provider ID: 210052
Board Certified Specialty: No
MELISSA P GREAR MANN


 4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1255384475

 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

CERTIFIED REGISTERED


NURSE MIDWIFE


GUNTHER, HOPE


Provider ID: 210041
Board Certified Specialty: No
HOPE R GUNTHER

 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1285667741

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

CERTIFIED REGISTERED



NURSE MIDWIFE

HIRSCH, JENNIFER


Provider ID: 210058
Board Certified Specialty: No
JENNIFER S HIRSCH

 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1891752069

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

D3. Directorio de proveedores especialistas

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


HIRSCH, JENNIFER


Provider ID: 210054

Board Certified Specialty: No

JENNIFER S HIRSCH


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-7878

 After Hours Phone: (619)
543-7878

Provider Gender: Female

NPI: 1891752069

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


HIRSCH, JENNIFER


Provider ID: 210055

Board Certified Specialty: No

JENNIFER S HIRSCH


 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (619) 543-7878

 After Hours Phone: (619)
543-7878

Provider Gender: Female

NPI: 1891752069

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


NATHAN, CARLY



Provider ID: 301047

Board Certified Specialty: No

CARLY NATHAN


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1235670977

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED REGISTERED


NURSE MIDWIFE


NATHAN, CARLY

Provider ID: 301048

Board Certified Specialty: No
CARLY NATHAN

 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1235670977

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CHIROPRACTOR


BUI, MAI


Provider ID: 289496

Board Certified Specialty: No

MAI T BUI

 10717 CAMINO RUIZ STE 137
SAN DIEGO, CA 92126

 Phone: (619) 692-3211

 Fax: (619) 640-3211

 After Hours Phone: (619)
692-3211

Provider Gender: Female

NPI: 1780901264

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M 9:00AM-6:00PM
W 9:00AM-6:00PM
F 9:00AM-2:00PM
Website: N/A

CHIROPRACTOR

BUI, MAI

Provider ID: 125052
Board Certified Specialty: No
MAI T BUI

5354 UNIVERSITY AVE STE 3
SAN DIEGO, CA 92105

Phone: (619) 692-3211
Fax: (619) 640-3211

After Hours Phone: (619) 692-3211

Provider Gender: Female
NPI: 1780901264

Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

CHIROPRACTOR

BUI, MAI

Provider ID: 295791
Board Certified Specialty: No
MAI T BUI

5354 UNIVERSITY AVE STE 3
SAN DIEGO, CA 92105

Phone: (619) 692-3211

Fax: (619) 640-3211

After Hours Phone: (619) 692-3211

Provider Gender: Female
NPI: 1780901264

Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

CHIROPRACTOR

GILIBERTO, JOSEPH

Provider ID: 291547
Board Certified Specialty: No
JOSEPH A GILIBERTO

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

Phone: (844) 200-2426
Fax: (619) 399-5959

After Hours Phone: (844) 200-2426

Provider Gender: Male
NPI: 1821463159

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CHIROPRACTOR

GILIBERTO, JOSEPH

Provider ID: 291546
Board Certified Specialty: No
JOSEPH A GILIBERTO

9995 CARMEL MOUNTAIN RD STE D
SAN DIEGO, CA 92129

Phone: (844) 200-2426
Fax: (619) 399-5959

After Hours Phone: (844) 200-2426

Provider Gender: Male
NPI: 1821463159

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CHIROPRACTOR

LUU, DANIEL

Provider ID: 269883
Board Certified Specialty: No
DANIEL Q LUU

4419 EUCLID AVE STE 105
SAN DIEGO, CA 92115

Phone: (619) 287-1235

D3. Directorio de proveedores especialistas

Fax: (619) 255-6406

📞 After Hours Phone: (619)
287-1235

Provider Gender: Male

NPI: 1225108269

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 10:00AM-6:00PM

TU 10:00AM-2:00PM

W 10:00AM-6:00PM

TH 10:00AM-2:00PM

F 10:00AM-6:00PM

🌐 Website: N/A

CHIROPRACTOR

ROBINSON, DEAN

Provider ID: 300847

Board Certified Specialty: No

DEAN A ROBINSON

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

📞 Phone: (858) 279-0925

Fax: (858) 633-4680

📞 After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1851320337

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM

🌐 Website: N/A

CHIROPRACTOR

ROBINSON, DEAN

Provider ID: 300848

Board Certified Specialty: No

DEAN A ROBINSON

📍 4290 POLK AVE
SAN DIEGO, CA 92105

📞 Phone: (619) 563-0250

Fax: (858) 633-4681

📞 After Hours Phone: (619)
563-0250

Provider Gender: Male

NPI: 1851320337

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM

🌐 Website: N/A

DERMATOLOGY

CALAME, ANTOANELLA

Provider ID: 290301

Board Certified Specialty: No

ANTOANELLA CALAME

📍 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

📞 Phone: (858) 750-2983

Fax: (858) 750-2984

📞 After Hours Phone: (858)
750-2983

Provider Gender: Female

NPI: 1285817569

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Romanian

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, YUMA

REGIONAL MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

DERMATOLOGY

KANNAN, SWATI

Provider ID: 286287

Board Certified Specialty: No

SWATI V KANNAN

📍 8899 UNIVERSITY CENTER
LN STE 350

SAN DIEGO, CA 92122

📞 Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1508155227

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RONALD

REAGAN UCLA MED CTR,

SANTA MONICA UCLA MED

CTR, UCSD MEDICAL CTR,

D3. Directorio de proveedores especialistas

UCSD LA JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

DERMATOLOGY


KAUNITZ, GENEVIEVE

Provider ID: 285011

Board Certified Specialty: No

GENEVIEVE J KAUNITZ

 8899 UNIVERSITY CENTER
LN STE 350
SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1053734905

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

DERMATOLOGY


KOZMA, BONITA

Provider ID: 269301

Board Certified Specialty: No

BONITA D KOZMA

 8899 UNIVERSITY CENTER
LN STE 350
SAN DIEGO, CA 92122

 Phone: (858) 657-8322

Fax: (888) 539-8781

 After Hours Phone: (858)
657-8322

Provider Gender: Female

NPI: 1659654598

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

PROVIDENCE SAINT JOHNS
HEALTH CENTER, SANTA
MONICA UCLA MED CTR,
RONALD REAGAN UCLA MED
CTR, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

DERMATOLOGY


LIN, SHINKO

Provider ID: 308736

Board Certified Specialty: No

SHINKO K LIN

 5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117

 Phone: (619) 267-8303

Fax: (619) 267-4835

 After Hours Phone: (619)
267-8303

Provider Gender: Female

NPI: 1205130036

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-4:30PM

 Website: N/A

DERMATOLOGY


LIN, SHINKO

Provider ID: 308915

Board Certified Specialty: No

SHINKO K LIN

 5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117

 Phone: (619) 267-8303


Fax: (619) 267-4835

 After Hours Phone: (619)
267-8303

Provider Gender: Female

NPI: 1205130036

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-4:30PM

 Website: N/A

DERMATOLOGY

LIOU, YUJIE

Provider ID: 308315

Board Certified Specialty: No
YUJIE L LIOU

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1750944450


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

DERMATOLOGY


SHI, VERONICA

Provider ID: 286335

Board Certified Specialty: No
VERONICA J SHI

 16950 VIA TAZON

SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1366897464

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

DERMATOLOGY


SHI, VERONICA

Provider ID: 271713

Board Certified Specialty: No
VERONICA J SHI

 8899 UNIVERSITY CENTER
LN STE 350

SAN DIEGO, CA 92122

 Phone: (858) 657-8322

Fax: (888) 539-8781

 After Hours Phone: (858)
657-8322

Provider Gender: Female

NPI: 1366897464

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

DERMATOLOGY

SINGH, GAURAV

Provider ID: 272612

Board Certified Specialty: No
GAURAV SINGH

 8899 UNIVERSITY CENTER
LN STE 350

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1184073801

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

DERMATOLOGY

STERN, MARLEIGH

Provider ID: 306888

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
MARLEIGH J STERN

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1710447883

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

DERMATOLOGY

ZUBAIR, RAHEEL

Provider ID: 306520

Board Certified Specialty: No
RAHEEL A ZUBAIR

9339 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Phone: (858) 454-4300

Fax: (858) 454-5088

After Hours Phone: (858)
454-4300

Provider Gender: Male

NPI: 1326493024

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

AMANN, CHRISTOPHER

Provider ID: 270913

Board Certified Specialty: No
CHRISTOPHER J AMANN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1134326895

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, USC

KENNETH NORRIS JR CANCER
HOSPITAL, KECK HOSPITAL OF

USC, USC VERDUGO HILLS
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

AUSTIN, ANDREA

Provider ID: 269291

Board Certified Specialty: No

ANDREA L AUSTIN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1811289093

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,
GROSSMONT HOSPITAL, Los

Angeles General Medical
Center, TEMECULA VALLEY

HOSPITAL INC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

BAGBY, JESSICA

Provider ID: 271136

Board Certified Specialty: No
JESSICA A BAGBY

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273





Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female




NPI: 1093161473

D3. Directorio de proveedores especialistas


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

EMERGENCY MEDICINE

BARRY, JEFFREY




Provider ID: 271130
Board Certified Specialty: No
JEFFREY R BARRY
 4168 FRONT ST
SAN DIEGO, CA 92103
 *Phone: (855) 535-5864*
Fax: (888) 539-8781
 *After Hours Phone: (855) 535-5864*
Provider Gender: Male
NPI: 1801207006





 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*

8:00AM-5:00PM
 *Website: N/A*

EMERGENCY MEDICINE

BARRY, JEFFREY

Provider ID: 271132
Board Certified Specialty: No
JEFFREY R BARRY
 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1801207006





 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

EMERGENCY MEDICINE

BARRY, JEFFREY




Provider ID: 271129
Board Certified Specialty: No
JEFFREY R BARRY
 4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*


926-8273
Provider Gender: Male
NPI: 1801207006

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY

Provider ID: 270333
Board Certified Specialty: No
AMY BELLINGHAUSEN
 4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1801206354

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

D3. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY

Provider ID: 270334

Board Certified Specialty: No
AMY BELLINGHAUSEN

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1801206354

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY

Provider ID: 270336

Board Certified Specialty: No
AMY BELLINGHAUSEN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1801206354

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

CASTELLANO, TIFFANY

Provider ID: 301706

Board Certified Specialty: No
TIFFANY M CASTELLANO

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1063893063

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

EMERGENCY MEDICINE

CASTELLANO, TIFFANY

Provider ID: 279314

Board Certified Specialty: No
TIFFANY M CASTELLANO

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1063893063

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

CHEN, ALICE

D3. Directorio de proveedores especialistas

Provider ID: 287430

Board Certified Specialty: No
ALICE Y CHEN

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427476597

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

CHEN, ALICE

Provider ID: 287428

Board Certified Specialty: No
ALICE Y CHEN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427476597

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

COYNE, CHRISTOPHER

Provider ID: 303036

Board Certified Specialty: No

CHRISTOPHER J COYNE

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-7051
Fax: (619) 543-3115

After Hours Phone: (619)
543-7051

Provider Gender: Male

NPI: 1043590169

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

RADY CHILDRENS HOSPITAL

SAN DIEGO, EL CENTRO

REGIONAL MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

GUITTARD, JESSE

Provider ID: 239879

Board Certified Specialty: No

JESSE A GUITTARD

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-6400
After Hours Phone: (619)

543-6400

Provider Gender: Male

NPI: 1770979890

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: EL CENTRO

REGIONAL MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

HERNANDEZ, CRISTINA

Provider ID: 242544

Board Certified Specialty: No

CRISTINA T HERNANDEZ

200 W ARBOR DR
SAN DIEGO, CA 92103


Phone: (800) 926-8273

D3. Directorio de proveedores especialistas

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1164765046

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

HOGUE, BRENN A

Provider ID: 301711

Board Certified Specialty: No
BRENN A L HOGUE

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1043705296

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


EMERGENCY MEDICINE


HORNBEAK, KIRSTEN

Provider ID: 240022

Board Certified Specialty: No
KIRSTEN B HORNBEAK

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1205214442

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

KUTZ, CRAIG

Provider ID: 283845

Board Certified Specialty: No
KUTZ CRAIG MD

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1598295925

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, TRI CITY MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

LIOTTA, BENJAMIN

Provider ID: 285630

Board Certified Specialty: No
BENJAMIN I LIOTTA

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1396270278

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR, UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-8:00PM

 Website: N/A

EMERGENCY MEDICINE


MCDANIEL, MICHELE

Provider ID: 246901

Board Certified Specialty: No
MICHELE A MCDANIEL

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1366761959

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE


NOSTE, ERIN

Provider ID: 239798

Board Certified Specialty: No
ERIN E NOSTE

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (858) 605-4441

 After Hours Phone: (858)
605-4441

Provider Gender: Female

NPI: 1871732214

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: SU
8:00AM-10:00PM

M-F 8:00AM-5:00PM
SA 8:00AM-10:00PM

 Website: N/A


EMERGENCY MEDICINE


NOSTE, ERIN

Provider ID: 239797

Board Certified Specialty: No
ERIN E NOSTE

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-6400

 After Hours Phone: (619)
543-6400

Provider Gender: Female

NPI: 1871732214

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

PARK, JAY

Provider ID: 285607

Board Certified Specialty: No
JAY H PARK

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1366478372

 Provider English Spoken: Y
Cultural Competency: N




Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

D3. Directorio de proveedores especialistas

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A



EMERGENCY MEDICINE

PHAM, LILY

Provider ID: 304937

Board Certified Specialty: No
LILY M PHAM

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800



Provider Gender: Female
NPI: 1811423072

Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
 Website: N/A


EMERGENCY MEDICINE

PHAM, LILY

Provider ID: 304933

Board Certified Specialty: No
LILY M PHAM

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Female
NPI: 1811423072


Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A



EMERGENCY MEDICINE

RUDOLF, FRANCES

Provider ID: 240159

Board Certified Specialty: No
FRANCES E RUDOLPH

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (858) 657-7000
 After Hours Phone: (858)
657-7000

Provider Gender: Female
NPI: 1821487430



Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A


EMERGENCY MEDICINE

SABHA, MAHMOUD

Provider ID: 243441

Board Certified Specialty: No
MAHMOUD SABHA

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


Provider Gender: Male
NPI: 1457747883

Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A








EMERGENCY MEDICINE

SLOANE, CHRISTIAN

Provider ID: 209518

Board Certified Specialty: No
CHRISTIAN M SLOANE


D3. Directorio de proveedores especialistas

 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1841233145
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, EL CENTRO
REGIONAL MEDICAL CENTER,
RADY CHILDRENS HOSPITAL
SAN DIEGO, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

TANAKA, HIDEAKI





Provider ID: 240124
Board Certified Specialty: No
HIDEAKI L TANAKA




 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1124280730
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: SU 8:00AM-8:00PM
M-F 8:00AM-5:00PM
SA 8:00AM-8:00PM
 Website: N/A

EMERGENCY MEDICINE







YOU, ALAN

Provider ID: 269936
Board Certified Specialty: No
ALAN X YOU
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1225425697
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

YU, ELAINE


Provider ID: 301708
Board Certified Specialty: No
ELAINE YU
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1528564150
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

EKANAYAKE, PREETHIKA

Provider ID: 284813
Board Certified Specialty: No
PREETHIKA S EKANAYAKE

 4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1083922462
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Sinhala, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

D3. Directorio de proveedores especialistas

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY


METABOLISM DIABETES

EKANAYAKE, PREETHIKA

Provider ID: 284812

Board Certified Specialty: No
PREETHIKA S EKANAYAKE

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083922462

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Sinhala, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL


CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY


METABOLISM DIABETES

JUANG, PATRICIA

Provider ID: 255605

Board Certified Specialty: No
PATRICIA S JUANG

 4168 FRONT ST
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (858) 657-7298

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265695795

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY


METABOLISM DIABETES

KULASA, KRISTEN

Provider ID: 255622

Board Certified Specialty: No
KRISTEN M KULASA

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (619) 543-6500

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932324175

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES


NAGELBERG, JODI


Provider ID: 287780

Board Certified Specialty: No

JODI B NAGELBERG

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1720474141

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D3. Directorio de proveedores especialistas

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES


NAGELBERG, JODI

Provider ID: 287781

Board Certified Specialty: No

JODI B NAGELBERG

 4168 FRONT ST
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1720474141

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 287782

Board Certified Specialty: No

JODI B NAGELBERG

 9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1720474141

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 287779

Board Certified Specialty: No

JODI B NAGELBERG

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1720474141

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

SANTOS CAVAIOLA, TRICIA

Provider ID: 256091

Board Certified Specialty: No

TRICIA SANTOS CAVAIOLA

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (858) 657-7298

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1518163799

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

TANTISIRA, LALITA

Provider ID: 286323

Board Certified Specialty: No

LALITA K TANTISIRA

 4303 LA JOLLA VILLAGE
DR STE 2110

D3. Directorio de proveedores especialistas

SAN DIEGO, CA 92122
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1508874298
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Thai
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

VALDEZ, KRYSTAL ANGELI

Provider ID: 299743
Board Certified Specialty: No
KRYSTAL ANGELI A VALDEZ
📍 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
☎ Phone: (844) 200-2426
Fax: (619) 474-4008
🕒 After Hours Phone: (844) 200-2426
Provider Gender: Female
NPI: 1629480272
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TWIN CITIES COMMUNITY

HOSPITAL, SIERRA VISTA REGIONAL MED CTR, PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\100
American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

VALDEZ, KRYSTAL ANGELI

Provider ID: 299363
Board Certified Specialty: No
KRYSTAL ANGELI A VALDEZ
📍 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
☎ Phone: (844) 200-2426
Fax: (619) 474-4008
🕒 After Hours Phone: (844) 200-2426
Provider Gender: Female
NPI: 1629480272
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TWIN CITIES COMMUNITY HOSPITAL, SIERRA VISTA REGIONAL MED CTR, PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 301761
Board Certified Specialty: No
MIGUEL ALVAREZ-ESTRADA
📍 3177 OCEAN VIEW BLVD SAN DIEGO, CA 92113
☎ Phone: (619) 662-4100
Fax: (619) 595-0258
🕒 After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1588197826
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM
🌐 Website: N/A

FAMILY PRACTICE

BELL, TRACY

Provider ID: 304813

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
TRACY L BELL

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1497821318

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM

Website: N/A

FAMILY PRACTICE

BELL, TRACY

Provider ID: 304814

Board Certified Specialty: No
TRACY L BELL

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1497821318

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:30AM-5:30PM

Website: N/A

FAMILY PRACTICE

BERNADETT, ALEX

Provider ID: 296739

Board Certified Specialty: No

ALEX M BERNADETT

6699 ALVARADO RD STE
2100

SAN DIEGO, CA 92120
Phone: (619) 229-3909

Fax: (619) 229-3902

After Hours Phone: (619)
229-3909

Provider Gender: Male

NPI: 1215382841

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\99

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

BERNADETT, ALEX

Provider ID: 296740

Board Certified Specialty: No

ALEX M BERNADETT

10505 SORRENTO VALLEY
RD STE 200

SAN DIEGO, CA 92121
Phone: (858) 793-7860

Fax: (858) 436-1289

After Hours Phone: (858)
793-7860

Provider Gender: Male

NPI: 1215382841

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\99

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

CAMPBELL, BRIANNA

Provider ID: 298950

Board Certified Specialty: No

BRIANNA N CAMPBELL

950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

Fax: (619) 662-4158

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1316479892

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: CHULA

VISTA COMM HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):






D3. Directorio de proveedores especialistas

N
 *Accessibility: CONTACT PROVIDER*
 *Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM*
 *Website: N/A*



FAMILY PRACTICE

CHEN, ALICE

*Provider ID: 207164
Board Certified Specialty: No
ALICE I CHEN*

 330 LEWIS ST
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*
*Provider Gender: Female
NPI: 1265810337*
 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Chinese*
Cultural Competency: N

*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):*



N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

FAMILY PRACTICE


CHEN, ALICE

*Provider ID: 207167
Board Certified Specialty: No
ALICE I CHEN*

 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*

*Provider Gender: Female
NPI: 1265810337*
 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Chinese*




*Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):*



N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

FAMILY PRACTICE

CHEN, ALICE




*Provider ID: 207163
Board Certified Specialty: No
ALICE I CHEN*

 9333 GENESEE AVE STE
200
SAN DIEGO, CA 92121
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*

*Provider Gender: Female
NPI: 1265810337*
 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Chinese*

*Cultural Competency: N
Hospital Affiliation: UCSD*

*MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):*

N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*



FAMILY PRACTICE

HILL, LINDA



*Provider ID: 293211
Board Certified Specialty: No
LINDA L HILL*

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 810-8700*
Fax: (858) 633-4680
 *After Hours Phone: (858) 810-8700*

*Provider Gender: Female
NPI: 1467434811*

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: French, Spanish*
*Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR*

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):*

N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

FAMILY PRACTICE

HILL, LINDA

D3. Directorio de proveedores especialistas

Provider ID: 293210
Board Certified Specialty: No
LINDA L HILL

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1467434811

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM

Website: N/A

FAMILY PRACTICE

JOHN, TANNER

Provider ID: 303515

Board Certified Specialty: No
TANNER T JOHN

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

Fax: (619) 595-0258

After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1043707326

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

JOLICOEUR, MEGAN

Provider ID: 300060

Board Certified Specialty: No
MEGAN E JOLICOEUR

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1114366192

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

FAMILY PRACTICE

JOLICOEUR, MEGAN

Provider ID: 300059

Board Certified Specialty: No
MEGAN E JOLICOEUR

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1114366192

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

FAMILY PRACTICE

JOLICOEUR, MEGAN

Provider ID: 300058

Board Certified Specialty: No
MEGAN E JOLICOEUR

9333 GENESEE AVE
SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1114366192

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

FAMILY PRACTICE


JOLICOEUR, MEGAN

Provider ID: 300057

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

MEGAN E JOLICOEUR

 8899 UNIVERSITY CENTER LN STE 350
SAN DIEGO, CA 92122
 Phone: (858) 249-6890
 After Hours Phone: (858) 249-6890

Provider Gender: Female

NPI: 1114366192


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


 Website: N/A

FAMILY PRACTICE

KUROSAKA, MOMO

Provider ID: 291447

Board Certified Specialty: No
MOMO C KUROSAKA

 8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1205848363


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


FAMILY PRACTICE

KUROSAKA, MOMO

Provider ID: 291448

Board Certified Specialty: No
MOMO C KUROSAKA

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1205848363

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


FAMILY PRACTICE

MCLAUGHLIN, ERIK

Provider ID: 303847

Board Certified Specialty: No
ERIK J MCLAUGHLIN

 2630 1ST AVE
SAN DIEGO, CA 92103

 Phone: (619) 234-2158

Fax: (619) 234-0505

 After Hours Phone: (619) 234-2158

Provider Gender: Male


NPI: 1861637217


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


FAMILY PRACTICE

PERESS, LILIA

Provider ID: 304277

Board Certified Specialty: No
LILIA PERESS

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858) 279-0925

Provider Gender: Female

NPI: 1275945446

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Ukrainian

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

FAMILY PRACTICE

PERESS, LILIA

Provider ID: 304276


Board Certified Specialty: No
LILIA PERESS

D3. Directorio de proveedores especialistas

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1275945446

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Ukrainian

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

FAMILY PRACTICE


RISSER, JOSEPH

Provider ID: 293216


Board Certified Specialty: Yes

JOSEPH A RISSER

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1952386765

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

FAMILY PRACTICE


RISSER, JOSEPH

Provider ID: 293217

Board Certified Specialty: No

JOSEPH A RISSER

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Male

NPI: 1952386765

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

FAMILY PRACTICE


ROSADO, IVAN

Provider ID: 299244

Board Certified Specialty: No

IVAN H ROSADO

 316 25TH ST
SAN DIEGO, CA 92102

 Phone: (619) 662-4100

Fax: (619) 238-3807

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1316479603

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 8:30AM-5:30PM
M-F 8:30AM-5:30PM

SA 8:30AM-2:30PM

 Website: N/A

FAMILY PRACTICE


SCOTT, LAGINA

Provider ID: 302648

Board Certified Specialty: No

LAGINA R SCOTT

 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

Fax: (619) 263-9601

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1558897009

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

FAMILY PRACTICE

SUMMERS-DAY, COURTNEY

Provider ID: 290976

Board Certified Specialty: Yes

COURTNEY A SUMMERS-DAY

D3. Directorio de proveedores especialistas

1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619) 429-3733
Provider Gender: Female
NPI: 1124288873
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A

FAMILY PRACTICE

VAN PRATT LEVIN, BENJAMIN
Provider ID: 302531
Board Certified Specialty: No
BENJAMIN A VAN PRATT
LEVIN

1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619) 429-3733
Provider Gender: Male
NPI: 1619438330
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

FAMILY PRACTICE

VO, PHU LUONG
Provider ID: 303332
Board Certified Specialty: No
PHU LUONG T VO

4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1043849177

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish,
Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

FAMILY PRACTICE GERIATRIC MEDICINE

MILLER, SCOTT
Provider ID: 271539
Board Certified Specialty: No
SCOTT B MILLER
9878 CARMEL MOUNTAIN
RD STE B
SAN DIEGO, CA 92129
Phone: (858) 312-1440
Fax: (760) 788-7983
After Hours Phone: (858) 312-1440
Provider Gender: Male
NPI: 1104845536

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

GASTROENTEROLOGY

ANAND, GOBIND
Provider ID: 304187
Board Certified Specialty: No
GOBIND S ANAND

6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1861626814
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR

D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


GASTROENTEROLOGY

ANAND, GOBIND


Provider ID: 272837

Board Certified Specialty: No
GOBIND S ANAND

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-2347

Fax: (858) 657-7259

 After Hours Phone: (619)
543-2347

Provider Gender: Male

NPI: 1861626814


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

GASTROENTEROLOGY

BAUMAN, LAURA


Provider ID: 260041

Board Certified Specialty: No
LAURA E BAUMAN

 3030 CHILDRENS WAY FL

2

SAN DIEGO, CA 92123

 Phone: (858) 966-4003

Fax: (858) 560-6798

 After Hours Phone: (858)
966-4003

Provider Gender: Female

NPI: 1255697850

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GASTROENTEROLOGY

DAVE, SHRAVAN

Provider ID: 270450

Board Certified Specialty: No
SHRAVAN S DAVE

 4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1588081814


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

GASTROENTEROLOGY

DAVE, SHRAVAN

Provider ID: 304204

Board Certified Specialty: No
SHRAVAN S DAVE

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1588081814

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

GASTROENTEROLOGY

HASAN, AWS

Provider ID: 299951

Board Certified Specialty: No
AWS K HASAN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273




Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male




NPI: 1780047597





D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

GASTROENTEROLOGY




HILDRETH, AMBER





Provider ID: 280464
Board Certified Specialty: No
AMBER N HILDRETH
 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123
 *Phone: (858) 966-4003*
Fax: (858) 560-6798
 *After Hours Phone: (858)*
966-4003
Provider Gender: Female
NPI: 1548521511

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

GASTROENTEROLOGY



KUMAR, SOMA

Provider ID: 205377
Board Certified Specialty: No
SOMA KUMAR
 3030 CHILDRENS WAY FL
2 SOUTH
SAN DIEGO, CA 92123
 *Phone: (858) 966-4003*
Fax: (858) 560-6798
 *After Hours Phone: (858)*
966-4003
Provider Gender: Female
NPI: 1356502520




 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

GASTROENTEROLOGY

NOVO, MEGAN

Provider ID: 296066
Board Certified Specialty: No
MEGAN E NOVO
 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
 *Phone: (619) 266-3332*
Fax: (619) 266-6000
 *After Hours Phone: (619)*
266-3332
Provider Gender: Female
NPI: 1770961971

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL, TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, UCSD LA JOLLA
JOHN SALLY THORNTON,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, UNIVERSITY OF
CALIFORNIA IRVINE MED CTR,
UCSD MEDICAL CTR, UCSD
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

GASTROENTEROLOGY

POLK, DAVID

Provider ID: 275449
Board Certified Specialty: No
DAVID B POLK
 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123
 *Phone: (760) 294-9260*
Fax: (760) 294-9274
 *After Hours Phone: (760)*
294-9260
Provider Gender: Male
NPI: 1427140839
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, CHILDRENS HOSP OF

D3. Directorio de proveedores especialistas

LOS ANGELES


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Provider ID: 290034

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

GASTROENTEROLOGY

REDDY, JOSEPH


Provider ID: 27748

Board Certified Specialty: Yes


JOSEPH B REDDY

 6699 ALVARADO RD STE
2301

SAN DIEGO, CA 92120



 Phone: (619) 599-4074

Fax: (619) 588-4004

 After Hours Phone: (619)
599-4074

Provider Gender: Male

NPI: 1245215391

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Spanish,
Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL, UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

GASTROENTEROLOGY


REDDY, JOSEPH

Board Certified Specialty: Yes

JOSEPH B REDDY

 6699 ALVARADO RD STE
2301

SAN DIEGO, CA 92120



 Phone: (619) 599-4074

Fax: (619) 588-4004

 After Hours Phone: (619)
599-4074

Provider Gender: Male

NPI: 1245215391

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Spanish,
Telugu

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

GASTROENTEROLOGY


SHAFFER, KATHERINE

Provider ID: 295712

Board Certified Specialty: No

KATHERINE M SHAFFER

 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

 Phone: (619) 266-3332

Fax: (619) 266-6000

 After Hours Phone: (619)
266-3332

Provider Gender: Female

NPI: 1336405695

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PARADISE
VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

GASTROENTEROLOGY

SHAH, SHAILJA

Provider ID: 304178

Board Certified Specialty: No

SHAILJA C SHAH

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073803243

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

D3. Directorio de proveedores especialistas

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

GASTROENTEROLOGY

SHAH, SHAILJA

Provider ID: 283896

Board Certified Specialty: No
SHAILJA C SHAH

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073803243

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GASTROENTEROLOGY

TSAI, MATTHEW

Provider ID: 304196

Board Certified Specialty: No
MATTHEW TSAI

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285051177

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


GASTROENTEROLOGY

YOUSSEF, FADY

Provider ID: 304186

Board Certified Specialty: No
FADY F YOUSSEF

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265887723

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Website: N/A


GASTROENTEROLOGY

YOUSSEF, FADY

Provider ID: 300024

Board Certified Specialty: No
FADY F YOUSSEF

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265887723

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


GENETICS CLINICAL

REIMERS, REBECCA


Provider ID: 302348

Board Certified Specialty: No
REBECCA M REIMERS

 7920 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 966-5840

Fax: (858) 966-8550

 After Hours Phone: (858)
966-5840

Provider Gender: Female

NPI: 1801207634

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

D3. Directorio de proveedores especialistas

CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: No


Min/Max Age: 0\19

American Sign Language (ASL): MIGUEL

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GENETICS CLINICAL

REIMERS, REBECCA

Provider ID: 294650

Board Certified Specialty: No
REBECCA M REIMERS

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

GENETICS MEDICAL


DELCAMPOCASANELLES, MIGUEL

Provider ID: 206013

Board Certified Specialty: No

DELCAMPOCASANELLES

 7920 FROST ST STE 200
SAN DIEGO, CA 92123


 Phone: (858) 966-5840


Fax: (858) 966-4064

 After Hours Phone: (858)
966-5840

Provider Gender: Male

NPI: 1598141475

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Italian,
Portuguese, Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GENETICS MEDICAL

NIEMI, ANNA-KAISA


Provider ID: 307094

Board Certified Specialty: No
ANNA-KAISA NIEMI

 7920 FROST ST STE 200
SAN DIEGO, CA 92123


 Phone: (858) 966-5840


Fax: (858) 966-8550

 After Hours Phone: (858)
966-5840

Provider Gender: Female

NPI: 1497941397

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Finnish, French,
German, Spanish, Swedish


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE


Provider ID: 268689

Board Certified Specialty: No
ELAINE ANDERSON

 6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120

 Phone: (619) 583-7002

Fax: (619) 583-9404

 After Hours Phone: (619)
583-7002

Provider Gender: Female

NPI: 1063558856

D3. Directorio de proveedores especialistas

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE

Provider ID: 268691
Board Certified Specialty: No
ELAINE ANDERSON
 9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123
 Phone: (858) 278-9911
Fax: (858) 565-7324
 After Hours Phone: (858)
278-9911

Provider Gender: Female
NPI: 1063558856

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE

Provider ID: 268653
Board Certified Specialty: No
KELLE L DAVIS
 9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123
 Phone: (858) 278-9911
Fax: (858) 565-7324
 After Hours Phone: (858)
278-9911

Provider Gender: Female
NPI: 1902853344

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:30AM-5:00PM
 Website: N/A

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE

Provider ID: 268652
Board Certified Specialty: No
KELLE L DAVIS
 6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120
 Phone: (619) 583-7002
Fax: (619) 583-9404
 After Hours Phone: (619)
583-7002

Provider Gender: Female
NPI: 1902853344

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:30AM-5:00PM
 Website: N/A

HEMATOLOGY / ONCOLOGY

CHEN, YU-WEI

Provider ID: 303059
Board Certified Specialty: No
YU-WEI CHEN
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1245694801

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Website: N/A

HEMATOLOGY / ONCOLOGY

LEE, KAREN

Provider ID: 284165
Board Certified Specialty: No
KAREN K LEE

3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
 Phone: (858) 966-5811
Fax: (858) 966-8035
 After Hours Phone: (858)
966-5811

D3. Directorio de proveedores especialistas

Provider Gender: Female

NPI: 1518352970

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

HEMATOLOGY / ONCOLOGY

NGUYEN, ANTHONY

Provider ID: 301060

Board Certified Specialty: No
ANTHONY L NGUYEN

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1295153575

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: LOMA
LINDA UNIVERSITY MED CTR
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

HEMATOLOGY / ONCOLOGY

PAUL, MEGAN

Provider ID: 274499

Board Certified Specialty: No
MEGAN R PAUL

3010 CHILDRENS WAY STE
2W
SAN DIEGO, CA 92123

Phone: (858) 966-5811
Fax: (858) 966-8035

After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1427495894

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

HEMATOLOGY / ONCOLOGY

VU, PETER

Provider ID: 272716

Board Certified Specialty: No
PETER VU

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1861810830

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

HEMATOLOGY / ONCOLOGY

ZHOU, JENNY

Provider ID: 273188

Board Certified Specialty: No
JENNY Y ZHOU

9333 GENESEE AVE STE
310
SAN DIEGO, CA 92121

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1598007924

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

HOSPICE AND PALLIATIVE MEDICINE

RUBENZIK, TAMARA

Provider ID: 276671
Board Certified Specialty: No
TAMARA T RUBENZIK

4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1811200652
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

HOSPICE AND PALLIATIVE MEDICINE

RUBENZIK, TAMARA

Provider ID: 245573
Board Certified Specialty: No
TAMARA T RUBENZIK

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1811200652
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

INFECTIOUS DISEASE

ALDOUS, JEANNETTE

Provider ID: 290420
Board Certified Specialty: No
JEANNETTE L ALDOUS
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
Fax: (619) 205-6384
After Hours Phone: (619)
662-4100
Provider Gender: Female
NPI: 1073650339

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A

INFECTIOUS DISEASE

BAMFORD, LAURA

Provider ID: 276546
Board Certified Specialty: No
LAURA P BAMFORD

4168 FRONT ST FL 3
SAN DIEGO, CA 92103
Phone: (619) 543-6382
Fax: (888) 539-8781
After Hours Phone: (619)
543-6382
Provider Gender: Female
NPI: 1750435996
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

INFECTIOUS DISEASE

DEISS, ROBERT

Provider ID: 258330
Board Certified Specialty: No

D3. Directorio de proveedores especialistas

ROBERT G DEISS

4168 FRONT ST FL 3
SAN DIEGO, CA 92103
Phone: (619) 543-3995
After Hours Phone: (619)
543-3995

Provider Gender: Male

NPI: 1194977652

Provider English Spoken: Y
Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INFECTIOUS DISEASE

HORTON, LUCY

Provider ID: 240887

Board Certified Specialty: No
LUCY E HORTON

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427324821

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INFECTIOUS DISEASE

KUPPALLI, KRUTIKA

Provider ID: 301058

Board Certified Specialty: No
KRUTIKA KUPPALLI

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1538346317

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, Stanford Health
Care, STANFORD HEALTH
CARE TRI-VALLEY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

INFECTIOUS DISEASE

MARTIN, THOMAS

Provider ID: 277225

Board Certified Specialty: No
THOMAS C MARTIN

4168 FRONT ST FL 3
SAN DIEGO, CA 92103
Phone: (619) 543-5890
Fax: (888) 539-8781

After Hours Phone: (619)
543-5890

Provider Gender: Male

NPI: 1093193583

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INFECTIOUS DISEASE

MARTIN, THOMAS

Provider ID: 277226

Board Certified Specialty: No
THOMAS C MARTIN

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1093193583

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

D3. Directorio de proveedores especialistas


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INFECTIOUS DISEASE


MOODLEY, AMARAN

Provider ID: 208558

Board Certified Specialty: No
AMARAN MOODLEY

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

 Phone: (885) 966-7785

Fax: (858) 966-8658

 After Hours Phone: (885)
966-7785

Provider Gender: Male

NPI: 1104023670


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INFECTIOUS DISEASE


PANNARAJ, PIA

Provider ID: 301026

Board Certified Specialty: No
PIA S PANNARAJ

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

 Phone: (858) 966-7785

Fax: (858) 966-8658

 After Hours Phone: (858)
966-7785

Provider Gender: Female

NPI: 1942478524

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS
ANGELES, HOLLYWOOD


PRESBYTERIAN MED CTR,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INFECTIOUS DISEASE


RAJAGOPAL, AMUTHA


Provider ID: 221088

Board Certified Specialty: No
AMUTHA V RAJAGOPAL

 4168 FRONT ST FL 3

SAN DIEGO, CA 92103

 Phone: (619) 433-3995

 After Hours Phone: (619)
433-3995

Provider Gender: Female

NPI: 1124465745

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INFECTIOUS DISEASE


RAMIREZ SANCHEZ, CLAUDIA

Provider ID: 299946

Board Certified Specialty: No
CLAUDIA CAROLINA RAMIREZ
SANCHEZ

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1659720555

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

D3. Directorio de proveedores especialistas

INFECTIOUS DISEASE

TOVARPADUA, LEIDY

Provider ID: 265093

Board Certified Specialty: No
LEIDY J TOVARPADUA

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-8800

📞 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1033491311

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, CHILDRENS HOSP OF
LOS ANGELES, LONG BEACH
MEMORIAL MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

INFECTIOUS DISEASE

TOVARPADUA, LEIDY

Provider ID: 205357

Board Certified Specialty: No
LEIDY J TOVARPADUA

📍 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

☎ Phone: (858) 966-7785

Fax: (858) 966-8658

📞 After Hours Phone: (858)

966-7785

Provider Gender: Female

NPI: 1033491311

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, CHILDRENS HOSP OF
LOS ANGELES, LONG BEACH
MEMORIAL MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

INTERNAL MEDICINE

ARUTYUNOV, BORIS

Provider ID: 201910

Board Certified Specialty: No
BORIS S ARUTYUNOV

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (619) 471-9186

📞 After Hours Phone: (619)
471-9186

Provider Gender: Male

NPI: 1144562703

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: GOOD

SAMARITAN HOSPITAL, PIH
HEALTH GOOD SAMARITAN
HOSPITAL, SUTTER MEDICAL

CENTER SACRAMENTO, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
9:00AM-5:00PM

🌐 Website: N/A

INTERNAL MEDICINE

BALL, SHELDON

Provider ID: 294137

Board Certified Specialty: No
SHELDON S BALL

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

📞 After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1689646275

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

🌐 Website: N/A

INTERNAL MEDICINE

D3. Directorio de proveedores especialistas

BALL, SHELDON

Provider ID: 294136

Board Certified Specialty: No
SHELDON S BALL

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700
Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Male

NPI: 1689646275

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

Website: N/A

INTERNAL MEDICINE

BORDIN-WOSK, TALYA

Provider ID: 273983

Board Certified Specialty: No
TALYA S BORDIN WOSK

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (760) 471-9186
Fax: (619) 543-8255

After Hours Phone: (760)
471-9186

Provider Gender: Female

NPI: 1801184973

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

CHENG, GEORGE

Provider ID: 247639

Board Certified Specialty: No
GEORGE Z CHENG

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1316174568

Provider English Spoken: Y
Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

DJEKIC, KRISTINA

Provider ID: 286668

Board Certified Specialty: No

KRISTINA DJEKIC

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1417343732

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

GRUNVALD, EDUARDO

Provider ID: 286344

Board Certified Specialty: No
EDUARDO L GRUNVALD

200 W ARBOR DR
SAN DIEGO, CA 92103



Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

D3. Directorio de proveedores especialistas




NPI: 1497791339

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


INTERNAL MEDICINE

GRUNVALD, EDUARDO

Provider ID: 286343

Board Certified Specialty: No
EDUARDO L GRUNVALD



 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497791339

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Portuguese,
Spanish


Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

HASTIE, ELIZABETH

Provider ID: 291431

Board Certified Specialty: No
ELIZABETH B HASTIE


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800)
926-8273


Provider Gender: Female

NPI: 1154818797

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A



INTERNAL MEDICINE

HOGARTH, MICHAEL

Provider ID: 214386



Board Certified Specialty: No
MICHAEL A HOGARTH

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225019193


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, UC
DAVIS MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



INTERNAL MEDICINE

JABBOUR, MOUSSA

Provider ID: 256659



Board Certified Specialty: No
MOUSSA JABBOUR

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1255741633

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic

Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

American Sign Language (ASL):


D3. Directorio de proveedores especialistas


N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

KATZ, YISRAEL

Provider ID: 272936
Board Certified Specialty: No
YISRAEL KATZ

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1730507872

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):



N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE




KVIATKOVSKY, MILLA

Provider ID: 274003
Board Certified Specialty: No
MILLA J KVIATKOVSKY

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (619) 543-6222
 After Hours Phone: (619)
543-6222
Provider Gender: Female

NPI: 1366855355
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Finnish, French,
Hebrew, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):



N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE




LAGO HERNANDEZ, CARLOS

Provider ID: 238622
Board Certified Specialty: No
CARLOS A LAGO-HERNANDEZ

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1558756270

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N



 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

LAM, MICHAEL

Provider ID: 274411
Board Certified Specialty: No
MICHAEL T LAM

 4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1578974259

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

LAM, MICHAEL

Provider ID: 274410
Board Certified Specialty: No
MICHAEL T LAM

 4520 EXECUTIVE DR STE
P2

D3. Directorio de proveedores especialistas

SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1578974259
🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

INTERNAL MEDICINE **LEVERONE, NICHOLAS**

Provider ID: 272692
Board Certified Specialty: No
NICHOLAS A LEVERONE
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1407388564
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

INTERNAL MEDICINE **MAJITHIA, AMIT**

Provider ID: 255882
Board Certified Specialty: No
AMIT R MAJITHIA
📍 4168 FRONT ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1801091459
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

Provider ID: 272577
Board Certified Specialty: No
DANIELLE F MUNCE
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1740644509
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

INTERNAL MEDICINE **MARTINEZ, ARMANDO**

Provider ID: 291421

Board Certified Specialty: No
ARMANDO R MARTINEZ
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1598261091
🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

INTERNAL MEDICINE **MUNCE, DANIELLE**


Provider ID: 272577
Board Certified Specialty: No
DANIELLE F MUNCE
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1740644509
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

D3. Directorio de proveedores especialistas

American Sign Language (ASL): MEGHAN M SEBASKY

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

NOKES, BRANDON

Provider ID: 287582

Board Certified Specialty: No
BRANDON T NOKES

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1487040051

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

SEBASKY, MEGHAN

Provider ID: 273962

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-6222
Fax: (619) 543-8255

 After Hours Phone: (619)
543-6222

Provider Gender: Female

NPI: 1538351408

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE



SMITH, CHELSEY

Provider ID: 239920

Board Certified Specialty: No



CHELSEY J SMITH

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (858) 657-6110
 After Hours Phone: (858)
657-6110

Provider Gender: Female

NPI: 1013264506

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE


TANTISIRA, LALITA

Provider ID: 275926

Board Certified Specialty: No
LALITA K TANTISIRA

 4520 EXECUTIVE DR
SAN DIEGO, CA 92121


 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1508874298

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Thai

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

TANTISIRA, LALITA

Provider ID: 275927

Board Certified Specialty: No
LALITA K TANTISIRA

D3. Directorio de proveedores especialistas

16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1508874298

Provider English Spoken: Y
Provider Language(s)
Spoken: Thai
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE

TAYLOR, DAVID

Provider ID: 274469
Board Certified Specialty: No
DAVID S TAYLOR

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1033572995
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE

THOMAS, ROBERT

Provider ID: 238929
Board Certified Specialty: Yes
ROBERT L THOMAS III

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1053765909

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE

WANG, ANGELA

Provider ID: 259535
Board Certified Specialty: No
ANGELA C WANG

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)

926-8273
Provider Gender: Female
NPI: 1730133976
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE

WANG, ANGELA

Provider ID: 259534
Board Certified Specialty: No
ANGELA C WANG

4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
Phone: (855) 355-5864
Fax: (888) 539-8781
After Hours Phone: (855)
355-5864


Provider Gender: Female
NPI: 1730133976


Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

D3. Directorio de proveedores especialistas

American Sign Language (ASL): JENNY Z YANG

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

WEBSTER, LUKE

Provider ID: 272681

Board Certified Specialty: No
LUKE A WEBSTER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1235660887

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

YANG, JENNY

Provider ID: 283026

Board Certified Specialty: No

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346636453

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

YANG, JENNY

Provider ID: 283027

Board Certified Specialty: No
JENNY Z YANG

 4520 EXECUTIVE DR STE
P2


 SAN DIEGO, CA 92121
Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346636453

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

ZHANG, SHERRY

Provider ID: 272657

Board Certified Specialty: No
SHERRY S ZHANG

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1588198147

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR




Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N





 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

INTERNAL MEDICINE




GERIATRIC MEDICINE

AGNIHOTRI, PARAG

Provider ID: 247292
Board Certified Specialty: No
PARAG AGNIHOTRI

 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*
Provider Gender: Male
NPI: 1447351085
 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: MERCY
GENERAL HOSPITAL*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):


N





 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*



INTERVENTIONAL

CARDIOLOGY

CRUZ RODRIGUEZ, JOSE

Provider ID: 300061
Board Certified Specialty: No
JOSE B CRUZ RODRIGUEZ
 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)
926-8273*
Provider Gender: Male
NPI: 1457770240
 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
*Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL, EL
CENTRO REGIONAL MEDICAL
CENTER*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):


N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

INTERVENTIONAL




CARDIOLOGY

KINGDON, TYLER

Provider ID: 301814
Board Certified Specialty: No
TYLER C KINGDON
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 *Phone: (858) 966-5855*
Fax: (858) 966-7903
 *After Hours Phone: (858)
966-5855*

Provider Gender: Male
NPI: 1477084283
 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation:
CHILDRENS HOSPITAL OF
ORANGE COUNTY, RADY*

*CHILDRENS HOSPITAL SAN
DIEGO*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N



 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*




INTERVENTIONAL

CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 309250
Board Certified Specialty: No
BURHAN MOHAMEDALI
 412 WASHINGTON ST
SAN DIEGO, CA 92103
 *Phone: (619) 616-2100*
Fax: (619) 616-2104
 *After Hours Phone: (619)
616-2100*

Provider Gender: Male
NPI: 1831393289
 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish, Swahili*
Cultural Competency: N
*Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
Adventist Health and Rideout*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
9:00AM-5:00PM*
 *Website: N/A*

D3. Directorio de proveedores especialistas

INTERVENTIONAL

CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 245577

Board Certified Specialty: No

BURHAN MOHAMEDALI

292 EUCLID AVE STE 210

SAN DIEGO, CA 92114

Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1831393289

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

Adventist Health and Rideout

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

9:00AM-5:00PM

Website: N/A

INTERVENTIONAL

CARDIOLOGY

SHEREV, DIMITRI

Provider ID: 302987

Board Certified Specialty: No

DIMITRI A SHEREV

6402 EL CAJON BLVD STE

102

SAN DIEGO, CA 92115

Phone: (619) 582-4490

Fax: (619) 582-4737

After Hours Phone: (619)
582-4490

Provider Gender: Male

NPI: 1154323996

Provider English Spoken: Y

Provider Language(s)

Spoken: Bulgarian, Russian,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL,

ALVARADO COMMUNITY

HOSPITAL, SHARP MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

ALVARADO HOSPITAL LLC,

SHARP CHULA VISTA MED

CTR, SHARP CHULA VISTA

MED CTR, TRI CITY MEDICAL

CTR, SCRIPPS MERCY

HOSPITAL CHULA VISTA, Sharp

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

9:00AM-5:00PM

Website: N/A

INTERVENTIONAL

CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 309096

Board Certified Specialty: No

DEEPTHI SUDHAKAR

412 WASHINGTON ST
SAN DIEGO, CA 92103

Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619)
616-2100

Provider Gender: Female

NPI: 1811307051

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 15\99

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

INTERVENTIONAL

CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 296050

Board Certified Specialty: No

DEEPTHI SUDHAKAR

292 EUCLID AVE STE 210

SAN DIEGO, CA 92114

Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619)
616-2100

Provider Gender: Female

NPI: 1811307051

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SHARP


CHULA VISTA MED CTR


D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 15\99

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 295844

Board Certified Specialty: No
DEEPTHI SUDHAKAR

 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

 Phone: (619) 616-2100
Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Sharp


Grossmont Hospital, SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 15\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


LICENSED PROFESSIONAL CLINICAL COUNSELOR

GARCIA, JENNI

Provider ID: 299310

Board Certified Specialty: No
JENNI GARCIA


 3025 BEYER BLVD
SAN DIEGO, CA 92154

 Phone: (619) 662-4100
Fax: (619) 662-4119

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1437775863

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


LICENSED PROFESSIONAL CLINICAL COUNSELOR


NAKAMURA, TIFFANY

Provider ID: 239584

Board Certified Specialty: No
TIFFANY NAKAMURA

 4510 EXECUTIVE DR STE
315

 SAN DIEGO, CA 92121
Phone: (858) 534-8019

 After Hours Phone: (858)
534-8019

Provider Gender: Female

NPI: 1356846349


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


MATERNAL AND FETAL MEDICINE

ADAMI, REBECCA

Provider ID: 272670

Board Certified Specialty: No
REBECCA R ADAMI

 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

 Phone: (858) 966-6710
Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1992149447

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN


DIEGO, SHARP MEMORIAL
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

MATERNAL AND FETAL MEDICINE

ADAMI, REBECCA

Provider ID: 277179

Board Certified Specialty: No
REBECCA R ADAMI

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-6710

Fax: (858) 966-6711

🕒 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1992149447

🗒 Provider English Spoken: Y

🗒 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI

Provider ID: 300010

Board Certified Specialty: No
UKACHI N EMERUWA

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1245627421

🗒 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI

Provider ID: 300012

Board Certified Specialty: No
UKACHI N EMERUWA

📍 4168 FRONT ST
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1245627421

🗒 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI

Provider ID: 300011

Board Certified Specialty: No
UKACHI N EMERUWA

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1245627421

🗒 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

MATERNAL AND FETAL MEDICINE

LAURENT, LOUISE

Provider ID: 208640

Board Certified Specialty: No
LOUISE C LAURENT

📍 4168 FRONT ST
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770532707

🗒 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL

D3. Directorio de proveedores especialistas

HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MEMORIAL
HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

MCCULLOUGH, DEIRDRE

Provider ID: 210034

Board Certified Specialty: No
DEIRDRE M MCCULLOUGH

 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 939-4102

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1639153018

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,

Sharp Grossmont Hospital,
SHARP MEMORIAL HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL


MEDICINE

MCCULLOUGH, DEIRDRE

Provider ID: 277260

Board Certified Specialty: No
DEIRDRE M MCCULLOUGH

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1639153018

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,


Sharp Grossmont Hospital,
SHARP MEMORIAL HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL


MEDICINE

MELBER, DORA

Provider ID: 296994

Board Certified Specialty: No
DORA J MELBER

 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

 Phone: (858) 966-6710


Fax: (858) 939-4102

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1124413026

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hungarian, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL


MEDICINE

MELBER, DORA

Provider ID: 296990

Board Certified Specialty: No
DORA J MELBER

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-6710


Fax: (858) 966-6711


D3. Directorio de proveedores especialistas

 After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1124413026

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hungarian, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS


HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE


MELBER, DORA

Provider ID: 296998

Board Certified Specialty: No
DORA J MELBER


 7910 FROST ST STE 220
SAN DIEGO, CA 92123


 Phone: (858) 966-6710

 After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1124413026

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hungarian, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 296989

Board Certified Specialty: No
DORA J MELBER

 7910 FROST ST STE 430
SAN DIEGO, CA 92123


 Phone: (858) 966-6710


Fax: (858) 966-6711

 After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1124413026

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hungarian, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE


MOORE, THOMAS

Provider ID: 208643

Board Certified Specialty: No
THOMAS R MOORE

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1184682379

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE

MOORE, THOMAS

Provider ID: 208644

Board Certified Specialty: No
THOMAS R MOORE





 4910 DIRECTORS PL STE
200




SAN DIEGO, CA 92121

D3. Directorio de proveedores especialistas

 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1184682379
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA
Provider ID: 294647
Board Certified Specialty: Yes
REBECCA M REIMERS
 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
 Phone: (858) 966-6710
Fax: (858) 939-4102
 After Hours Phone: (858)
966-6710
Provider Gender: Female
NPI: 1801207634
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A








MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA
Provider ID: 294648
Board Certified Specialty: No
REBECCA M REIMERS
 7910 FROST ST STE 220
SAN DIEGO, CA 92123
 Phone: (858) 966-6710
Fax: (858) 966-6711
 After Hours Phone: (858)
966-6710
Provider Gender: Female
NPI: 1801207634
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19




American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE
Provider ID: 277314

Board Certified Specialty: No
ALVIE C RICHARDSON
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-6710
Fax: (858) 966-6711
 After Hours Phone: (858)
966-6710
Provider Gender: Male
NPI: 1154305977
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, Sharp Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE
Provider ID: 214436
Board Certified Specialty: No
ALVIE C RICHARDSON
 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
 Phone: (858) 966-6710
Fax: (858) 939-4102
 After Hours Phone: (858)
966-6710
Provider Gender: Male
NPI: 1154305977

D3. Directorio de proveedores especialistas

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, Sharp Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL **MEDICINE**

SCHWENDEMANN, WADE

Provider ID: 277307
Board Certified Specialty: No
WADE D SCHWENDEMANN
 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
 Phone: (858) 966-6710
Fax: (858) 939-4102
 After Hours Phone: (858)
966-6710
Provider Gender: Male
NPI: 1477563302
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, TRI CITY

MEDICAL CTR, Sharp
Grossmont Hospital, Sharp
Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL **MEDICINE**

SCHWENDEMANN, WADE

Provider ID: 277304
Board Certified Specialty: No
WADE D SCHWENDEMANN
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-6710
Fax: (858) 966-6711
 After Hours Phone: (858)
966-6710
Provider Gender: Male
NPI: 1477563302
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, TRI CITY
MEDICAL CTR, Sharp
Grossmont Hospital, Sharp
Grossmont Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL **MEDICINE**

SHANNON, KELLI

Provider ID: 208474
Board Certified Specialty: No
KELLI K SHANNON
 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
 Phone: (858) 966-6710
Fax: (858) 966-6711
 After Hours Phone: (858)
966-6710
Provider Gender: Female
NPI: 1922156397
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL **MEDICINE**

D3. Directorio de proveedores especialistas

WESTERMANN, MELISSA

Provider ID: 277353

Board Certified Specialty: No

MELISSA L WESTERMANN

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1760730758

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,

EARL AND LORRAINE MILLER
CHILDRENS HSP, LONG

BEACH MEMORIAL MED CTR,
UNIVERSITY OF CALIFORNIA

IRVINE MED CTR, SHARP
MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,
Sharp Grossmont Hospital,

Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA

Provider ID: 287084

Board Certified Specialty: No

MELISSA L WESTERMANN

7910 FROST ST STE 220
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1760730758

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,

EARL AND LORRAINE MILLER
CHILDRENS HSP, LONG

BEACH MEMORIAL MED CTR,
UNIVERSITY OF CALIFORNIA

IRVINE MED CTR, SHARP
MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,
Sharp Grossmont Hospital,

Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA

Provider ID: 242522

Board Certified Specialty: No

MELISSA L WESTERMANN

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 939-4102

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1760730758

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,

EARL AND LORRAINE MILLER
CHILDRENS HSP, LONG

BEACH MEMORIAL MED CTR,
UNIVERSITY OF CALIFORNIA

IRVINE MED CTR, SHARP
MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,
Sharp Grossmont Hospital,

Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

WILLIAMS, KRISTIN

Provider ID: 277383

Board Certified Specialty: No

KRISTIN M WILLIAMS

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

D3. Directorio de proveedores especialistas

966-6710
Provider Gender: Female
NPI: 1992847131
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, SAN MATEO MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, CALIFORNIA PACIFIC MED CTR, CALIFORNIA PACIFIC MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE

WILLIAMS, KRISTIN

Provider ID: 277387
Board Certified Specialty: No
KRISTIN M WILLIAMS
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female

NPI: 1992847131
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, SAN MATEO MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, CALIFORNIA PACIFIC MED CTR, CALIFORNIA PACIFIC MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE

WOLF, RICHARD

Provider ID: 209253
Board Certified Specialty: No
RICHARD B WOLF
4910 DIRECTORS PL STE 200
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1497713846
Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

NEONATAL / PERINATAL MEDICINE

BAI-TONG, SHIYU

Provider ID: 283285
Board Certified Specialty: No
SHIYU S BAI-TONG
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5818
After Hours Phone: (858) 966-5818
Provider Gender: Female
NPI: 1528454188
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO


D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

CARROLL, JEANNE

Provider ID: 205727

Board Certified Specialty: Yes
JEANNE M CARROLL

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5818
Fax: (858) 966-7483

 After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1386928224


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE


DELROSARIO, PAMELA

Provider ID: 295000

Board Certified Specialty: No
PAMELA G DELROSARIO

 3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

 Phone: (858) 966-5888

 After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1952691941

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

FLEMING, SARAH

Provider ID: 205645

Board Certified Specialty: No
SARAH E FLEMING


 4077 5TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 260-7046
Fax: (619) 686-3843

 After Hours Phone: (619)
260-7046

Provider Gender: Female

NPI: 1679809826


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

GLENN, TARA

Provider ID: 283159

Board Certified Specialty: No
TARA JACKSON GLENN

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5818
Fax: (858) 966-7483

 After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1992060974


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER


D3. Directorio de proveedores especialistas



 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

HIETALATI, SAMANTHA


Provider ID: 294251
Board Certified Specialty: Yes
SAMANTHA M HIETALATI
 3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
 Phone: (858) 966-5888
Fax: (858) 249-5839
 After Hours Phone: (858)
966-5888
Provider Gender: Female
NPI: 1245617489
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE



HONOLD, JOSE

Provider ID: 205941
Board Certified Specialty: No
JOSE A HONOLD
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5818
Fax: (858) 966-7483
 After Hours Phone: (858)
966-5818

Provider Gender: Male
NPI: 1093886855
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PIONEERS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, EL CENTRO REGIONAL
MEDICAL CENTER, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N



 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE



HONOLD, JOSE

Provider ID: 242881
Board Certified Specialty: No
JOSE A HONOLD
 4077 5TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 691-7000
 After Hours Phone: (619)
691-7000



Provider Gender: Male
NPI: 1093886855
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PIONEERS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, EL CENTRO REGIONAL
MEDICAL CENTER, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

LANE, BRIAN

Provider ID: 205707
Board Certified Specialty: No
BRIAN P LANE
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-5818

D3. Directorio de proveedores especialistas

Fax: (858) 966-7483

☎ After Hours Phone: (858) 966-5818

Provider Gender: Male

NPI: 1427129287

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS MEMORIAL

HOSPITAL, SHARP CHULA

VISTA MED CTR, SOUTHWEST

HEALTHCARE INLAND VALLEY

HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

LE, CRYSTAL

Provider ID: 205630

Board Certified Specialty: No
CRYSTAL N LE

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5818

Fax: (858) 966-7483

☎ After Hours Phone: (858) 966-5818

Provider Gender: Female

NPI: 1003028416

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, SOUTHWEST

HEALTHCARE INLAND VALLEY

HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

MARC-AURELE, KRISHELLE

Provider ID: 206210

Board Certified Specialty: No
KRISHELLE L MARC-AURELE

📍 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

☎ Phone: (858) 966-8022

Fax: (858) 966-8457

☎ After Hours Phone: (858) 966-8022

Provider Gender: Female

NPI: 1952503435

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,

UCSD LA JOLLA JOHN SALLY

THORNTON, TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

MARC-AURELE, KRISHELLE

Provider ID: 206208

Board Certified Specialty: No
KRISHELLE L MARC-AURELE

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5818

Fax: (858) 966-7483

☎ After Hours Phone: (858) 966-5818

Provider Gender: Female

NPI: 1952503435

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,

UCSD LA JOLLA JOHN SALLY


D3. Directorio de proveedores especialistas

THORNTON, TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

MARC-AURELE, KRISHELLE

Provider ID: 206206

Board Certified Specialty: No
KRISHELLE L MARC-AURELE

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (619) 543-3812

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY

THORNTON, TRI CITY
MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


NEONATAL / PERINATAL MEDICINE

MATOBA, NANA

Provider ID: 297974

Board Certified Specialty: No
NANA MATOBA



 3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

 Phone: (858) 966-5888
Fax: (858) 249-5839

 After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1801952197

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Japanese


Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM



 Website: N/A

NEONATAL / PERINATAL MEDICINE

MATOBA, NANA

Provider ID: 297975



Board Certified Specialty: No
NANA MATOBA

 4077 5TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 260-7046
Fax: (619) 686-3843

 After Hours Phone: (619)
260-7046

Provider Gender: Female

NPI: 1801952197


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Japanese


Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

MATOBA, NANA

Provider ID: 299894

Board Certified Specialty: No
NANA MATOBA



 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5888
Fax: (858) 966-7483

 After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1801952197


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Japanese


D3. Directorio de proveedores especialistas


Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


NEONATAL / PERINATAL **MEDICINE**

MCCULLEY, DAVID

Provider ID: 277177

Board Certified Specialty: No
DAVID J MCCULLEY

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 *Phone: (858) 966-5818*

Fax: (858) 966-7483

 *After Hours Phone: (858)*
966-5818

Provider Gender: Male


NPI: 1235304155


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

NEONATAL / PERINATAL


MEDICINE


MESTAN, KAREN

Provider ID: 285932

Board Certified Specialty: No
KAREN K MESTAN

 3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

 *Phone: (858) 966-5888*

 *After Hours Phone: (858)*
966-5888

Provider Gender: Female

NPI: 1942253356

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


NEONATAL / PERINATAL **MEDICINE**

NIEMI, ANNA-KAISA


Provider ID: 262157

Board Certified Specialty: No
ANNA-KAISA NIEMI

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 *Phone: (858) 966-5818*


Fax: (858) 966-7483

 *After Hours Phone: (858)*
966-5818

Provider Gender: Female

NPI: 1497941397

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Finnish, French,
German, Spanish, Swedish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL


HOSPITAL ENCINITAS,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


NEONATAL / PERINATAL **MEDICINE**


NIEMI, ANNA-KAISA

Provider ID: 262158

Board Certified Specialty: No
ANNA-KAISA NIEMI

 4077 5TH AVE
SAN DIEGO, CA 92103

 *Phone: (619) 260-7107*

 *After Hours Phone: (619)*
260-7107

Provider Gender: Female

NPI: 1497941397

 *Provider English Spoken: Y*
 *Provider Language(s)*

Spoken: Finnish, French,
German, Spanish, Swedish
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

D3. Directorio de proveedores especialistas


DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301822

Board Certified Specialty: No
KATHERINE N NYMAN

 4077 5TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 260-7046
Fax: (619) 686-3843

 After Hours Phone: (619)
260-7046

Provider Gender: Female

NPI: 1003260951

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO



Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301819

Board Certified Specialty: No
KATHERINE N NYMAN


 3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

 Phone: (858) 966-5888
Fax: (858) 249-5839

 After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1003260951

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

ODONNELL, F

Provider ID: 205578

Board Certified Specialty: No
F D ODONNELL

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5818
Fax: (858) 966-7483

 After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1477625325

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
UCSF BENIOFF CHILDREN'S
HOSPITAL OAKLAND,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

RAMOS, CARLOS

Provider ID: 206060

Board Certified Specialty: No
CARLOS G RAMOS

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-3759

D3. Directorio de proveedores especialistas

Fax: (619) 543-3812

☎ After Hours Phone: (619) 543-3759

Provider Gender: Male

NPI: 1205047545

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, EL CENTRO
REGIONAL MEDICAL CENTER,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

SAJTI, ENIKO

Provider ID: 206171

Board Certified Specialty: No
ENIKO C SAJTI

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (619) 543-3759

Fax: (619) 543-3812

☎ After Hours Phone: (619) 543-3759

Provider Gender: Female

NPI: 1649433103

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES

Provider ID: 303904

Board Certified Specialty: No
CHARLES W SAUER

📍 3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5888

Fax: (858) 249-5839

☎ After Hours Phone: (858) 966-5888

Provider Gender: Male

NPI: 1538388988

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR
HEALTH, SCRIPPS MEMORIAL

HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES

Provider ID: 303906

Board Certified Specialty: No
CHARLES W SAUER

📍 4077 5TH AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 260-7046

☎ After Hours Phone: (619) 260-7046




Provider Gender: Male

NPI: 1538388988

☑ Provider English Spoken: Y
Cultural Competency: N





Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST

D3. Directorio de proveedores especialistas

HEALTHCARE RANCHO
SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE





SONG, RICHARD




Provider ID: 206143
Board Certified Specialty: No
RICHARD S SONG
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-5818
Fax: (858) 966-7483
 After Hours Phone: (858)
966-5818
Provider Gender: Male
NPI: 1881893477
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR HEALTH,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, PALOMAR

MEDICAL CENTER,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE



SPEZIALE, MARK

Provider ID: 206126
Board Certified Specialty: No
MARK V SPEZIALE
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-5888
Fax: (858) 966-7483
 After Hours Phone: (858)
966-5888
Provider Gender: Male
NPI: 1801978143
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL, SCRIPPS

MERCY HOSPITAL, UCSD
MEDICAL CTR, UCSD MEDICAL
CTR, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

SUTTNER, DENISE

Provider ID: 265085
Board Certified Specialty: No
DENISE M SUTTNER
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-5818
Fax: (858) 966-7483
 After Hours Phone: (858)
966-5818
Provider Gender: Female
NPI: 1457433799
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL, SCRIPPS


D3. Directorio de proveedores especialistas


MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

SWEENEY, NATHALY

Provider ID: 206182

Board Certified Specialty: No
NATHALY M SWEENEY

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5818

Fax: (858) 966-7483

 After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1164572632


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

VOLLER, STEPHANNIE

Provider ID: 303808

Board Certified Specialty: No
STEPHANNIE M VOLLER

 3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

 Phone: (858) 966-5888

Fax: (858) 249-5839

 After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1417121971

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE


VOLLER, STEPHANNIE

Provider ID: 303807

Board Certified Specialty: No
STEPHANNIE M VOLLER

 8001 FROST ST
SAN DIEGO, CA 92123

 Phone: (858) 966-8052
Fax: (858) 966-7789

 After Hours Phone: (858)
966-8052

Provider Gender: Female

NPI: 1417121971

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

VOLLER, STEPHANNIE

Provider ID: 303806

Board Certified Specialty: No
STEPHANNIE M VOLLER

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5888

Fax: (858) 966-7483

 After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1417121971

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

D3. Directorio de proveedores especialistas

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

WEISS, KATHERINE

Provider ID: 264677

Board Certified Specialty: No
KATHERINE J WEISS


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5818
Fax: (858) 966-7483

 After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1053541862

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


NEONATAL / PERINATAL MEDICINE

WEST, JULIE

Provider ID: 297073

Board Certified Specialty: No
JULIE E WEST

 3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

 Phone: (858) 966-5888
Fax: (858) 249-5839

 After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1811151848

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEPHROLOGY

BALBOA NEPHROLOGY MED GRP INC,

Provider ID: 308472

BALBOA NEPHROLOGY MED
GRP INC

 8010 FROST ST STE 100
SAN DIEGO, CA 92123

 Phone: (858) 637-4700
Fax: (858) 637-4701

 After Hours Phone: (858)
637-4700

NPI: 1316997505


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: No

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: www.balboacare.c
om


NEPHROLOGY

QUEVEDO, JUAN

Provider ID: 269998

Board Certified Specialty: No
JUAN M QUEVEDO

 995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102

 Phone: (619) 263-9729
Fax: (619) 263-9730

 After Hours Phone: (619)
263-9729

Provider Gender: Male

NPI: 1093902496

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, RIVERSIDE
COMMUNITY HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

D3. Directorio de proveedores especialistas


NEPHROLOGY

SHAH, MITA

Provider ID: 262230

Board Certified Specialty: No
MITA M SHAH

 8010 FROST ST STE 510
SAN DIEGO, CA 92123

 Phone: (858) 637-4700

Fax: (858) 637-4701

 After Hours Phone: (858)
637-4700

Provider Gender: Female

NPI: 1194773010


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


NEPHROLOGY

ZHONG, YAN

Provider ID: 296054

Board Certified Specialty: No
YAN ZHONG

 4060 4TH AVE STE 220
SAN DIEGO, CA 92103

 Phone: (619) 299-2350


Fax: (619) 297-8379

 After Hours Phone: (619)
299-2350

Provider Gender: Female

NPI: 1467683540

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, LAC RANCHO

LOS AMIGOS NATIONAL
REHAB CENTER, SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, KECK

HOSPITAL OF USC, Los Angeles

General Medical Center,

SELECT SPECIALTY HOSPITAL

SAN DIEGO, SELECT

SPECIALTY HOSPITAL SAN

DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEPHROLOGY

ZHONG, YAN

Provider ID: 296053

Board Certified Specialty: No
YAN ZHONG

 4060 4TH AVE STE 220
SAN DIEGO, CA 92103


 Phone: (619) 299-2350

Fax: (619) 297-8379

 After Hours Phone: (619)
299-2350

Provider Gender: Female

NPI: 1467683540

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, LAC RANCHO

LOS AMIGOS NATIONAL

REHAB CENTER, SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, KECK

HOSPITAL OF USC, Los Angeles

General Medical Center,

SELECT SPECIALTY HOSPITAL

SAN DIEGO, SELECT

SPECIALTY HOSPITAL SAN

DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY

BEVINS, ELIZABETH


Provider ID: 241943

Board Certified Specialty: No
ELIZABETH A BEVINS

 4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1013395151

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

D3. Directorio de proveedores especialistas

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 206005

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

NEUROLOGY

BUI, JONATHAN


Provider ID: 303227

Board Certified Specialty: No


JONATHAN D BUI

 3030 CHILDRENS WAY FL 4

SAN DIEGO, CA 92123

 Phone: (858) 966-5819


Fax: (858) 966-4930

 After Hours Phone: (858) 966-5819

Provider Gender: Male

NPI: 1730247974

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish, Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

NEUROLOGY


BUI, JONATHAN

Board Certified Specialty: No

JONATHAN D BUI

 8001 FROST ST

SAN DIEGO, CA 92123


 Phone: (858) 966-5999


Fax: (858) 966-4930

 After Hours Phone: (858) 966-5999

Provider Gender: Male

NPI: 1730247974

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish, Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

NEUROLOGY

COUGHLIN, DAVID

Provider ID: 240951


Board Certified Specialty: No

DAVID G COUGHLIN

 200 W ARBOR DR


SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1740543784

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

NEUROLOGY

COUGHLIN, DAVID


Provider ID: 304172

Board Certified Specialty: No

DAVID G COUGHLIN

 6655 ALVARADO RD

SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1740543784


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Website: N/A

NEUROLOGY

COUGHLIN, DAVID

Provider ID: 240949

Board Certified Specialty: Yes

D3. Directorio de proveedores especialistas

DAVID G COUGHLIN

4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1740543784

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

DOVE, KATHERINE

Provider ID: 302784

Board Certified Specialty: No

KATHERINE M DOVE

3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123

Phone: (858) 966-5819

Fax: (858) 966-4930

After Hours Phone: (858)
966-5819

Provider Gender: Female

NPI: 1033642574

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

DUNN-PIRIO, ANASTASIE

Provider ID: 203235

Board Certified Specialty: No

ANASTASIE M DUNN-PIRIO

200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

Phone: (619) 543-3500

Fax: (888) 539-8781

After Hours Phone: (619)
543-3500

Provider Gender: Female

NPI: 1700177136

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

DUNN-PIRIO, ANASTASIE

Provider ID: 304160

Board Certified Specialty: No

ANASTASIE M DUNN-PIRIO

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1700177136

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

NEUROLOGY

FREDERICK, ALIYA

Provider ID: 283152

Board Certified Specialty: Yes

ALIYA L FREDERICK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5999

Fax: (858) 576-8412

After Hours Phone: (858)
966-5999

Provider Gender: Female

NPI: 1548657992

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*


NEUROLOGY

GOLD, JEFFREY

Provider ID: 303287

*Board Certified Specialty: No
JEFFREY J GOLD*

 3030 CHILDRENS WAY FL
4
SAN DIEGO, CA 92123

 *Phone: (858) 966-5819*

Fax: (858) 966-4930

 *After Hours Phone: (858)
966-5819*

Provider Gender: Male

NPI: 1568773984

 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND, SHARP MEMORIAL
HOSPITAL*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


NEUROLOGY

GOLD, JEFFREY

Provider ID: 283335

*Board Certified Specialty: No
JEFFREY J GOLD*

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 *Phone: (858) 966-5999*

Fax: (858) 576-8412

 *After Hours Phone: (858)
966-5999*

Provider Gender: Male

NPI: 1568773984

 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND, SHARP MEMORIAL
HOSPITAL*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

NEUROLOGY

GUIDO-ESTRADA, NATALIE


Provider ID: 303271

*Board Certified Specialty: No
NATALIE M GUIDO-ESTRADA*

 3030 CHILDRENS WAY FL
4
SAN DIEGO, CA 92123

 *Phone: (858) 966-5819*

Fax: (858) 966-4930

 *After Hours Phone: (858)
966-5819*

Provider Gender: Female

NPI: 1528353521

 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


NEUROLOGY


GUNDOGDU, MELEK

Provider ID: 201623

*Board Certified Specialty: No
MELEK B GUNDOGDU*

 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103


 *Phone: (619) 543-3500*

 *After Hours Phone: (619)
543-3500*

Provider Gender: Female

NPI: 1437253671

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Turkish*

Cultural Competency: N


*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

D3. Directorio de proveedores especialistas

 Website: N/A

NEUROLOGY


HANNAWI, ANDREW

Provider ID: 283154

Board Certified Specialty: Yes

ANDREW P HANNAWI

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5999

Fax: (858) 576-8412

 After Hours Phone: (858)
966-5999

Provider Gender: Male

NPI: 1194179135

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


IRAGUIMADOZ, VICENTE

Provider ID: 304154

Board Certified Specialty: No

VICENTE J IRAGUIMADOZ

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1053326710

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

NEUROLOGY

KHAMISHON, BORIS


Provider ID: 269923


Board Certified Specialty: No

BORIS KHAMISHON

 6699 ALVARADO RD STE
2301


SAN DIEGO, CA 92120

 Phone: (619) 582-2595

 After Hours Phone: (619)
582-2595

Provider Gender: Male

NPI: 1104922038

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: ALVARADO
HOSPITAL LLC


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-4:00PM
F 8:00AM-3:00PM

 Website: N/A

NEUROLOGY

KIMMCMANUS, OLIVIA


Provider ID: 303229

Board Certified Specialty: No

OLIVIA S KIMMCMANUS

 3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123

 Phone: (858) 966-5819

Fax: (858) 966-4930

 After Hours Phone: (858)
966-5819

Provider Gender: Female

NPI: 1174870067

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, CHILDRENS
HOSPITAL OF ORANGE


COUNTY, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY

LAVERTY, CHAMINDRA

D3. Directorio de proveedores especialistas

Provider ID: 303258

Board Certified Specialty: No
CHAMINDRA G LAVERTY

3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123

Phone: (858) 966-5819

Fax: (858) 966-4930

After Hours Phone: (858)
966-5819

Provider Gender: Female

NPI: 1538320395

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

LEE, DAVID

Provider ID: 246263

Board Certified Specialty: No
DAVID J LEE

200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871884130

Provider English Spoken: Y

Provider Language(s)
Spoken: Korean

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

LEE, DAVID

Provider ID: 304198

Board Certified Specialty: No
DAVID J LEE

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871884130

Provider English Spoken: Y

Provider Language(s)
Spoken: Korean

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

NEUROLOGY

LONGARDNER, KATHERINE

Provider ID: 304197

Board Certified Specialty: No
KATHERINE M LONGARDNER

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1801215926

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

NEUROLOGY

LONGARDNER, KATHERINE

Provider ID: 268346

Board Certified Specialty: No
KATHERINE M LONGARDNER

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1801215926

Provider English Spoken: Y


D3. Directorio de proveedores especialistas


Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


QAYOUMI, WALI

Provider ID: 284370

Board Certified Specialty: No
WALI Z QAYOUMI

 4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121


 Phone: (619) 294-3746

Fax: (888) 539-8781

 After Hours Phone: (619)
294-3746

Provider Gender: Male

NPI: 1093178220

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY

QAYOUMI, WALI

Provider ID: 304161

Board Certified Specialty: No

WALI Z QAYOUMI

 6655 ALVARADO RD

SAN DIEGO, CA 92120


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1093178220

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

NEUROLOGY

RIGGINS, NINA


Provider ID: 304200

Board Certified Specialty: No

NINA Y RIGGINS

 6655 ALVARADO RD

SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1568655264

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: UCSF
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

NEUROLOGY

RIGGINS, NINA

Provider ID: 285968

Board Certified Specialty: No
NINA Y RIGGINS

 4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1568655264

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: UCSF
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*


NEUROLOGY



SCHORR, EMILY

Provider ID: 305020
Board Certified Specialty: No
EMILY M SCHORR

 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*

Provider Gender: Female
NPI: 1255862041

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

NEUROLOGY



SCHORR, EMILY

Provider ID: 305021
Board Certified Specialty: No
EMILY M SCHORR

 6655 ALVARADO RD
SAN DIEGO, CA 92120
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*

Provider Gender: Female
NPI: 1255862041

 *Provider English Spoken: Y*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*


NEUROLOGY



SCHORR, EMILY

Provider ID: 305023
Board Certified Specialty: No
EMILY M SCHORR

 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*

Provider Gender: Female
NPI: 1255862041



 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):



N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*




NEUROLOGY

SWEAT, MARIE

Provider ID: 303831
Board Certified Specialty: No
MARIE E SWEAT

 3030 CHILDRENS WAY FL
4
SAN DIEGO, CA 92123
 *Phone: (858) 966-5819*
Fax: (858) 966-4930



 *After Hours Phone: (858)
966-5819*
Provider Gender: Female
NPI: 1861929036
 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*



NEUROLOGY

YANG, JENNIFER

Provider ID: 301593
Board Certified Specialty: No
JENNIFER H YANG

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 *Phone: (858) 966-5999*
Fax: (858) 576-8412

 *After Hours Phone: (858)
966-5999*
Provider Gender: Female
NPI: 1528420619


 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Chinese, Mandarin*
Cultural Competency: N
*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

D3. Directorio de proveedores especialistas

American Sign Language (ASL): **ZIMBRIC, MICHAEL**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY

ZIMBRIC, MICHAEL


Provider ID: 303284

Board Certified Specialty: No

MICHAEL R ZIMBRIC

 3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123


 Phone: (858) 966-5819

Fax: (858) 966-4930

 After Hours Phone: (858)
966-5819

Provider Gender: Male

NPI: 1487819546

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL


OAKLAND


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY

Provider ID: 206272

Board Certified Specialty: No

MICHAEL R ZIMBRIC

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5999

Fax: (858) 966-4930

 After Hours Phone: (858)
966-5999

Provider Gender: Male

NPI: 1487819546

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY CHILD


GRAVES, JENNIFER


Provider ID: 261037

Board Certified Specialty: No

JENNIFER S GRAVES

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1992849863

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

Medical Center At Mission Bay,

UCSF MEDICAL CENTER AT

MOUNT ZION, UCSF MEDICAL

CENTER, UCSD MEDICAL CTR,

UCSD LA JOLLA JOHN SALLY

THORNTON, RADY

CHILDRENS HOSPITAL SAN

DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY CHILD


GUIDO-ESTRADA, NATALIE

Provider ID: 205825

Board Certified Specialty: No

NATALIE M GUIDO-ESTRADA

 8001 FROST ST
SAN DIEGO, CA 92123

 Phone: (858) 966-5999

Fax: (858) 966-4930

 After Hours Phone: (858)
966-5999

Provider Gender: Female

NPI: 1528353521

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY CHILD

SAHAGIAN, MICHELLE

Provider ID: 206074

Board Certified Specialty: No
MICHELLE L SAHAGIAN

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5999

Fax: (858) 966-4930

 After Hours Phone: (858)
966-5999

Provider Gender: Female

NPI: 1275604035

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


ASLIAN, AZITA

Provider ID: 308270


Board Certified Specialty: No

AZITA ASLIAN

 950 S EUCLID AVE
SAN DIEGO, CA 92114


 Phone: (619) 662-4100

Fax: (619) 662-4158

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1851667661

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Faroese, Fataleka

Cultural Competency: N

Hospital Affiliation: Hemet

Global Medical Center, Menifee

Global Medical Center,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY

HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


BLAKE, GARY

Provider ID: 290731

Board Certified Specialty: No

GARY D BLAKE

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1497738439

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

COHEN, MANSOUR


Provider ID: 205940

Board Certified Specialty: Yes

MANSOUR J COHEN

 7695 CARDINAL CT STE
390

SAN DIEGO, CA 92123

 Phone: (858) 279-8111


Fax: (858) 279-4703

 After Hours Phone: (858)
279-8111

Provider Gender: Male

NPI: 1346225356

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Farsi,

Hebrew, Persian, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
9:00AM-4:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

Email:

JOSHUACOHENMD@YAHOO.COM

OBSTETRICS / GYNECOLOGY

DEL CORE, LAURA

Provider ID: 291330

Board Certified Specialty: No

LAURA M DEL CORE

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

DEL CORE, LAURA

Provider ID: 291326

Board Certified Specialty: No

LAURA M DEL CORE

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

DEL CORE, LAURA

Provider ID: 291327

Board Certified Specialty: No

LAURA M DEL CORE

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

DEL CORE, LAURA

Provider ID: 291329

Board Certified Specialty: No

LAURA M DEL CORE

16950 VIA TAZON

SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

DEL CORE, LAURA

Provider ID: 291328

Board Certified Specialty: No

LAURA M DEL CORE

6030 VILLAGE WAY
SAN DIEGO, CA 92130

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291338

Board Certified Specialty: No

AMY M DRIEBE

 6030 VILLAGE WAY
SAN DIEGO, CA 92130


 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1730507567

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: SHARP


MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

OBSTETRICS / GYNECOLOGY


DRIEBE, AMY

Provider ID: 291339

Board Certified Specialty: No

AMY M DRIEBE

 16950 VIA TAZON
SAN DIEGO, CA 92127

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1730507567

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291340

Board Certified Specialty: No

AMY M DRIEBE

 330 LEWIS ST
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1730507567

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291337

Board Certified Specialty: No
AMY M DRIEBE

 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1730507567

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

OBSTETRICS / GYNECOLOGY


FRUGONI, GINA


Provider ID: 270056

Board Certified Specialty: No

GINA R FRUGONI

 4168 FRONT ST
SAN DIEGO, CA 92103

 *Phone: (619) 400-5074*

 *After Hours Phone: (619) 400-5074*

Provider Gender: Female

NPI: 1578729315

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):




D3. Directorio de proveedores especialistas



N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

GROGAN, BRIAN

Provider ID: 296001
Board Certified Specialty: No
BRIAN D GROGAN

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700
Provider Gender: Male
NPI: 1235218439
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Website: N/A



OBSTETRICS / GYNECOLOGY

GROGAN, BRIAN

Provider ID: 296002
Board Certified Specialty: No
BRIAN D GROGAN




 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4682
 After Hours Phone: (858)

279-0925
Provider Gender: Male
NPI: 1235218439
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Website: N/A



OBSTETRICS / GYNECOLOGY

GUPTA, PRATIMA

Provider ID: 257548
Board Certified Specialty: No
PRATIMA GUPTA
 4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1891749842

Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):


N
 Accessibility: CONTACT PROVIDER
 Hours: M-F

8:00AM-5:00PM
 Website: N/A




OBSTETRICS / GYNECOLOGY

GUPTA, PRATIMA

Provider ID: 257547
Board Certified Specialty: No
PRATIMA GUPTA

 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273



Provider Gender: Female
NPI: 1891749842
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT

Provider ID: 278917
Board Certified Specialty: No
SCOTT A HARVEY

 4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

D3. Directorio de proveedores especialistas

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1457662868

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT

Provider ID: 278915

Board Certified Specialty: No

SCOTT A HARVEY

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1457662868

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY


HOANG, MAI

Provider ID: 208294

Board Certified Specialty: No
MAI P HOANG


 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1104143593

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


HOM-TEDLA, MARIANNE


Provider ID: 242751

Board Certified Specialty: No
MARIANNE S HOM-TEDLA

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1972047397

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY

KLEIN, DAVID


Provider ID: 271561

Board Certified Specialty: No

DAVID A KLEIN

 6030 VILLAGE WAY
SAN DIEGO, CA 92130


 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1780073635

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

D3. Directorio de proveedores especialistas

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

KLEIN, DAVID

Provider ID: 271560

Board Certified Specialty: No

DAVID A KLEIN

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1780073635

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

KOHATSU, KAREN

Provider ID: 205481

Board Certified Specialty: No

KAREN E KOHATSU

11939 RANCHO BERNARDO
RD STE 110

SAN DIEGO, CA 92128

Phone: (858) 618-1156

Fax: (858) 618-3314

After Hours Phone: (858)
618-1156

Provider Gender: Female

NPI: 1679517239

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH
8:30AM-4:30PM
F 8:30AM-2:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH

Provider ID: 208681

Board Certified Specialty: No

LEAH M LAMALE-SMITH

4910 DIRECTORS PL STE
200

SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1396904876

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, EISENHOWER MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH

Provider ID: 285519

Board Certified Specialty: No

LEAH M LAMALE-SMITH

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1396904876

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR, EISENHOWER MEDICAL
CTR


D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY


MACKAY, GILLIAN

Provider ID: 200965

Board Certified Specialty: No
GILLIAN MACKAY

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770702177


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


MACKAY, GILLIAN

Provider ID: 303064

Board Certified Specialty: No

GILLIAN MACKAY

 6030 VILLAGE WAY
SAN DIEGO, CA 92130

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770702177

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OBSTETRICS / GYNECOLOGY


MANI, PARVIN

Provider ID: 242345

Board Certified Specialty: No
PARVIN P MANI

 5555 RESERVOIR DR STE
208

SAN DIEGO, CA 92120


 Phone: (619) 583-7555

Fax: (619) 583-0555

 After Hours Phone: (619)
583-7555

Provider Gender: Female

NPI: 1518925015

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Faroese, Farsi

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 10\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

Email:

PARVINMANI@YAHOO.COM


OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA

Provider ID: 285742

Board Certified Specialty: No
AUDRA R MEADOWS

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1467585521

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 16\None

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA

Provider ID: 285741

*Board Certified Specialty: No
AUDRA R MEADOWS*

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1467585521

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY*


*THORNTON, UCSD MEDICAL
CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


OBSTETRICS / GYNECOLOGY

MELENDEZ, ARIANA

Provider ID: 299921

*Board Certified Specialty: No
ARIANA L MELENDEZ*

 4168 FRONT ST
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1295232973

 *Provider English Spoken: Y
Cultural Competency: N*

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N
 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*


OBSTETRICS / GYNECOLOGY

MELENDEZ, ARIANA

Provider ID: 299922

*Board Certified Specialty: No
ARIANA L MELENDEZ*

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1295232973

 *Provider English Spoken: Y
Cultural Competency: N*

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N
 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*


OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299982

*Board Certified Specialty: No
CHARLOTTE M PICKETT*

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1447530696


 *Provider English Spoken: Y
Cultural Competency: N*

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*


OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299978

*Board Certified Specialty: No
CHARLOTTE M PICKETT*

 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1447530696

 *Provider English Spoken: Y
Cultural Competency: N*



Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N


D3. Directorio de proveedores especialistas

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OBSTETRICS / GYNECOLOGY **PICKETT, CHARLOTTE**

Provider ID: 299979
Board Certified Specialty: No
CHARLOTTE M PICKETT

 4168 FRONT ST
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*
Fax: (888) 539-8781


 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1447530696

 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 16\None

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


 *Website: N/A*

OBSTETRICS / GYNECOLOGY **PICKETT, CHARLOTTE**

Provider ID: 299981
Board Certified Specialty: No
CHARLOTTE M PICKETT

 16950 VIA TAZON
SAN DIEGO, CA 92127

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1447530696

 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

OBSTETRICS / GYNECOLOGY **PICKETT, CHARLOTTE**

Provider ID: 299980
Board Certified Specialty: No
CHARLOTTE M PICKETT

 6030 VILLAGE WAY
SAN DIEGO, CA 92130

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*


Provider Gender: Female
NPI: 1447530696

 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 16\None

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

OBSTETRICS / GYNECOLOGY **RIVAS, RENEE**

Provider ID: 284298
Board Certified Specialty: No
RENEE N RIVAS

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)*

926-8273

Provider Gender: Female

NPI: 1295263861

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F*
8:00AM-5:00PM


 *Website: N/A*

OBSTETRICS / GYNECOLOGY **SHUCKETT, ARIEL**

Provider ID: 290708
Board Certified Specialty: No
ARIEL SHUCKETT

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*
Fax: (858) 633-4680

 *After Hours Phone: (858) 279-0925*

Provider Gender: Female
NPI: 1245590124

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP

MARY BIRCH HOSP FOR WOMEN AND NEWBORNS

Medi-Cal Open Panel: Yes
Min/Max Age: 16\None

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


OBSTETRICS / GYNECOLOGY

SUYAMA, JULIE

Provider ID: 284291

*Board Certified Specialty: No
JULIE A SUYAMA*


 200 W ARBOR DR
SAN DIEGO, CA 92103


 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1306372800

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

OBSTETRICS / GYNECOLOGY


SUYAMA, JULIE

Provider ID: 284290

*Board Certified Specialty: No
JULIE A SUYAMA*

 4520 EXECUTIVE DR STE
360


SAN DIEGO, CA 92121

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1306372800

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA

Provider ID: 285174

*Board Certified Specialty: No
SAMANTHA L THOMSON*

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1689013468

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: CEDARS
SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA

Provider ID: 285176

*Board Certified Specialty: No
SAMANTHA L THOMSON*

 4168 FRONT ST
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1689013468

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: CEDARS
SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*

Medi-Cal Open Panel: Yes



Min/Max Age: 16\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

D3. Directorio de proveedores especialistas

 Hours: M-F
8:00AM-5:00PM
 Website: N/A


OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER

Provider ID: 290128

Board Certified Specialty: No
JENNIFER C TRUJILLO


 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100
Fax: (619) 662-4158

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1053407593

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OCCUPATIONAL THERAPIST

BOND, KIMBERLEE

Provider ID: 206549

Board Certified Specialty: No
KIMBERLEE A BOND

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1669770939

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OCCUPATIONAL THERAPIST


BOND, KIMBERLEE

Provider ID: 206548

Board Certified Specialty: No
KIMBERLEE A BOND

 8929 UNIVERSITY CENTER
LN STE 200

SAN DIEGO, CA 92122

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1669770939

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):



N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OCCUPATIONAL THERAPIST


LARSEN, JULIE

Provider ID: 258359

Board Certified Specialty: No
JULIE L LARSEN

 8929 UNIVERSITY CENTER
LN STE 200


SAN DIEGO, CA 92122

 Phone: (855) 543-0333
Fax: (858) 657-1809

 After Hours Phone: (855)
543-0333

Provider Gender: Female

NPI: 1497009179

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OCCUPATIONAL THERAPIST


MIKUT, ALYSSA

Provider ID: 258415

Board Certified Specialty: No
ALYSSA M MIKUT

 8929 UNIVERSITY CENTER
LN STE 200

SAN DIEGO, CA 92122

 Phone: (858) 249-0832

D3. Directorio de proveedores especialistas

Fax: (858) 657-1809

📞 After Hours Phone: (858) 249-0832

Provider Gender: Female

NPI: 1952816134

🗨️ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OPHTHALMOLOGY

BANSAL, PREETI

Provider ID: 205620

Board Certified Specialty: Yes
PREETI BANSAL

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123

📞 Phone: (858) 309-7702
Fax: (858) 966-7403

📞 After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1871664631

🗨️ Provider English Spoken: Y

🗨️ Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT

HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL, TRI CITY MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OPHTHALMOLOGY

BAXTER, SALLY

Provider ID: 272788

Board Certified Specialty: No
SALLY L BAXTER

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

📞 Phone: (800) 926-8273
Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1912325184

🗨️ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OPHTHALMOLOGY

BAXTER, SALLY

Provider ID: 272789

Board Certified Specialty: No
SALLY L BAXTER

📍 200 W ARBOR DR STE 101
SAN DIEGO, CA 92103

📞 Phone: (800) 926-8273
Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1912325184

🗨️ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OPHTHALMOLOGY

BEAZER, ALEX

Provider ID: 272803

Board Certified Specialty: No
ALEX P BEAZER

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

📞 Phone: (800) 926-8273
Fax: (888) 539-8781

📞 After Hours Phone: (800)

D3. Directorio de proveedores especialistas

926-8273
Provider Gender: Male
NPI: 1942662168
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OPHTHALMOLOGY

BHATIA, SHAGUN

Provider ID: 240636

Board Certified Specialty: No
SHAGUN K BHATIA

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123

☎ Phone: (858) 309-7702

Fax: (858) 966-7403

📞 After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1104237353

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OPHTHALMOLOGY

CAMP, ANDREW

Provider ID: 260020

Board Certified Specialty: No

ANDREW S CAMP

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123

☎ Phone: (858) 309-7702

Fax: (858) 966-7403

📞 After Hours Phone: (858)
309-7702

Provider Gender: Male

NPI: 1326300377

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

RADY CHILDRENS HOSPITAL

SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OPHTHALMOLOGY

GUALTIERI, CHRISTOPHER

Provider ID: 252313

Board Certified Specialty: Yes

CHRISTOPHER J GUALTIERI

📍 3969 4TH AVE STE 300
SAN DIEGO, CA 92103

☎ Phone: (619) 688-2648

Fax: (619) 688-2626

📞 After Hours Phone: (619)
688-2648

Provider Gender: Male

NPI: 1790769156

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 6\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

Email:

MYNEWEYES@HOTMAIL.COM

OPHTHALMOLOGY

HENNEIN, LAUREN

Provider ID: 297011

Board Certified Specialty: No

LAUREN M HENNEIN

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 309-7702

Fax: (858) 966-7403

📞 After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1699216010

D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
Cultural Competency: N


*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


OPHTHALMOLOGY

HENNEIN, LAUREN


Provider ID: 297009

*Board Certified Specialty: No
LAUREN M HENNEIN*

 *7910 FROST ST STE 200
SAN DIEGO, CA 92123*

 *Phone: (858) 309-7702*

Fax: (858) 966-7403

 *After Hours Phone: (858)
309-7702*

Provider Gender: Female

NPI: 1699216010


 *Provider English Spoken: Y*
Cultural Competency: N


*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

OPHTHALMOLOGY

HUYNH, PAUL


Provider ID: 295645

Board Certified Specialty: No

PAUL D HUYNH

 *4844 UNIVERSITY AVE STE
A*

SAN DIEGO, CA 92105


 *Phone: (619) 283-1303*


Fax: (619) 283-1666

 *After Hours Phone: (619)
283-1303*

Provider Gender: Male

NPI: 1871577056

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese*

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM*

 *Website: N/A*

Email:

DOCTORPAUL@SBCGLOBAL.NET

OPHTHALMOLOGY

HUYNH, PAUL


Provider ID: 245200

Board Certified Specialty: No

PAUL D HUYNH

 *4844 UNIVERSITY AVE STE
A*

SAN DIEGO, CA 92105

 *Phone: (619) 283-1303*


Fax: (619) 283-1666

 *After Hours Phone: (619)
283-1303*

Provider Gender: Male

NPI: 1871577056

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese*

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL


HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM*

 *Website: N/A*

Email:

DOCTORPAUL@SBCGLOBAL.NET

OPHTHALMOLOGY


JACOBSEN, BRADLEY

Provider ID: 302869

Board Certified Specialty: No

BRADLEY H JACOBSEN

 *7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123*

 *Phone: (858) 609-7100*

Fax: (858) 609-7106



 *After Hours Phone: (858)*




D3. Directorio de proveedores especialistas

609-7100
Provider Gender: Male
NPI: 1760845184
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY








KHATIB, NORA

Provider ID: 305375
Board Certified Specialty: No
NORA KHATIB
 4060 4TH AVE STE 640
SAN DIEGO, CA 92103
 Phone: (619) 642-2240
Fax: (619) 642-2245
 After Hours Phone: (619)
642-2240
Provider Gender: Female
NPI: 1538487756
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP CHULA
VISTA MED CTR, GROSSMONT

HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 14\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY






KLINE, LANNING

Provider ID: 239915
Board Certified Specialty: No
LANNING B KLINE
 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1841227477
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

LI, ALEXANDRIA

Provider ID: 272833

Board Certified Specialty: No
ALEXANDRIA L LI
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1841652864
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, SCRIPPS GREEN
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

LIU, YUNXIANG

Provider ID: 210803
Board Certified Specialty: No
YUNXIANG LIU
 7910 FROST ST STE 200
SAN DIEGO, CA 92123
 Phone: (858) 309-7702
 After Hours Phone: (858)
309-7702
Provider Gender: Female

D3. Directorio de proveedores especialistas

NPI: 1770849804


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY


MOLL, ANGELA

Provider ID: 205510

Board Certified Specialty: No
ANGELA M MOLL

 7910 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 309-7702
Fax: (858) 966-7403

 After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1861648602

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY


HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY


MOVAGHAR, MANSOOR

Provider ID: 216412

Board Certified Specialty: No
MANSOOR MOVAGHAR


 7910 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 309-7702

 After Hours Phone: (858)
309-7702

Provider Gender: Male

NPI: 1497792220

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

OHALLORAN, HENRY


Provider ID: 205888

Board Certified Specialty: No
HENRY S OHALLORAN

 7910 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 309-7702

Fax: (858) 966-7403

 After Hours Phone: (858)
309-7702

Provider Gender: Male

NPI: 1235287947

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


PHAN, RYAN

Provider ID: 305445

Board Certified Specialty: No
RYAN PHAN

 10737 CAMINO RUIZ STE
100

SAN DIEGO, CA 92126

 Phone: (858) 549-3200






Fax: (858) 549-3207

 After Hours Phone: (858)
549-3200

Provider Gender: Male

NPI: 1588027213

D3. Directorio de proveedores especialistas



 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Vietnamese*
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

OPHTHALMOLOGY

PHAN, RYAN




Provider ID: 287883
Board Certified Specialty: No
RYAN PHAN

 10737 CAMINO RUIZ
 SAN DIEGO, CA 92126
 *Phone: (858) 549-3200*
Fax: (858) 549-3207
 *After Hours Phone: (858) 549-3200*
Provider Gender: Male
NPI: 1588027213

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Vietnamese*
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*


OPHTHALMOLOGY

PHAN, RYAN

Provider ID: 295646
Board Certified Specialty: No
RYAN PHAN

 10737 CAMINO RUIZ
 SAN DIEGO, CA 92126
 *Phone: (858) 549-3200*
Fax: (858) 549-3207
 *After Hours Phone: (858) 549-3200*

Provider Gender: Male
NPI: 1588027213

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Vietnamese*
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*



OPHTHALMOLOGY

PHAN, RYAN




Provider ID: 302925
Board Certified Specialty: No
RYAN PHAN

 4844 UNIVERSITY AVE STE A
 SAN DIEGO, CA 92105
 *Phone: (619) 283-1303*
Fax: (619) 283-1666

 *After Hours Phone: (619) 283-1303*
Provider Gender: Male
NPI: 1588027213

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Vietnamese*
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

D3. Directorio de proveedores especialistas

OPHTHALMOLOGY

PHAN, RYAN

Provider ID: 295647

Board Certified Specialty: No

RYAN PHAN

4844 UNIVERSITY AVE STE A

SAN DIEGO, CA 92105

Phone: (619) 283-1303

Fax: (619) 283-1666

After Hours Phone: (619) 283-1303

Provider Gender: Male

NPI: 1588027213

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, GROSSMONT HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

PUIG LLANO, MANUEL

Provider ID: 299964

Board Certified Specialty: No

MANUEL PUIG LLANO

4060 4TH AVE STE 610

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1427102979

Provider English Spoken: Y

Provider Language(s)

Spoken: French, German, Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

OPHTHALMOLOGY

SATTERFIELD, KELLIE

Provider ID: 305302

Board Certified Specialty: No

KELLIE R SATTERFIELD

5330 CARROLL CANYON RD STE 210

SAN DIEGO, CA 92121

Phone: (858) 450-1010

Fax: (858) 450-9451

After Hours Phone: (858) 450-1010

Provider Gender: Female

NPI: 1629509336

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 305305

Board Certified Specialty: No

CATHERINE R SHEILS

5330 CARROLL CANYON RD STE 210

SAN DIEGO, CA 92121

Phone: (858) 450-1010

Fax: (858) 450-9451

After Hours Phone: (858) 450-1010

Provider Gender: Female

NPI: 1932605649

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TU
8:30AM-4:00PM

W-F 8:30AM-1:00PM

D3. Directorio de proveedores especialistas

 Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 299936

Board Certified Specialty: No

CATHERINE R SHEILS

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932605649


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OPHTHALMOLOGY


SHEILS, CATHERINE

Provider ID: 305306

Board Certified Specialty: No

CATHERINE R SHEILS

 3939 3RD AVE
SAN DIEGO, CA 92103

 Phone: (800) 765-2737

Fax: (619) 291-6577

 After Hours Phone: (800)
765-2737

Provider Gender: Female

NPI: 1932605649

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU
8:30AM-4:00PM

W-F 8:30AM-1:00PM


 Website: N/A


OPHTHALMOLOGY

SONG, DELU

Provider ID: 302872

Board Certified Specialty: No
DELU SONG

 7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123



 Phone: (858) 609-7100

Fax: (858) 609-7106

 After Hours Phone: (858)
609-7100

Provider Gender: Male

NPI: 1437689536

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY

YAMADA, KENTARO


Provider ID: 295848

Board Certified Specialty: No

KENTARO E YAMADA

 1040 UNIVERSITY AVE STE
B209A

SAN DIEGO, CA 92103

 Phone: (619) 299-1100


Fax: (619) 299-7156

 After Hours Phone: (619)
299-1100

Provider Gender: Male

NPI: 1629047188

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Japanese, Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP


MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL


CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

OPTOMETRIST

AOTO, KIM


Provider ID: 268718

Board Certified Specialty: No


KIM N AOTO

D3. Directorio de proveedores especialistas

 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111


 Phone: (858) 565-8822


Fax: (858) 565-2449

 After Hours Phone: (858)
565-8822

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


 Hours: M 9:00AM-5:00PM

TU 8:30AM-4:30PM

W 7:30AM-4:30PM

TH 9:30AM-5:00PM

F 8:30AM-4:00PM

 Website: N/A

OPTOMETRIST


AOTO, KIM

Provider ID: 296795

Board Certified Specialty: No

KIM N AOTO

 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111


 Phone: (858) 565-8822

Fax: (858) 565-2449

 After Hours Phone: (858)
565-8822

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


 Hours: M 9:00AM-5:00PM

TU 8:30AM-4:30PM

W 7:30AM-4:30PM

TH 9:30AM-5:00PM

F 8:30AM-4:00PM

 Website: N/A

OPTOMETRIST


AOTO, KIM

Provider ID: 268723

Board Certified Specialty: No

KIM N AOTO

 6945 EL CAJON BLVD
SAN DIEGO, CA 92115


 Phone: (800) 898-2020

Fax: (844) 897-3788

 After Hours Phone: (800)
898-2020

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:30AM-5:00PM

 Website: N/A

OPTOMETRIST

JOMOC, CAITLIN


Provider ID: 304156

Board Certified Specialty: No

CAITLIN JOMOC

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861164642

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OPTOMETRIST

JOMOC, CAITLIN


Provider ID: 304155

Board Certified Specialty: No

CAITLIN JOMOC

 16950 VIA TAZON

SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861164642

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

D3. Directorio de proveedores especialistas

OPTOMETRIST

KIM, PHILIP

Provider ID: 287910

Board Certified Specialty: No

PHILIP KIM

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

Provider Gender: Male

NPI: 1376929034

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

SCHWAB, GARY

Provider ID: 290411

Board Certified Specialty: No

GARY G SCHWAB

4290 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 563-0250

Fax: (858) 633-4681

After Hours Phone: (619)
563-0250

Provider Gender: Male

NPI: 1740274372

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

SCHWAB, GARY

Provider ID: 290410

Board Certified Specialty: No

GARY G SCHWAB

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1740274372

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

VO, ANDREW

Provider ID: 201312

Board Certified Specialty: No

ANDREW M VO

200 W ARBOR DR STE 101
SAN DIEGO, CA 92103

Phone: (619) 543-7907

After Hours Phone: (619)
543-7907

Provider Gender: Male

NPI: 1790291565

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

VO, ANDREW

Provider ID: 304147

Board Certified Specialty: No

ANDREW M VO

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790291565

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

D3. Directorio de proveedores especialistas

OPTOMETRIST

YU, CAROL

Provider ID: 301684

Board Certified Specialty: No

CAROL Y YU

16950 VIA TAZON

SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639697451

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

YU, CAROL

Provider ID: 301683

Board Certified Specialty: No

CAROL Y YU

4060 4TH AVE STE 610

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639697451

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

YU, CAROL

Provider ID: 301680

Board Certified Specialty: No

CAROL Y YU

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639697451

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

ORAL MAXILLOFACIAL

SURGEON

DENTICO-OLIN, MARC

Provider ID: 273663

Board Certified Specialty: No

MARC DENTICO-OLIN

501 WASHINGTON ST STE

710

SAN DIEGO, CA 92103

Phone: (619) 295-6774

Fax: (619) 295-6776

After Hours Phone: (619)
295-6774

Provider Gender: Male

NPI: 1629205174

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS GREEN

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ORAL MAXILLOFACIAL

SURGEON

DENTICO-OLIN, MARC

Provider ID: 304727

Board Certified Specialty: No

MARC DENTICO-OLIN

2878 CAMINO DEL RIO S
STE 210

SAN DIEGO, CA 92108

Phone: (619) 298-2200

Fax: (619) 298-2250

After Hours Phone: (619)
298-2200

Provider Gender: Male

NPI: 1629205174


Provider English Spoken: Y


Cultural Competency: N

D3. Directorio de proveedores especialistas

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS GREEN
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

OTOLARYNGOLOGY

BLISS, MORGAN

Provider ID: 272565
Board Certified Specialty: Yes
MORGAN R BLISS

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 309-7701

Fax: (858) 966-8038

 After Hours Phone: (858)
309-7701

Provider Gender: Female

NPI: 1760707657


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY

BRUMUND, KEVIN


Provider ID: 299635

Board Certified Specialty: No

KEVIN T BRUMUND

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033193669

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY

BRUMUND, KEVIN

Provider ID: 299634

Board Certified Specialty: No

KEVIN T BRUMUND

 16950 VIA TAZON

SAN DIEGO, CA 92127


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033193669

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY


CALIFANO, JOSEPH

Provider ID: 299461

Board Certified Specialty: No

JOSEPH A CALIFANO III

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1881652972


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299462

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

JOSEPH A CALIFANO III

8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1881652972

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299457

Board Certified Specialty: No

JOSEPH A CALIFANO III

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1881652972

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

CARVALHO, DANIELA

Provider ID: 205628

Board Certified Specialty: No

DANIELA CARVALHO

3030 CHILDRENS WAY STE 109
SAN DIEGO, CA 92123

Phone: (858) 309-7702

After Hours Phone: (858) 309-7702

Provider Gender: Female

NPI: 1154492916

Provider English Spoken: Y
Provider Language(s)

Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

CARVALHO, DANIELA

Provider ID: 272557

Board Certified Specialty: No

DANIELA CARVALHO

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

Phone: (858) 309-7701

Fax: (858) 966-8038

After Hours Phone: (858) 309-7701

Provider Gender: Female

NPI: 1154492916

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

COFFEY, CHARLES

Provider ID: 299579

Board Certified Specialty: No

CHARLES S COFFEY

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-6631

Fax: (619) 471-0656

After Hours Phone: (619) 543-6631

Provider Gender: Male

NPI: 1932297330

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL


D3. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY

COFFEY, CHARLES

Provider ID: 299583

Board Certified Specialty: No

CHARLES S COFFEY

 8899 UNIVERSITY CENTER LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1932297330

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS


GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

COFFEY, CHARLES


Provider ID: 299582

Board Certified Specialty: No

CHARLES S COFFEY

 16950 VIA TAZON

SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1932297330

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

DECONDE, ADAM


Provider ID: 299567

Board Certified Specialty: No

ADAM S DECONDE

 16950 VIA TAZON

SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1588988919

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

DECONDE, ADAM


Provider ID: 299568

Board Certified Specialty: No


ADAM S DECONDE

 8899 UNIVERSITY CENTER LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1588988919

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

DECONDE, ADAM

Provider ID: 299569

Board Certified Specialty: No

ADAM S DECONDE

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

D3. Directorio de proveedores especialistas

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1588988919

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

MEDICAL CENTER INC,
CHAPMAN GLOBAL MEDICAL
CENTER INC, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

MEDICAL CENTER INC,
CHAPMAN GLOBAL MEDICAL
CENTER INC, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299532

Board Certified Specialty: No

RICK A FRIEDMAN

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982708558

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN
HOSPITAL, CHILDRENS HOSP
OF LOS ANGELES, SOUTH
COAST GLOBAL MEDICAL
CENTER INC, ANAHEIM
GLOBAL MEDICAL CENTER,
ORANGE COUNTY GLOBAL

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299531

Board Certified Specialty: No

RICK A FRIEDMAN

📍 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982708558

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN
HOSPITAL, CHILDRENS HOSP
OF LOS ANGELES, SOUTH
COAST GLOBAL MEDICAL
CENTER INC, ANAHEIM
GLOBAL MEDICAL CENTER,
ORANGE COUNTY GLOBAL

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299530

Board Certified Specialty: No

RICK A FRIEDMAN

📍 16950 VIA TAZON

SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982708558

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN
HOSPITAL, CHILDRENS HOSP
OF LOS ANGELES, SOUTH
COAST GLOBAL MEDICAL
CENTER INC, ANAHEIM
GLOBAL MEDICAL CENTER,
ORANGE COUNTY GLOBAL
MEDICAL CENTER INC,


D3. Directorio de proveedores especialistas

CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


FRIESEN, TZYYNONG

Provider ID: 272604


Board Certified Specialty: Yes

TZYYNONG L FRIESEN

 3030 CHILDRENS WAY FL 1 SAN DIEGO, CA 92123

 Phone: (858) 309-7701

Fax: (858) 966-8038

 After Hours Phone: (858) 309-7701

Provider Gender: Female


NPI: 1952740177


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY

GILANI, SAPIDEH


Provider ID: 299561

Board Certified Specialty: No
SAPIDEH GILANI

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1003825571

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

GILANI, SAPIDEH


Provider ID: 299560

Board Certified Specialty: No
SAPIDEH GILANI

 8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1003825571

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299559

Board Certified Specialty: No
SAPIDEH GILANI

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1003825571

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A




OTOLARYNGOLOGY

GREENE, JACQUELINE

Provider ID: 298396

Board Certified Specialty: No
JACQUELINE J GREENE

D3. Directorio de proveedores especialistas




 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1144583931
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A





OTOLARYNGOLOGY **GREENE, JACQUELINE**

Provider ID: 298397
Board Certified Specialty: No
JACQUELINE J GREENE
 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1144583931
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY





GREENE, JACQUELINE



Provider ID: 272959
Board Certified Specialty: No
JACQUELINE J GREENE
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1144583931

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY







HARRIS, JEFFREY

Provider ID: 299576
Board Certified Specialty: No
JEFFREY P HARRIS
 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1417988783
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

HARRIS, JEFFREY







Provider ID: 299575
Board Certified Specialty: No
JEFFREY P HARRIS
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1417988783
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

HOM, DAVID





Provider ID: 299514
Board Certified Specialty: No
DAVID B HOM



D3. Directorio de proveedores especialistas

 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1659305027
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY




HOM, DAVID


Provider ID: 299515
Board Certified Specialty: No
DAVID B HOM
 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1659305027
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL




CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299511
Board Certified Specialty: No
DAVID B HOM
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (858) 657-8590
 After Hours Phone: (858)
657-8590
Provider Gender: Male
NPI: 1659305027







 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY





HUSSEMAN, JACOB

Provider ID: 301052
Board Certified Specialty: No

JACOB W HUSSEMAN
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1124034053
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

HUSSEMAN, JACOB

Provider ID: 301053
Board Certified Specialty: No
JACOB W HUSSEMAN
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1124034053
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS


D3. Directorio de proveedores especialistas

GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

JIANG, WEN


Provider ID: 272660

Board Certified Specialty: Yes
WEN A JIANG

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123


 Phone: (858) 309-7701

Fax: (858) 966-8038

 After Hours Phone: (858)
309-7701

Provider Gender: Female

NPI: 1659305753

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY

KARI, ELINA


Provider ID: 299446

Board Certified Specialty: No

ELINA KARI

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780860536

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY

KARI, ELINA


Provider ID: 299445

Board Certified Specialty: No

ELINA KARI

 16950 VIA TAZON

SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780860536

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY

KARI, ELINA


Provider ID: 299443


Board Certified Specialty: No

ELINA KARI

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (619) 543-6631

 After Hours Phone: (619)
543-6631

Provider Gender: Female

NPI: 1780860536

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY

D3. Directorio de proveedores especialistas

THORNTON, UCSD MEDICAL  Website: N/A

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Board Certified Specialty: Yes

N ANTHONY E MAGIT

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY


LEUIN, SHELBY

Provider ID: 272637


Board Certified Specialty: No

SHELBY C LEUIN

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 309-7701

Fax: (858) 966-8038

 After Hours Phone: (858)
309-7701

Provider Gender: Female

NPI: 1124230909

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

OTOLARYNGOLOGY


MAGIT, ANTHONY

Provider ID: 272767


Board Certified Specialty: Yes

ANTHONY E MAGIT

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123


 Phone: (855) 309-7701

Fax: (858) 966-4062

 After Hours Phone: (855)
309-7701

Provider Gender: Male

NPI: 1891858379

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299482

Board Certified Specialty: No

ANTHONY E MAGIT

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1891858379

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY


Provider ID: 299481

Board Certified Specialty: No

ANTHONY E MAGIT

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1891858379

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

D3. Directorio de proveedores especialistas

OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299480

Board Certified Specialty: No

ANTHONY E MAGIT

16950 VIA TAZON

SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1891858379

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299590

Board Certified Specialty: No
AKIHIRO MATSUOKA

16950 VIA TAZON

SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669630653

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299591

Board Certified Specialty: No
AKIHIRO MATSUOKA

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669630653

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299592

Board Certified Specialty: No
AKIHIRO MATSUOKA

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669630653

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

NGUYEN, QUYEN

Provider ID: 299603

Board Certified Specialty: No
QUYEN T NGUYEN

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (619) 543-6631

Fax: (619) 543-6532

After Hours Phone: (619)
543-6631

Provider Gender: Female

NPI: 1477524452

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

D3. Directorio de proveedores especialistas

 Website: N/A

OTOLARYNGOLOGY

NGUYEN, QUYEN


Provider ID: 299607

Board Certified Specialty: No

QUYEN T NGUYEN

 8899 UNIVERSITY CENTER LN

SAN DIEGO, CA 92122


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

NGUYEN, QUYEN


Provider ID: 299606

Board Certified Specialty: No

QUYEN T NGUYEN

 16950 VIA TAZON

SAN DIEGO, CA 92127


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

PATEL, VIJAY


Provider ID: 297037

Board Certified Specialty: No

VIJAY PATEL

 3030 CHILDRENS WAY STE 1

SAN DIEGO, CA 92123


 Phone: (858) 309-7701

Fax: (858) 966-8038

 After Hours Phone: (858) 309-7701

Provider Gender: Male

NPI: 1508250747

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, VALLEY CHILDRENS

HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299509


Board Certified Specialty: No

ANDREW M

VAHABZADEH-HAGH

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1346506920

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RONALD

REAGAN UCLA MED CTR,

SANTA MONICA UCLA MED

CTR, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD


MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299508

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
ANDREW M

VAHABZADEH-HAGH

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346506920

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD

REAGAN UCLA MED CTR,

SANTA MONICA UCLA MED

CTR, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH,

ANDREW

Provider ID: 299507

Board Certified Specialty: No

ANDREW M

VAHABZADEH-HAGH

16950 VIA TAZON

SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346506920

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD

REAGAN UCLA MED CTR,

SANTA MONICA UCLA MED

CTR, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299641

Board Certified Specialty: No

DEBORAH WATSON

16950 VIA TAZON

SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346270816

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299642

Board Certified Specialty: No

DEBORAH WATSON

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346270816

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299639

Board Certified Specialty: No

DEBORAH WATSON

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (619) 543-6631

After Hours Phone: (619)
543-6631

Provider Gender: Female

NPI: 1346270816

Provider English Spoken: Y
Cultural Competency: N

D3. Directorio de proveedores especialistas


Hospital Affiliation: SCRIPPS
GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299615

Board Certified Specialty: No
PHILIP A WEISSBROD

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1366590853

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS


GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


OTOLARYNGOLOGY


WEISSBROD, PHILIP

Provider ID: 299610

Board Certified Specialty: No
PHILIP A WEISSBROD

 200 W ARBOR DR STE 505
SAN DIEGO, CA 92103

 Phone: (858) 657-8590

 After Hours Phone: (858)
657-8590

Provider Gender: Male

NPI: 1366590853

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS


GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299614

Board Certified Specialty: No
PHILIP A WEISSBROD

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1366590853

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298412

Board Certified Specialty: No
CAROL H YAN

 16950 VIA TAZON
SAN DIEGO, CA 92127



 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1619237260

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese

Cultural Competency: N


Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY

YAN, CAROL

D3. Directorio de proveedores especialistas

Provider ID: 298414

Board Certified Specialty: No
CAROL H YAN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1619237260

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: Stanford

Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298413

Board Certified Specialty: No
CAROL H YAN

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1619237260

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: Stanford

Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

ALLEN, ELIZABETH

Provider ID: 275756

Board Certified Specialty: No
ELIZABETH S ALLEN

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174814065

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY
THORNTON, SCRIPPS
MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,
UCSD MEDICAL CTR, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS GREEN HOSPITAL,
SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

BROOME, HELEN

Provider ID: 275720

Board Certified Specialty: No
HELEN E BROOME

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1184674145

Provider English Spoken: Y
Cultural Competency: N




Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

D3. Directorio de proveedores especialistas

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

PATHOLOGY ANATOMIC

CLINICAL

BROOME, HELEN

Provider ID: 275721

*Board Certified Specialty: No
HELEN E BROOME*

 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1184674145

 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

PATHOLOGY ANATOMIC

CLINICAL


BUI, JACK

Provider ID: 247581

Board Certified Specialty: No

JACK D BUI

 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1942529821

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL*

CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

PATHOLOGY ANATOMIC

CLINICAL


BUI, JACK

Provider ID: 247580

Board Certified Specialty: No

JACK D BUI

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1942529821

 *Provider English Spoken: Y
Cultural Competency: N*

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

*THORNTON, UCSD MEDICAL
CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


PATHOLOGY ANATOMIC


CLINICAL

QUINTANA, PAULINA

Provider ID: 296765

*Board Certified Specialty: No
QUINTANA, PAULINA*

 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

 *Phone: (619) 266-3332*

Fax: (619) 266-6000

 *After Hours Phone: (619)
266-3332*

Provider Gender: Female

NPI: 1164482477

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

*Hospital Affiliation: PARADISE
VALLEY HOSPITAL*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

D3. Directorio de proveedores especialistas

PATHOLOGY ANATOMIC CLINICAL

ROMA, ANDRES

Provider ID: 275826

Board Certified Specialty: No
ANDRES A ROMA

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1295912657

🗒 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

PATHOLOGY ANATOMIC CLINICAL

SHABAIK, AHMED

Provider ID: 275781

Board Certified Specialty: No
AHMED S SHABAIK

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1679521579

🗒 Provider English Spoken: Y

🗒 Provider Language(s)

Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

PATHOLOGY ANATOMIC CLINICAL

SONG, WEI

Provider ID: 300001

Board Certified Specialty: No

WEI SONG

📍 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1306164157

🗒 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

🌐 Website: N/A

PATHOLOGY ANATOMIC CLINICAL

STEPHENS, LAURA

Provider ID: 300042

Board Certified Specialty: No
LAURA D STEPHENS

📍 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1942561212

🗒 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PATHOLOGY ANATOMIC CLINICAL

VAVINSKAYA, VERA

Provider ID: 275789

Board Certified Specialty: No
VERA VAVINSKAYA

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273


Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174757181

D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

PATHOLOGY ANATOMIC


CLINICAL

WANG, DEHUA

Provider ID: 289153

Board Certified Specialty: No
DEHUA WANG

 *3030 CHILDRENS WAY FL 1*
SAN DIEGO, CA 92123


 *Phone: (858) 966-6776*

Fax: (858) 966-6707

 *After Hours Phone: (858)*
966-6776

Provider Gender: Female

NPI: 1578790655

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

PEDIATRIC ALLERGY /

IMMUNOLOGY


ALKATIB, RHONDA

Provider ID: 291226

Board Certified Specialty: No
RHONDA E ALKATIB

 *2655 CAMINO DEL RIO N*
STE 425

SAN DIEGO, CA 92108


 *Phone: (619) 286-6687*


Fax: (619) 286-6695

 *After Hours Phone: (619)*
286-6687

Provider Gender: Female

NPI: 1417363086

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: ALVARADO
HOSP MED CTR, ALVARADO
HOSPITAL LLC


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

PEDIATRIC ALLERGY /


IMMUNOLOGY


COLLINS, CATHLEEN

Provider ID: 285133

Board Certified Specialty: No
CATHLEEN A COLLINS

 *3020 CHILDRENS WAY*
SAN DIEGO, CA 92123

 *Phone: (858) 966-8800*

 *After Hours Phone: (858)*
966-8800

Provider Gender: Female

NPI: 1205128089

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: LUCILE
SALTER PACKARD CHILDRENS
HOSP, Stanford Health Care,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER

 *Website: N/A*

PEDIATRIC ALLERGY /

IMMUNOLOGY

COLLINS, CATHLEEN


Provider ID: 206083


Board Certified Specialty: No

CATHLEEN A COLLINS

 *3030 CHILDRENS WAY STE*
2

SAN DIEGO, CA 92123

 *Phone: (858) 966-5961*

 *After Hours Phone: (858)*
966-5961

Provider Gender: Female

NPI: 1205128089

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: LUCILE


D3. Directorio de proveedores especialistas

SALTER PACKARD CHILDRENS
HOSP, Stanford Health Care,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC ALLERGY / IMMUNOLOGY


GENG, BOB

Provider ID: 205824

Board Certified Specialty: No
BOB GENG

 3030 CHILDRENS WAY STE
2
SAN DIEGO, CA 92123

 Phone: (858) 966-5961

 After Hours Phone: (858)
966-5961

Provider Gender: Male

NPI: 1356570758


 Provider English Spoken: Y
Cultural Competency: N



Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A


PEDIATRIC ALLERGY / IMMUNOLOGY


GENG, BOB

Provider ID: 205823

Board Certified Specialty: No
BOB GENG


 5776 RUFFIN RD
SAN DIEGO, CA 92123

 Phone: (858) 292-1144

 After Hours Phone: (858)
292-1144

Provider Gender: Male

NPI: 1356570758


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY

GREINER, ALEXANDER

Provider ID: 205697



Board Certified Specialty: No
ALEXANDER N GREINER

 5776 RUFFIN RD

SAN DIEGO, CA 92123
 Phone: (858) 966-4900
 After Hours Phone: (858)
966-4900

Provider Gender: Male

NPI: 1609801299

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, German,
Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-0:00PM

 Website: N/A


PEDIATRIC ALLERGY / IMMUNOLOGY


LEIBEL, SYDNEY

Provider ID: 205724

Board Certified Specialty: No
SYDNEY A LEIBEL


 5776 RUFFIN RD
SAN DIEGO, CA 92123

 Phone: (858) 292-1144

 After Hours Phone: (858)
292-1144

Provider Gender: Male

NPI: 1861666919

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

D3. Directorio de proveedores especialistas


DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC ALLERGY / IMMUNOLOGY


LEIBEL, SYDNEY

Provider ID: 205725

Board Certified Specialty: No
SYDNEY A LEIBEL

 3030 CHILDRENS WAY FL
2 NORTH
SAN DIEGO, CA 92123

 Phone: (858) 966-5961

 After Hours Phone: (858)
966-5961

Provider Gender: Male

NPI: 1861666919


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRIC CARDIOLOGY **BOCK, MATTHEW**

Provider ID: 280463

Board Certified Specialty: No
MATTHEW J BOCK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1356514624

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: LOMA
LINDA UNIVERSITY MED CTR,
LOMA LINDA UNIVERSITY
CHILDRENS HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRIC CARDIOLOGY **BORQUEZ, ALEJANDRO**

Provider ID: 284120

Board Certified Specialty: No
ALEJANDRO A BORQUEZ

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Female

NPI: 1114277787

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRIC CARDIOLOGY **CHAU, PETER**

Provider ID: 271427

Board Certified Specialty: No
PETER CHAU

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1407146947

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: LOMA
LINDA UNIVERSITY
CHILDRENS HOSPITAL, LOMA
LINDA UNIVERSITY MED CTR,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

D3. Directorio de proveedores especialistas

American Sign Language (ASL): Provider ID: 206162

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

DAVIS, CHRISTOPHER

Provider ID: N/A

Board Certified Specialty: No
CHRISTOPHER K DAVIS

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855
Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1760691950

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRIC CARDIOLOGY

DO, THOMAS

Board Certified Specialty: No
THOMAS B DO

 3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 366-5855
Fax: (858) 966-7423

 After Hours Phone: (858)
366-5855

Provider Gender: Male

NPI: 1053545376


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, CHILDRENS HOSPITAL
AT MISSION, CHILDRENS
HOSPITAL OF ORANGE
COUNTY


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

DUMMER, KIRSTEN

Provider ID: 260595

Board Certified Specialty: No
KIRSTEN B DUMMER

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855
Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Female

NPI: 1780642280

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

GOLDING, IAN

Provider ID: 210823

Board Certified Specialty: No
IAN F GOLDING

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855
Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1962974956


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC CARDIOLOGY

D3. Directorio de proveedores especialistas

GORDON, BRENT

Provider ID: 295391

Board Certified Specialty: No
BRENT M GORDON

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855
Fax: (858) 966-7903

After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1669480083

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: POMONA
VALLEY HOSP MED CTR,
SANTA MONICA UCLA MED
CTR, SAN ANTONIO COMM
HOSP, LOMA LINDA

UNIVERSITY CHILDRENS
HOSPITAL, LOMA LINDA
UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

HALEY, JESSICA

Provider ID: 205687

Board Certified Specialty: No
JESSICA E HALEY

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855
Fax: (858) 966-7903

After Hours Phone: (858)
966-5855

Provider Gender: Female

NPI: 1023329885

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

JUSTINO, HENRI

Provider ID: 284123

Board Certified Specialty: No
HENRI JUSTINO

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855
Fax: (858) 966-7903

After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1518036821

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

LEHNERTSCHUCHARDT, ELEANOR

Provider ID: 262250

Board Certified Specialty: No
ELEANOR L

LEHNERTSCHUCHARDT

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855
Fax: (858) 966-7903

After Hours Phone: (858)
966-5855

Provider Gender: Female

NPI: 1760707210

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY


MCCANDLESS, RACHEL

Provider ID: 206147

Board Certified Specialty: No
RACHEL T MCCANDLESS

D3. Directorio de proveedores especialistas

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-4912
Fax: (858) 966-7903

 After Hours Phone: (858)
966-4912

Provider Gender: Female

NPI: 1487821815

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY


MUELLER, DANA

Provider ID: 245535

Board Certified Specialty: No
DANA M MUELLER

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

 After Hours Phone: (858)
966-5855

Provider Gender: Female

NPI: 1184915712

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC CARDIOLOGY

NARAYAN, HARI

Provider ID: 205349

Board Certified Specialty: No
HARI K NARAYAN

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1376705707

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

RAO, ROHIT

Provider ID: 206122

Board Certified Specialty: No
ROHIT P RAO

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855
Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1063452779

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

SILVASEPULVEDA, JOSE

Provider ID: 206297

Board Certified Specialty: Yes
JOSE A SILVASEPULVEDA

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855
Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1417222472

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 0\19

American Sign Language (ASL): NPI: 1891004461

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY


STEINBERG, LEONARD

Provider ID: 248208

Board Certified Specialty: No
LEONARD G STEINBERG

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1538279484


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PEDIATRIC CARDIOLOGY


VAUGHN, GABRIELLE

Provider ID: 205643

Board Certified Specialty: No
GABRIELLE R VAUGHN

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 576-1700

 Fax: (858) 966-7423

 After Hours Phone: (858)
576-1700

Provider Gender: Female

NPI: 1891004461

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

PEDIATRIC CARDIOLOGY

VELLOREGOVARDHAN, SHILPA


Provider ID: 271454


Board Certified Specialty: No

SHILPA

VELLOREGOVARDHAN

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

 Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Female

NPI: 1477702165

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN


DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC CARDIOLOGY


WERHO, DAVID


Provider ID: 206316

Board Certified Specialty: No

DAVID K WERHO

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

 Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1235391863

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC CARDIOLOGY








WILLIAMS, MATTHEW

Provider ID: 206287

Board Certified Specialty: No





MATTHEW R WILLIAMS




D3. Directorio de proveedores especialistas

 3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
 Phone: (858) 966-5855
Fax: (858) 966-7423
 After Hours Phone: (858)
966-5855
Provider Gender: Male
NPI: 1831423250
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSF BENIOFF CHILDREN'S
HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC CARDIOLOGY








YOUNOSZAI, ADEL

Provider ID: 303133
Board Certified Specialty: No
ADEL YOUNOSZAI
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-5855
Fax: (858) 966-7903
 After Hours Phone: (858)
966-5855
Provider Gender: Male
NPI: 1952493819
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC DERMATOLOGY

EICHENFIELD, DAWN

Provider ID: 283142
Board Certified Specialty: No
DAWN Z EICHENFIELD
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-6795
Fax: (858) 966-7479
 After Hours Phone: (858)
966-6795
Provider Gender: Female
NPI: 1295198091
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC DERMATOLOGY






EICHENFIELD, DAWN

Provider ID: 303679
Board Certified Specialty: No
DAWN Z EICHENFIELD
 7910 FROST ST STE 120
SAN DIEGO, CA 92123
 Phone: (858) 966-6795
Fax: (858) 966-7479
 After Hours Phone: (858)
966-6795
Provider Gender: Female
NPI: 1295198091
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

AGHILI, ROXANA


Provider ID: 304918
Board Certified Specialty: No
ROXANA AGHILI
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800
Provider Gender: Female
NPI: 1851927883
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi

D3. Directorio de proveedores especialistas

Cultural Competency: N
Hospital Affiliation: KAISER
FOUNDATION HOSPITAL SAN
DIEGO, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

AGHILI, ROXANA

Provider ID: 303780
Board Certified Specialty: No
ROXANA AGHILI

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105


 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1851927883

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi

Cultural Competency: N
Hospital Affiliation: KAISER
FOUNDATION HOSPITAL SAN
DIEGO, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


AMIRNOVIN, RAMBOD

Provider ID: 297673

Board Certified Specialty: No
RAMBOD AMIRNOVIN


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1629104492

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Persian,
Spanish

Cultural Competency: N


Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, LOMA LINDA
UNIVERSITY CHILDRENS
HOSPITAL, LOMA LINDA
UNIVERSITY MED CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, LONG BEACH

MEMORIAL MED CTR, EARL
AND LORRAINE MILLER
CHILDRENS HSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


AUSTIN-PAGE, LUKAS

Provider ID: 205589

Board Certified Specialty: No
LUKAS R AUSTIN-PAGE


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1326301862

 Provider English Spoken: Y


Cultural Competency: N


Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


BELLOMO, THOMAS

Provider ID: 205601

Board Certified Specialty: No
THOMAS N BELLOMO

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2905

D3. Directorio de proveedores especialistas

Fax: (619) 283-1614

☎ After Hours Phone: (619)
280-2905

Provider Gender: Male

NPI: 1700926698

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

🌐 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

BIALOSTOZKY, MARIO

Provider ID: 206011

Board Certified Specialty: No

MARIO M BIALOSTOZKY

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-8800

☎ After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1609281450

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL

CHULA VISTA, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

BRYL, AMY

Provider ID: 205967

Board Certified Specialty: No

AMY W BRYL

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-8800

☎ After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1497079487

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

UCSF BENIOFF CHILDREN'S

HOSPITAL OAKLAND,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

RADY CHILDRENS HOSPITAL

SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

CAMPBELL, SARA

Provider ID: 206335

Board Certified Specialty: No

SARA S CAMPBELL

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-8800

☎ After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1841687563

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS

ANGELES, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

D3. Directorio de proveedores especialistas

CHOO, SUN

Provider ID: 296536

Board Certified Specialty: No
SUN H CHOO

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1700047628

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

CHOO, SUN

Provider ID: 296535

Board Certified Specialty: No
SUN H CHOO

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1700047628

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

CONRAD, HEATHER

Provider ID: 205960

Board Certified Specialty: No
HEATHER B CONRAD

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1205813409

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST

HEALTHCARE INLAND VALLEY
HOSPITAL, SHARP CHULA

VISTA MED CTR, UCSF

BENIOFF CHILDREN'S

HOSPITAL OAKLAND,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

DELRE, ANGELO

Provider ID: 206081

Board Certified Specialty: No
ANGELO M DELRE

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1275761371

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

D3. Directorio de proveedores especialistas


PEDIATRIC EMERGENCY MEDICINE


DEVERA, GEMMIE

Provider ID: 288572

Board Certified Specialty: No
GEMMIE S DEVERA


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1366622078

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


DO, STEPHANIE

Provider ID: 287393

Board Certified Specialty: No
STEPHANIE T DO


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1750513644

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Martin

Luther King Jr Community

Hospital, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


DONOFRIO-ODMANN, JOY

Provider ID: 205375

Board Certified Specialty: No
JOY J DONOFRIO


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1740571165

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: VALLEY

CHILDRENS HOSPITAL,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

RADY CHILDRENS HOSPITAL

SAN DIEGO, UCSF BENIOFF


CHILDREN'S HOSPITAL

OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


DORWART, ELIZABETH

Provider ID: 294260

Board Certified Specialty: No
ELIZABETH A DORWART

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1609132034

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: LUCILE
SALTER PACKARD CHILDRENS

HOSP, Stanford Health Care,


RADY CHILDRENS HOSPITAL


SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

EKPENYONG, ATIM

D3. Directorio de proveedores especialistas

Provider ID: 205722

Board Certified Specialty: No
ATIM O EKPENYONG

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 576-1700

After Hours Phone: (858)
576-1700

Provider Gender: Female

NPI: 1932318565

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST

HEALTHCARE INLAND VALLEY

HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

FISHER, JAY

Provider ID: 295690

Board Certified Specialty: No
JAY FISHER

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1629118518

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

GIBONEY, JENNIFER

Provider ID: 205925

Board Certified Specialty: No
JENNIFER C GIBONEY

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1275895849

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

GORHAM, LAURA

Provider ID: 275784

Board Certified Specialty: No
LAURA M GORHAM

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

Fax: (858) 633-4682

After Hours Phone: (619)
280-2058

Provider Gender: Female

NPI: 1316162324

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

SA 8:00AM-2:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

GROSS, MATTHEW

Provider ID: 297172

Board Certified Specialty: No
MATTHEW F GROSS

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)

D3. Directorio de proveedores especialistas

280-2905
Provider Gender: Male
NPI: 1942223664
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

GROSS, MATTHEW
Provider ID: 297174
Board Certified Specialty: No
MATTHEW F GROSS
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800
Provider Gender: Male
NPI: 1942223664
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

HERSKOVITZ, SCOTT
Provider ID: 261045
Board Certified Specialty: Yes
SCOTT A HERSKOVITZ
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800
Provider Gender: Male
NPI: 1225393499
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


HUNTER, WENDY
Provider ID: 206278
Board Certified Specialty: No
WENDY L HUNTER
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)

966-8800
Provider Gender: Female
NPI: 1053515551
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

INDRA, SEAN
Provider ID: 302625
Board Certified Specialty: No
SEAN W INDRA
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800
Provider Gender: Male
NPI: 1427349091
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0\19

D3. Directorio de proveedores especialistas

American Sign Language (ASL):  3020 CHILDRENS WAY
SAN DIEGO, CA 92123

N
 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


ISHIMINE, PAUL

Provider ID: 206236

Board Certified Specialty: No
PAUL T ISHIMINE

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1437184421

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

JACKSON, TAYLOR

Provider ID: 302127

Board Certified Specialty: No
TAYLOR J JACKSON

 Phone: (858) 966-5999
Fax: (858) 966-8519

 After Hours Phone: (858)
966-5999

Provider Gender: Male

NPI: 1326543752

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


KHAN, SHAHFAR

Provider ID: 294094

Board Certified Specialty: No
SHAHFAR KHAN


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1013361815

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Urdu

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


KINGDON, JOANNA

Provider ID: 302317

Board Certified Specialty: No
JOANNA E KINGDON

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1609495399

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

PEDIATRIC EMERGENCY MEDICINE

MCDANIEL, MICHELE

Provider ID: 248071

Board Certified Specialty: No
MICHELE A MCDANIEL

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1366761959

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

RADY CHILDRENS HOSPITAL

SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

MENDES, CHANTAL

Provider ID: 295668

Board Certified Specialty: No
CHANTAL M MENDES

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1134681265

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

MESIWALA, ADNAN

Provider ID: 275654

Board Certified Specialty: Yes
ADNAN K MESIWALA

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1528483955

Provider English Spoken: Y
Provider Language(s)
Spoken: Gujarati

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

METCALF, ASHLEY

Provider ID: 205348

Board Certified Specialty: No
ASHLEY M METCALF

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1073740205

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY

HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

D3. Directorio de proveedores especialistas


PEDIATRIC EMERGENCY MEDICINE


MILLS, DAVID

Provider ID: 302146

Board Certified Specialty: No
DAVID M MILLS

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1194145946

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


MURRAY, MATTHEW

Provider ID: 205759

Board Certified Specialty: No
MATTHEW P MURRAY

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1215103023

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
RADY CHILDRENS HOSPITAL


SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


NGUYEN, MARGARET

Provider ID: 270705

Board Certified Specialty: No
MARGARET B NGUYEN

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1942485248

 Provider English Spoken: Y
Cultural Competency: N



Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


NGUYEN, MYLINH

Provider ID: 262299

Board Certified Specialty: No
MYLINH T NGUYEN

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1730428053


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

OZCAN, ALI

Provider ID: 287923





Board Certified Specialty: No
ALI K OZCAN

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123





 Phone: (858) 966-8800

 After Hours Phone: (858)




D3. Directorio de proveedores especialistas

966-8800
Provider Gender: Male
NPI: 1265867683
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Turkish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, LOMA LINDA
UNIVERSITY MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A




PEDIATRIC EMERGENCY MEDICINE


PADE, KATHRYN
Provider ID: 262411
Board Certified Specialty: No
KATHRYN H PADE
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800
Provider Gender: Female
NPI: 1215375183
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
RADY CHILDRENS HOSPITAL
SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): RONALD E PARK
N



 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

PARK, BRIAN
Provider ID: 302352
Board Certified Specialty: No
BRIAN L PARK
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800
Provider Gender: Male
NPI: 1710418744

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19



American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE




PARK, RONALD
Provider ID: 295457
Board Certified Specialty: No

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 Phone: (619) 280-2905
Fax: (619) 283-1614
 After Hours Phone: (619)
280-2905



Provider Gender: Male
NPI: 1881695914
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER
 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE




PARKER, SHERINE
Provider ID: 205784
Board Certified Specialty: No
SHERINE B PARKER
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800
Provider Gender: Female
NPI: 1477626513



D3. Directorio de proveedores especialistas




 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Arabic, Spanish*
Cultural Competency: N
*Hospital Affiliation: GLENDALE
ADVENTIST MED CTR,
GLENDALE MEMORIAL HOSP
AND HEALTH CTR, TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*




PEDIATRIC EMERGENCY MEDICINE



QUINONES-PEREZ, BIANCA
Provider ID: 206949
Board Certified Specialty: No
BIANCA N QUINONES-PEREZ
 *4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105*
 *Phone: (619) 280-2905*
Fax: (619) 283-1614
 *After Hours Phone: (619)
280-2905*
Provider Gender: Female
NPI: 1124360565



 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: RADY

*CHILDRENS HOSPITAL SAN
DIEGO*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM*
 *Website: N/A*

PEDIATRIC EMERGENCY MEDICINE




QUINONES-PEREZ, BIANCA
Provider ID: 206947
Board Certified Specialty: No
BIANCA N QUINONES-PEREZ
 *3020 CHILDRENS WAY
SAN DIEGO, CA 92123*
 *Phone: (858) 966-8800*
 *After Hours Phone: (858)
966-8800*
Provider Gender: Female
NPI: 1124360565





 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N
 *Accessibility: CONTACT
PROVIDER*
 *Website: N/A*






PEDIATRIC EMERGENCY

MEDICINE

RANASURIYA, DUNISHA
Provider ID: 216970
Board Certified Specialty: No
DUNISHA G RANASURIYA
 *3020 CHILDRENS WAY
SAN DIEGO, CA 92123*
 *Phone: (858) 966-8800*
 *After Hours Phone: (858)
966-8800*
Provider Gender: Female
NPI: 1740468057

 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

PEDIATRIC EMERGENCY MEDICINE

RUIZ, MONICA
Provider ID: 305340
Board Certified Specialty: No
MONICA O RUIZ
 *3020 CHILDRENS WAY
SAN DIEGO, CA 92123*
 *Phone: (858) 966-8800*
 *After Hours Phone: (858)
966-8800*
Provider Gender: Female
NPI: 1982059689
 *Provider English Spoken: Y*
 *Provider Language(s)*

D3. Directorio de proveedores especialistas




Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*





PEDIATRIC EMERGENCY MEDICINE

RUSSELL, SAMUEL
Provider ID: 301249
Board Certified Specialty: No
SAMUEL RUSSELL
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 *Phone: (858) 966-8800*
 *After Hours Phone: (858) 966-8800*
Provider Gender: Male
NPI: 1215564265




 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*





PEDIATRIC EMERGENCY MEDICINE

RUSSELL, SAMUEL
Provider ID: 301250
Board Certified Specialty: No
SAMUEL RUSSELL
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 *Phone: (619) 280-2905*
Fax: (619) 283-1614
 *After Hours Phone: (619) 280-2905*
Provider Gender: Male
NPI: 1215564265




 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: SU 1:00PM-10:00PM*
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Website: N/A*




PEDIATRIC EMERGENCY MEDICINE

SALEH, FAREED
Provider ID: 206216
Board Certified Specialty: No
FAREED R SALEH
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 *Phone: (858) 966-8800*
 *After Hours Phone: (858) 966-8800*
Provider Gender: Male
NPI: 1366691115

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PEDIATRIC EMERGENCY MEDICINE

SCHROTER, STEPHANIE
Provider ID: 243830
Board Certified Specialty: No
STEPHANIE SCHROTER
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 *Phone: (858) 966-8800*
 *After Hours Phone: (858) 966-8800*
Provider Gender: Female
NPI: 1073951828

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*

D3. Directorio de proveedores especialistas

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


SHERER, KIMBERLY

Provider ID: 284168

Board Certified Specialty: No
KIMBERLY A SHERER


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female


NPI: 1992202964

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


SHETH, SARIKA

Provider ID: 248171

Board Certified Specialty: No
SARIKA K SHETH

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1336503234

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


SOUDER, CHRISTOPHER

Provider ID: 301636

Board Certified Specialty: No
CHRISTOPHER D SOUDER


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1851540199

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

SOUDER, CHRISTOPHER


Provider ID: 301635


Board Certified Specialty: No


CHRISTOPHER D SOUDER

 3030 CHILDRENS WAY FL
3

SAN DIEGO, CA 92123

 Phone: (858) 966-6789

 Fax: (858) 966-6706

 After Hours Phone: (858)
966-6789

Provider Gender: Male

NPI: 1851540199

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
BENIOFF CHILDREN'S


HOSPITAL OAKLAND

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


TAMAS, VANESSA

Provider ID: 206212

Board Certified Specialty: No
VANESSA L TAMAS

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 576-1700

 After Hours Phone: (858)
576-1700

Provider Gender: Female





NPI: 1326225368

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY







CHILDRENS HOSPITAL SAN

D3. Directorio de proveedores especialistas

DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY  Website: N/A
HOSPITAL, CHILDRENS HOSP
OF LOS ANGELES,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**




TANG, ANDREW


Provider ID: 294677
Board Certified Specialty: No
ANDREW S TANG
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800
Provider Gender: Male
NPI: 1184071516
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F

8:00AM-5:00PM
Website: N/A




PEDIATRIC EMERGENCY **MEDICINE**

TODD, SARAH

Provider ID: 302800
Board Certified Specialty: No
SARAH C TODD
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 Phone: (619) 280-2905
Fax: (619) 283-1614
 After Hours Phone: (619)
280-2905
Provider Gender: Female
NPI: 1407299787

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER
 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**



TRAN, THERESA

Provider ID: 301834



Board Certified Specialty: No
THERESA T TRAN

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800

Provider Gender: Female
NPI: 1417496985

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish,
Vietnamese




Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**

TRAUT, JOEL

Provider ID: 205475
Board Certified Specialty: No
JOEL TRAUT

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 576-1700
 After Hours Phone: (858)
576-1700

Provider Gender: Male
NPI: 1982792065

 Provider English Spoken: Y
 Provider Language(s)

D3. Directorio de proveedores especialistas

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): KAMALA VAIDYA

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


ULRICH, STACEY

Provider ID: 205847

Board Certified Specialty: No
STACEY L ULRICH

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8036

 After Hours Phone: (858)
966-8036

Provider Gender: Female

NPI: 1619049236

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


VAIDYA, KAMALA

Provider ID: 205809

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1083840920

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


VAIDYA, KAMALA

Provider ID: 205811

Board Certified Specialty: No
KAMALA VAIDYA

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1083840920

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


VANE, JACKSON

Provider ID: 205883

Board Certified Specialty: No
JACKSON VANE

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1952608580

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**

VANWOY, LAUREN

Provider ID: 301574
Board Certified Specialty: No
LAUREN E VANWOY

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858)
966-8800

Provider Gender: Female
NPI: 1568959161

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER, RADY CHILDRENS

HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**

VARGAS, JACLYN

Provider ID: 296486
Board Certified Specialty: No
JACLYN F VARGAS

4305 UNIVERSITY AVE STE

150
SAN DIEGO, CA 92105
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619)
280-2905

Provider Gender: Female
NPI: 1619359718

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, Los Angeles General
Medical Center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**

VARGAS, JACLYN

Provider ID: 285934
Board Certified Specialty: Yes
JACLYN F VARGAS

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5841
Fax: (858) 966-6728

After Hours Phone: (858)
966-5841

Provider Gender: Female
NPI: 1619359718

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, Los Angeles General
Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**

VARGAS, JACLYN

Provider ID: 285935
Board Certified Specialty: No
JACLYN F VARGAS

3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 576-1700
Fax: (858) 966-8479

After Hours Phone: (858)
576-1700

Provider Gender: Female
NPI: 1619359718

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, Los Angeles General
Medical Center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

D3. Directorio de proveedores especialistas

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


VAYNGORTIN, TATYANA

Provider ID: 263012

Board Certified Specialty: No
TATYANA VAYNGORTIN

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1578967907

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S

HOSPITAL OAKLAND,

CHILDRENS HOSP OF LOS

ANGELES, RADY CHILDRENS

HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


WANG, YVETTE

Provider ID: 263416

Board Certified Specialty: No
YVETTE L WANG

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1710321278

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


YAPHOCKUN, KARENKIM

Provider ID: 206184

Board Certified Specialty: No
KARENKIM K YAPHOCKUN

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 576-1700

 After Hours Phone: (858)
576-1700

Provider Gender: Female

NPI: 1861880817

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC ENDOCRINOLOGY CYMBALUK, ANNA

Provider ID: 294214

Board Certified Specialty: Yes
ANNA L CYMBALUK

 3030 CHILDRENS WAY STE
4

SAN DIEGO, CA 92123

 Phone: (858) 966-4032

Fax: (858) 966-6227

 After Hours Phone: (858)
966-4032

Provider Gender: Female

NPI: 1043674849

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC ENDOCRINOLOGY PATTERSON, MARY

Provider ID: 206059

Board Certified Specialty: No
MARY E PATTERSON

 3030 CHILDRENS WAY FL

D3. Directorio de proveedores especialistas

4 NORTH
SAN DIEGO, CA 92123
☎ Phone: (858) 966-4032
☎ Fax: (858) 966-6227
🕒 After Hours Phone: (858)
966-4032
Provider Gender: Female
NPI: 1912112020
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC ENDOCRINOLOGY

SINGH, PUJA

Provider ID: 302818
Board Certified Specialty: No
PUJA SINGH
📍 3030 CHILDRENS WAY FL
4
SAN DIEGO, CA 92123
☎ Phone: (858) 966-4032
☎ Fax: (858) 966-6227
🕒 After Hours Phone: (858)
966-4032
Provider Gender: Female
NPI: 1841721172
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC ENDOCRINOLOGY

VARGASTRUJILLO, MARCELA

Provider ID: 205605
Board Certified Specialty: No
MARCELA VARGASTRUJILLO
📍 3030 CHILDRENS WAY FL
4
SAN DIEGO, CA 92123
☎ Phone: (858) 966-4032
☎ Fax: (858) 966-4032
🕒 After Hours Phone: (858)
966-4032
Provider Gender: Female
NPI: 1952534091
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC GASTROENTEROLOGY

CHU, CHRISTOPHER

Provider ID: 301639
Board Certified Specialty: No
CHRISTOPHER CHU
📍 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123
☎ Phone: (858) 966-4003
☎ Fax: (858) 560-6798
🕒 After Hours Phone: (858)
966-4003
Provider Gender: Male
NPI: 1912369273
🗣 Provider English Spoken: Y
🗣 Provider Language(s)
Spoken: Spanish, Yue
Chinese
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC GASTROENTEROLOGY

GOYAL, NIDHI


Provider ID: 205598
Board Certified Specialty: No
NIDHI P GOYAL
📍 3030 CHILDRENS WAY FL
2 SOUTH
SAN DIEGO, CA 92123
☎ Phone: (858) 966-4003
☎ Fax: (858) 560-6798

D3. Directorio de proveedores especialistas

 After Hours Phone: (858) 966-4003

Provider Gender: Female

NPI: 1598029332

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL


OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PEDIATRIC

GASTROENTEROLOGY

HARTMANN, PHILLIPP


Provider ID: 294228

Board Certified Specialty: Yes

PHILLIPP HARTMANN

 3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123


 Phone: (858) 966-4003


Fax: (858) 560-6798

 After Hours Phone: (858) 966-4003

Provider Gender: Male

NPI: 1356796536

 Provider English Spoken: Y

 Provider Language(s)

Spoken: French, German

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PEDIATRIC

GASTROENTEROLOGY

LIN, TOM


Provider ID: 297707

Board Certified Specialty: No

TOM K LIN

 3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123


 Phone: (858) 966-4003

Fax: (858) 560-6798

 After Hours Phone: (858) 966-4003

Provider Gender: Male

NPI: 1114136934

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PEDIATRIC

GASTROENTEROLOGY

SCHWARZ, KATHLEEN


Provider ID: 205885

Board Certified Specialty: No

KATHLEEN B SCHWARZ

 3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123

 Phone: (858) 966-4003

Fax: (858) 560-6798

 After Hours Phone: (858) 966-4003

Provider Gender: Female

NPI: 1265465918

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN


DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PEDIATRIC

GASTROENTEROLOGY

YOUNG, JOCELYN


Provider ID: 294675

Board Certified Specialty: No

JOCELYN A YOUNG

 3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123

 Phone: (858) 966-4003

Fax: (858) 560-6798

D3. Directorio de proveedores especialistas

 After Hours Phone: (858) 966-4003

Provider Gender: Female

NPI: 1306227491

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UC DAVIS
MEDICAL CTR, RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

BRIGGS, BENJAMIN

Provider ID: 274689

Board Certified Specialty: Yes
BENJAMIN J BRIGGS

 3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Male

NPI: 1952695777

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, NAVAL MEDICAL CTR
SD RBE


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY


BUSH, KELLY

Provider ID: 274408

Board Certified Specialty: No
KELLY A BUSH

 3010 CHILDRENS WAY STE
2

SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1073831079

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY


CHOO, SUN

Provider ID: 206115

Board Certified Specialty: No
SUN H CHOO

 3010 CHILDRENS WAY STE
2-WEST

SAN DIEGO, CA 92123


 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1700047628


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

DING, HILDA

Provider ID: 206173

Board Certified Specialty: No
HILDA H DING

 3010 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1780813923

 Provider English Spoken: Y


D3. Directorio de proveedores especialistas


Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

ELSTER, JENNIFER

Provider ID: 205769

Board Certified Specialty: Yes
JENNIFER D ELSTER

 3010 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Female


NPI: 1588866115


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

GANESAN, ANUSHA

Provider ID: 205882

Board Certified Specialty: No
ANUSHA P GANESAN

 3010 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1982091740

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

JAFFRAY, JULIE

Provider ID: 296760

Board Certified Specialty: No
JULIE A JAFFRAY

 3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1396942470


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

KUO, DENNIS

Provider ID: 205433

Board Certified Specialty: No
DENNIS J KUO

 3010 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Male

NPI: 1750492146

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Spanish

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

D3. Directorio de proveedores especialistas


DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

LI, HOJUN

Provider ID: 307300

Board Certified Specialty: No
HOJUN LI

 3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Male


NPI: 1730455239


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY


SRIDHAR, SUNITA

Provider ID: 302088

Board Certified Specialty: Yes

SUNITA SRIDHAR

 3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123


 Phone: (858) 966-5811


Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1649707365

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

WONG, VICTOR


Provider ID: 206149

Board Certified Specialty: No
VICTOR WONG

 3010 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Male

NPI: 1154692473

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

YU, JENNIFER

Provider ID: 206148

Board Certified Specialty: No
JENNIFER C YU

 3010 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1326315599

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

D3. Directorio de proveedores especialistas

 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

YU, HELENA

Provider ID: 301583

Board Certified Specialty: No
HELENA YU

 3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123


 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1881127736

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY


ZAGE, PETER

Provider ID: 206315

Board Certified Specialty: No
PETER E ZAGE

 3010 CHILDRENS WAY STE
2W

SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Male

NPI: 1912003161

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC INFECTIOUS

DISEASES


MILDER, EDMUND

Provider ID: 289138

Board Certified Specialty: No
EDMUND A MILDER

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

 Phone: (858) 966-7785

Fax: (858) 966-8658

 After Hours Phone: (858)
966-7785

Provider Gender: Male

NPI: 1760460026

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC NEPHROLOGY


CARTER, CAITLIN

Provider ID: 302777


Board Certified Specialty: No
CAITLIN E CARTER

 8110 BIRMINGHAM WAY FL
1

SAN DIEGO, CA 92123


 Phone: (858) 966-8052

Fax: (858) 966-7789

 After Hours Phone: (858)
966-8052

Provider Gender: Female

NPI: 1255514618

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS GREEN

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL, UCSD


MEDICAL CTR, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D3. Directorio de proveedores especialistas


 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC NEPHROLOGY

INGULLI, ELIZABETH


Provider ID: 302778
Board Certified Specialty: No
ELIZABETH G INGULLI

 8110 BIRMINGHAM WAY
STE 28
SAN DIEGO, CA 92123

 Phone: (858) 966-8052
Fax: (858) 966-7789


 After Hours Phone: (858)
966-8052


Provider Gender: Female
NPI: 1811919244


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRIC NEPHROLOGY

MAK, ROBERT


Provider ID: 302776
Board Certified Specialty: No
ROBERT H MAK

 8110 BIRMINGHAM WAY FL
1
SAN DIEGO, CA 92123

 Phone: (858) 966-8052
Fax: (858) 966-7789

 After Hours Phone: (858)
966-8052


Provider Gender: Male
NPI: 1740295252

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRIC NEPHROLOGY

PERENS, ELLIOT


Provider ID: 302765
Board Certified Specialty: No
ELLIOT A PERENS

 8110 BIRMINGHAM WAY FL
1
SAN DIEGO, CA 92123

 Phone: (858) 966-8052
Fax: (858) 966-7789

 After Hours Phone: (858)
966-8052


Provider Gender: Male
NPI: 1922328947


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND, UCSF MEDICAL
CENTER, SHARP MEMORIAL
HOSPITAL, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRIC PULMONOLOGY

AKONG, KATHRYN


Provider ID: 205673
Board Certified Specialty: No
KATHRYN A AKONG

 3030 CHILDRENS WAY STE
2
SAN DIEGO, CA 92123

 Phone: (858) 966-5846
Fax: (858) 966-8457

 After Hours Phone: (858)
966-5846

Provider Gender: Female
NPI: 1912169061

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19




American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


D3. Directorio de proveedores especialistas

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC PULMONOLOGY **BHATTACHARJEE, RAKESH**


Provider ID: 205950
Board Certified Specialty: No
RAKESH BHATTACHARJEE
 3030 CHILDRENS WAY FL
2 NORTH
SAN DIEGO, CA 92123
 Phone: (858) 966-5846
Fax: (858) 966-8457
 After Hours Phone: (858)
966-5846

Provider Gender: Male
NPI: 1588781173

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY **BHATTACHARJEE, RAKESH**

Provider ID: 246060
Board Certified Specialty: No
RAKESH BHATTACHARJEE
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 576-1700
 After Hours Phone: (858)

576-1700
Provider Gender: Male
NPI: 1588781173


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19


American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRIC PULMONOLOGY **CERNELC-KOHAN, MATEJKA**

Provider ID: 243041
Board Certified Specialty: No
MATEJKA CERNELC-KOHAN

 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123

 Phone: (858) 966-5846
Fax: (858) 966-8457

 After Hours Phone: (858)
966-5846

Provider Gender: Female
NPI: 1871752451


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY **CERNELC-KOHAN, MATEJKA**

Provider ID: 243042
Board Certified Specialty: No
MATEJKA CERNELC-KOHAN

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5846
Fax: (858) 966-8457

 After Hours Phone: (858)
966-5846

Provider Gender: Female
NPI: 1871752451


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC PULMONOLOGY **FINCH, CHRISTINA**

Provider ID: 302581
Board Certified Specialty: No
CHRISTINA E FINCH

D3. Directorio de proveedores especialistas

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123


 Phone: (858) 966-5846

Fax: (858) 966-8457

 After Hours Phone: (858)
966-5846

Provider Gender: Female

NPI: 1598255325

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN


DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY

FIREIZEN, YARON


Provider ID: 302329

Board Certified Specialty: No

YARON FIREIZEN

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123


 Phone: (858) 966-5846


Fax: (858) 966-8457

 After Hours Phone: (858)
966-5846

Provider Gender: Male

NPI: 1699123927

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hebrew

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY

LANDEOGUTIERREZ, JEREMY

Provider ID: 284177


Board Certified Specialty: No

JEREMY S

LANDEOGUTIERREZ

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123


 Phone: (858) 966-5846

Fax: (858) 966-8457

 After Hours Phone: (858)
966-5846

Provider Gender: Male

NPI: 1255750360

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN


DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY

LANDEOGUTIERREZ, JEREMY


Provider ID: 284176

Board Certified Specialty: No

JEREMY S

LANDEOGUTIERREZ

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5846

Fax: (858) 569-9052

 After Hours Phone: (858)
966-5846

Provider Gender: Male

NPI: 1255750360

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY

LENHART-PENDERGRASS,

PATRICIA

Provider ID: 294641

Board Certified Specialty: Yes







PATRICIA M

LENHART-PENDERGRASS






 3030 CHILDRENS WAY FL
2




SAN DIEGO, CA 92123

D3. Directorio de proveedores especialistas






 Phone: (858) 966-5846
Fax: (858) 966-8457
 After Hours Phone: (858) 966-5846
Provider Gender: Female
NPI: 1144615659
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-4:30PM
 Website: N/A




PEDIATRIC PULMONOLOGY **RAO, APARNA**

Provider ID: 206123
Board Certified Specialty: No
APARNA R RAO
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-5846
Fax: (858) 569-9052
 After Hours Phone: (858) 966-5846
Provider Gender: Female
NPI: 1649222340
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes








Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC PULMONOLOGY **RAO, APARNA**





Provider ID: 206124
Board Certified Specialty: No
APARNA R RAO
 3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
 Phone: (858) 966-5846
Fax: (858) 966-5847
 After Hours Phone: (858) 966-5846
Provider Gender: Female
NPI: 1649222340
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hindi
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC PULMONOLOGY **RYU, JULIE**

Provider ID: 206218
Board Certified Specialty: No
JULIE RYU
 3030 CHILDRENS WAY FL 2 NORTH
SAN DIEGO, CA 92123
 Phone: (858) 966-5846
Fax: (858) 569-5847
 After Hours Phone: (858) 966-5846
Provider Gender: Female
NPI: 1568533321
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC PULMONOLOGY **TANTISIRA, KELAN**

Provider ID: 277183
Board Certified Specialty: No
KELAN G TANTISIRA
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-5846
Fax: (858) 569-9052
 After Hours Phone: (858) 966-5846
Provider Gender: Male
NPI: 1760420434
 Provider English Spoken: Y
Cultural Competency: N

D3. Directorio de proveedores especialistas


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC RHEUMATOLOGY


CHANG, JOHANNA

Provider ID: 246394

Board Certified Specialty: No
JOHANNA C CHANG

 3030 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8082

 After Hours Phone: (858)
966-8082

Provider Gender: Female

NPI: 1821242199

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC RHEUMATOLOGY


SHEETS, ROBERT

Provider ID: 255900

Board Certified Specialty: No
ROBERT M SHEETS

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123


 Phone: (858) 966-8082

 Fax: (858) 966-4067

 After Hours Phone: (858)
966-8082

Provider Gender: Male

NPI: 1013088772

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-4:30PM

 Website: N/A


PEDIATRICS


ALAGIRI, MADHU

Provider ID: 206387

Board Certified Specialty: No
MADHU ALAGIRI

 7920 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 966-7484

 Fax: (858) 966-4064

 After Hours Phone: (858)
966-7484

Provider Gender: Male

NPI: 1619083961

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS


ALLSUP, VICTORIA


Provider ID: 302344

Board Certified Specialty: No
VICTORIA G ALLSUP

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female


NPI: 1437786944


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS

D3. Directorio de proveedores especialistas

ALLSUP, VICTORIA

Provider ID: 302345

Board Certified Specialty: No

VICTORIA G ALLSUP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1437786944

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRICS

ANDREE, GREGOR

Provider ID: 293220

Board Certified Specialty: No

GREGOR ANDREE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Male

NPI: 1467436063

Provider English Spoken: Y

Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRICS

ANDREE, GREGOR

Provider ID: 293219

Board Certified Specialty: No

GREGOR ANDREE

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

Fax: (858) 633-4682

After Hours Phone: (619)
280-2058

Provider Gender: Male

NPI: 1467436063

Provider English Spoken: Y

Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRICS

BEAUCHAMP-WALTERS, JULIA

Provider ID: 270063

Board Certified Specialty: No

JULIA BEAUCHAMP-WALTERS

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1457420713

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRICS

CAMERON, MELISSA

Provider ID: 205965

Board Certified Specialty: No

MELISSA A CAMERON

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1902983752

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRICS

CANTU, ALICIA

Provider ID: 205753
Board Certified Specialty: No
ALICIA O CANTU

3030 CHILDRENS WAY STE 300
SAN DIEGO, CA 92123

Phone: (858) 966-8974
Fax: (858) 966-6721

After Hours Phone: (858) 966-8974

Provider Gender: Female
NPI: 1922179688

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRICS

CANTU, ALICIA

Provider ID: 205752
Board Certified Specialty: No
ALICIA O CANTU

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1922179688

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRICS

CHONG, AMY

Provider ID: 259993
Board Certified Specialty: Yes
AMY CHONG

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5803
Fax: (858) 966-5992

After Hours Phone: (858) 966-5803

Provider Gender: Female
NPI: 1720423288

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRICS

DOAN STEPHENS, CRYSTAL

Provider ID: 293274
Board Certified Specialty: No
CRYSTAL T DOAN STEPHENS

4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

Phone: (619) 280-2058
Fax: (858) 633-4682

After Hours Phone: (619) 280-2058

Provider Gender: Female
NPI: 1730570144

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRICS

DOAN STEPHENS, CRYSTAL

Provider ID: 293275
Board Certified Specialty: No
CRYSTAL T DOAN STEPHENS

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700
Fax: (858) 633-4680

After Hours Phone: (858) 810-8700

Provider Gender: Female

D3. Directorio de proveedores especialistas

NPI: 1730570144

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRICS


DOSHI, AMI

Provider ID: 205330

Board Certified Specialty: No

AMI P DOSHI

 3030 CHILDRENS WAY STE
300
SAN DIEGO, CA 92123

 Phone: (858) 966-8974


Fax: (858) 966-6721

 After Hours Phone: (858)
966-8974

Provider Gender: Female

NPI: 1801099676

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Gujarati, Spanish

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS


DOSHI, AMI

Provider ID: 205329

Board Certified Specialty: No

AMI P DOSHI

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5841


Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1801099676

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Gujarati, Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS


GIBONEY, JENNIFER

Provider ID: 296242

Board Certified Specialty: No

JENNIFER C GIBONEY

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1275895849

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:30AM-5:30PM

TU 5:30PM-8:30PM

W 8:30AM-5:30PM

TH 5:30PM-8:30PM

F 8:30AM-5:30PM

SA 9:00AM-4:00PM

 Website: N/A

PEDIATRICS

GIBONEY, JENNIFER


Provider ID: 296241

Board Certified Specialty: No

JENNIFER C GIBONEY

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

Fax: (858) 633-4682

 After Hours Phone: (619)
280-2058

Provider Gender: Female

NPI: 1275895849


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

D3. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes


Min/Max Age: 0\18

American Sign Language (ASL):  3020 CHILDRENS WAY
SAN DIEGO, CA 92123

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

 Website: N/A


PEDIATRICS

GRAY, SARAH

Provider ID: 284224

Board Certified Specialty: No
SARAH M GRAY

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1508210311

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

HUANG, MARIA

Provider ID: 205974

Board Certified Specialty: No
MARIA Z HUANG

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1770841140

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

JIMENEZBACARDI, ADRIA


Provider ID: 294640

Board Certified Specialty: No
ADRIA JIMENEZBACARDI

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Male

NPI: 1467847293

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
Cultural Competency: N


Hospital Affiliation: ST MARYS
HOSPITAL AND MEDICAL
CENTER, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS


JINDAL, ANUJA

Provider ID: 303285

Board Certified Specialty: Yes
ANUJA V JINDAL

 3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123

 Phone: (858) 966-5819

Fax: (858) 966-4930

 After Hours Phone: (858)
966-5819

Provider Gender: Female

NPI: 1194046581

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

D3. Directorio de proveedores especialistas

 Website: N/A

PEDIATRICS


KARMAKAR, KANKA

Provider ID: 213847

Board Certified Specialty: No
KANKA KARMAKAR

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126


 Phone: (844) 200-2426


Fax: (858) 578-4417

 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1972536654

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Bengali, Hindi,
Polish, Spanish, Tagalog

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU
8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

 Website: N/A


PEDIATRICS

KHARE, MANASWITHA

Provider ID: 206289

Board Certified Specialty: Yes
MANASWITHA KHARE

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1912345307

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PEDIATRICS


LEE, BEGEM

Provider ID: 205923


Board Certified Specialty: No

LEE M BEGEM

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1053672444

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PEDIATRICS

LOPEZ, XIMENA


Provider ID: 302856

Board Certified Specialty: No


XIMENA LOPEZ

 3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123

 Phone: (858) 966-4032

Fax: (858) 966-6227

 After Hours Phone: (858)
966-4032

Provider Gender: Female

NPI: 1740316405

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PEDIATRICS

MANNINOAVILA, ELIZABETH

Provider ID: 262161

Board Certified Specialty: No
ELIZABETH E MANNINOAVILA

 3020 CHILDRENS WAY

D3. Directorio de proveedores especialistas

SAN DIEGO, CA 92123
☎ Phone: (858) 966-5841
Fax: (858) 966-6728
🕒 After Hours Phone: (858) 966-5841
Provider Gender: Female
NPI: 1164747127
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRICS

MARANO, RACHEL

Provider ID: 302438
Board Certified Specialty: No
RACHEL M MARANO
📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
☎ Phone: (858) 966-5841
Fax: (858) 966-6728
🕒 After Hours Phone: (858) 966-5841
Provider Gender: Female
NPI: 1043673528
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
HOLLYWOOD PRESBYTERIAN

MED CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRICS

MARC-AURELE, KRISHELLE

Provider ID: 301719
Board Certified Specialty: No
KRISHELLE L MARC-AURELE
📍 7910 FROST ST STE 230
SAN DIEGO, CA 92123
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1952503435
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

PEDIATRICS

NGO, MAI



Provider ID: 302113
Board Certified Specialty: No
MAI P NGO
📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
☎ Phone: (858) 966-8974
Fax: (858) 966-4051
🕒 After Hours Phone: (858) 966-8974
Provider Gender: Female
NPI: 1508910787
🗣 Provider English Spoken: Y
🗣 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, UCSF
MEDICAL CENTER, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A


PEDIATRICS

NGO, MAI



Provider ID: 302114
Board Certified Specialty: No
MAI P NGO
📍 7910 FROST ST STE 195
SAN DIEGO, CA 92123

D3. Directorio de proveedores especialistas

 Phone: (858) 966-8974
 Fax: (858) 966-6721

 After Hours Phone: (858) 966-8974

Provider Gender: Female
NPI: 1508910787

 Provider English Spoken: Y
 Provider Language(s) Spoken: Vietnamese


Cultural Competency: N
Hospital Affiliation: UCSF
BENIOFF CHILDREN'S

HOSPITAL OAKLAND, UCSF
MEDICAL CENTER, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



PEDIATRICS

PATEL, AARTI

Provider ID: 205865


Board Certified Specialty: No
AARTI R PATEL

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841
 Fax: (858) 966-6728

 After Hours Phone: (858) 966-5841

Provider Gender: Female
NPI: 1871813105


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



PEDIATRICS

PIERCE, HEATHER

Provider ID: 205701

Board Certified Specialty: No
HEATHER PIERCE

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841
 Fax: (858) 966-6728

 After Hours Phone: (858) 966-5841

Provider Gender: Female
NPI: 1699955542


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



PEDIATRICS

POLICH, MICHELLE

Provider ID: 286390

Board Certified Specialty: Yes
MICHELLE A POLICH

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800
 After Hours Phone: (858) 966-8800

Provider Gender: Female
NPI: 1780118018

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A



PEDIATRICS

RHEE, KYUNG

Provider ID: 206114

Board Certified Specialty: No
KYUNG E RHEE

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841
 Fax: (858) 966-6728

 After Hours Phone: (858) 966-5841

Provider Gender: Female
NPI: 1013996529

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

D3. Directorio de proveedores especialistas


DIEGO, UCSD MEDICAL CTR,
PALOMAR MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS


RIES, DAVID

Provider ID: 206082

Board Certified Specialty: No
DAVID C RIES

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

 After Hours Phone: (858)
966-5841

Provider Gender: Male

NPI: 1376705483

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

RUNGVIVATJARUS, TIRANUN


Provider ID: 206319

Board Certified Specialty: No
TIRANUN RUNGVIVATJARUS

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1407276363

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

SONG, RICHARD

Provider ID: 301716

Board Certified Specialty: No
RICHARD S SONG

 7910 FROST ST STE 230
SAN DIEGO, CA 92123

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1881893477

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR HEALTH,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, PALOMAR

MEDICAL CENTER,
SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRICS


STOVER, LAURIE

Provider ID: 206196

Board Certified Specialty: No
LAURIE B STOVER

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1659442317

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 0\19

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS

SUTTNER, DENISE

Provider ID: 301721

Board Certified Specialty: No
DENISE M SUTTNER

 7910 FROST ST STE 230
SAN DIEGO, CA 92123

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1457433799

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRICS

WEISS, KATHERINE

Provider ID: 301703

Board Certified Specialty: No
KATHERINE J WEISS

 7910 FROST ST STE 230
SAN DIEGO, CA 92123

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1053541862

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PHYSICAL MEDICINE / REHABILITATION


ALGRA, JEFFREY


Provider ID: 287524

Board Certified Specialty: No
JEFFREY ALGRA

 7910 FROST ST STE 195

SAN DIEGO, CA 92123

 Phone: (858) 966-8974

 After Hours Phone: (858)
966-8974

Provider Gender: Male

NPI: 1457664518

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICAL MEDICINE /


REHABILITATION

BIFFL, SUSAN

Provider ID: 287453

Board Certified Specialty: No
SUSAN E BIFFL

 7910 FROST ST STE 195
SAN DIEGO, CA 92123

 Phone: (858) 966-8974

Fax: (858) 966-6721

 After Hours Phone: (858)
966-8974

Provider Gender: Female

NPI: 1366589640

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICAL MEDICINE / REHABILITATION


DALAL, PRITHA


Provider ID: 287523

Board Certified Specialty: No

PRITHA B DALAL MD

 7910 FROST ST STE 195
SAN DIEGO, CA 92123

 Phone: (858) 966-8974

 After Hours Phone: (858)
966-8974

Provider Gender: Female

NPI: 1609017532

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICAL MEDICINE / REHABILITATION


RICHARDSON, HENRY

Provider ID: 295276


Board Certified Specialty: No

HENRY A RICHARDSON

 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

 Phone: (619) 325-1161

Fax: (619) 325-1717

 After Hours Phone: (619)
325-1161

Provider Gender: Male

NPI: 1407052459

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL
CENTER


Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICAL MEDICINE / REHABILITATION


RYAN, KYLE


Provider ID: 287520

Board Certified Specialty: No

KYLE J RYAN


 7910 FROST ST STE 195
SAN DIEGO, CA 92123

 Phone: (858) 966-8974

 After Hours Phone: (858)
966-8974

Provider Gender: Male

NPI: 1447645742

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICAL MEDICINE / REHABILITATION


SCOTT-WYARD, PHOEBE


Provider ID: 287519

Board Certified Specialty: No

PHOEBE R SCOTT-WYARD

 7910 FROST ST STE 195
SAN DIEGO, CA 92123

 Phone: (858) 966-8974

 After Hours Phone: (858)
966-8974

Provider Gender: Female

NPI: 1336356203

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

PHYSICAL MEDICINE / REHABILITATION

SKALSKY, ANDREW

Provider ID: 287537

Board Certified Specialty: No
ANDREW J SKALSKY

7910 FROST ST STE 195
SAN DIEGO, CA 92123

Phone: (858) 966-8974

After Hours Phone: (858)
966-8974

Provider Gender: Male

NPI: 1487635272

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

AINSWORTH, DELISSA

Provider ID: 243367

Board Certified Specialty: No
DELISSA M AINSWORTH

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1750734893

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
UCSD MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

ALBRIGHT, KELSEY

Provider ID: 284763

Board Certified Specialty: No
KELSEY A ALBRIGHT

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 923-8273

Fax: (888) 539-8781

After Hours Phone: (800)
923-8273

Provider Gender: Female

NPI: 1235653148

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

ARMEEN, GARY

Provider ID: 247035

Board Certified Specialty: No
GARY P ARMEEN JR

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1760774863

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

BERGEN, SOPHEA

Provider ID: 295518

Board Certified Specialty: No
SOPHEA R BERGEN





6719 ALVARADO RD STE
308
SAN DIEGO, CA 92120




D3. Directorio de proveedores especialistas

 Phone: (619) 265-7912
 Fax: (619) 265-7922
 After Hours Phone: (619) 265-7912
Provider Gender: Female
NPI: 1558300665
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: ALVARADO HOSPITAL LLC, PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT




BOYD, LISA

Provider ID: 217649
Board Certified Specialty: No
LISA N BOYD
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1871859421
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




PHYSICIANS ASSISTANT

BRUECKNER, TAMMIE

Provider ID: 255558
Board Certified Specialty: No
TAMMIE N BRUECKNER
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1407212376

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N








 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA






Provider ID: 257530
Board Certified Specialty: No

PATRICIA CASTILLO

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
Provider Gender: Female
NPI: 1376550657
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH
8:30AM-5:30PM
F 8:30AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

DERISSI, DANA

Provider ID: 301632
Board Certified Specialty: No
DANA A DERISSI
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1063829505
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi, Persian
Cultural Competency: N
Hospital Affiliation: LOMA LINDA UNIVERSITY MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No

D3. Directorio de proveedores especialistas

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


 Website: N/A


PHYSICIANS ASSISTANT

GUTH, CARA

Provider ID: 299111

Board Certified Specialty: No
CARA A GUTH

 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121

 Phone: (858) 455-6460

Fax: (858) 455-5362

 After Hours Phone: (858)
455-6460

Provider Gender: Female

NPI: 1992177182


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 21\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

HASEGAWA, CHRIS

Provider ID: 287349

Board Certified Specialty: No
CHRIS HASEGAWA

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225698962

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


HASEGAWA, CHRIS

Provider ID: 247206

Board Certified Specialty: No
CHRIS HASEGAWA

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225698962

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

HIGGINS, JOSHUA

Provider ID: 287133

Board Certified Specialty: No
JOSHUA B HIGGINS

 203 W F ST
SAN DIEGO, CA 92101

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1861624181

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


HUNTER, JACOB

Provider ID: 287449

Board Certified Specialty: No
JACOB A HUNTER

 200 W ARBOR DR
SAN DIEGO, CA 92103

D3. Directorio de proveedores especialistas

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male


NPI: 1114459765


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB


Provider ID: 298430

Board Certified Specialty: No
JACOB A HUNTER

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male


NPI: 1114459765


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298428

Board Certified Specialty: No
JACOB A HUNTER

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1114459765


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


LAM, DAVINA

Provider ID: 295651

Board Certified Specialty: No
DAVINA LAM

 6719 ALVARADO RD STE
308

SAN DIEGO, CA 92120

 Phone: (619) 265-7912

Fax: (619) 265-7922

 After Hours Phone: (619) 265-7912

Provider Gender: Female

NPI: 1245863737

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER, SCRIPPS


MEMORIAL HOSPITAL,
ALVARADO HOSP MED CTR,
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


LAMBERT, GAGE

Provider ID: 214788

Board Certified Specialty: No
GAGE I LAMBERT

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1144672494

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON



Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

D3. Directorio de proveedores especialistas

 Hours: M-F
8:00AM-5:00PM
 Website: N/A


PHYSICIANS ASSISTANT **LINDEMANN, CHRISTINA**

Provider ID: 283760
Board Certified Specialty: No
CHRISTINA R LINDEMANN

 4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
Fax: (858) 539-8781


 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1194373514

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PHYSICIANS ASSISTANT **MARTIN, HALEY**

Provider ID: 305026
Board Certified Specialty: No
HALEY R MARTIN

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1093440836



 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

 Website: N/A



PHYSICIANS ASSISTANT **MCADAMS, JOSEPH**

Provider ID: 280611
Board Certified Specialty: No
JOSEPH MCADAMS

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


Provider Gender: Male
NPI: 1104371251

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PHYSICIANS ASSISTANT **MERRILL, COREY**


Provider ID: 258040
Board Certified Specialty: No
COREY M MERRILL

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1386032308

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT **NAKAMITSU, ABIGAIL**

Provider ID: 268666
Board Certified Specialty: No
ABIGAIL L NAKAMITSU

 3030 CHILDRENS WAY FL
3
SAN DIEGO, CA 92123
 Phone: (858) 966-6789
Fax: (858) 966-8519

 After Hours Phone: (858)
966-6789

Provider Gender: Female
NPI: 1932459179

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 0\19

American Sign Language (ASL): DARREN A PELIO

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

PAUL, ROBERT

Provider ID: 307945

Board Certified Specialty: No
ROBERT M PAUL

 5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123

 Phone: (858) 571-3630
Fax: (858) 295-3948

 After Hours Phone: (858)
571-3630

Provider Gender: Male

NPI: 1972811412


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-4:30PM

 Website: N/A


PHYSICIANS ASSISTANT

PELIO, DARREN

Provider ID: 293444

Board Certified Specialty: No

 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

 Phone: (800) 926-8278
Fax: (888) 539-8786

 After Hours Phone: (800)
926-8278

Provider Gender: Male

NPI: 1386791028

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PHYSICIANS ASSISTANT

PELIO, DARREN

Provider ID: 293441

Board Certified Specialty: No
DARREN A PELIO

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8275
Fax: (888) 539-8783

 After Hours Phone: (800)
926-8275

Provider Gender: Male

NPI: 1386791028


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A



PHYSICIANS ASSISTANT

PERREAULT, MARK

Provider ID: 283586

Board Certified Specialty: No
MARK R PERREAULT

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
 After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1356749451


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



PHYSICIANS ASSISTANT

PERREAULT, MARK

Provider ID: 283585

Board Certified Specialty: No
MARK R PERREAULT

 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273
 After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1356749451

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

PHUNG, AIVI


Provider ID: 293247

Board Certified Specialty: No
AIVI D PHUNG

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1639528110


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  N

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PHYSICIANS ASSISTANT

PHUNG, AIVI

Provider ID: 293246

Board Certified Specialty: No
AIVI D PHUNG

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700


Fax: (858) 633-4680


 After Hours Phone: (858)

810-8700

Provider Gender: Female

NPI: 1639528110


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

PRIEST, VIVIAN

Provider ID: 272430

Board Certified Specialty: No
VIVIAN I NGUYEN

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1225581754

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


PYLE, ALEXANDRA

Provider ID: 297718

Board Certified Specialty: No
ALEXANDRA P PYLE

 9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

 Phone: (858) 455-6460

Fax: (858) 455-7197

 After Hours Phone: (858)
455-6460

Provider Gender: Female

NPI: 1225416472

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 20\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-4:00PM

 Website: N/A


PHYSICIANS ASSISTANT

QUIJANO, GLENN

Provider ID: 307067

Board Certified Specialty: No
GLENN QUIJANO

 5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123

 Phone: (858) 571-3630

Fax: (858) 295-3948

 After Hours Phone: (858)
571-3630

Provider Gender: Male

D3. Directorio de proveedores especialistas


NPI: 1407466030


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-4:30PM

 Website: N/A



PHYSICIANS ASSISTANT

ROBERTS, AUDREY

Provider ID: 253253



Board Certified Specialty: No
AUDREY ELIZABETH
ZANZUCCHI

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-7777
 After Hours Phone: (619)
543-7777

Provider Gender: Female

NPI: 1265960256


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE

Provider ID: 302452

Board Certified Specialty: No
ANNETTE A RODRIGUES


 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123

 Phone: (858) 966-4003
Fax: (858) 560-6798

 After Hours Phone: (858)
966-4003

Provider Gender: Female


NPI: 1205381845

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: No
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



PHYSICIANS ASSISTANT

SCHMITT, EVA

Provider ID: 264176


Board Certified Specialty: No
EVA V SCHMITT

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1174715106

 Provider English Spoken: Y


 Provider Language(s)
Spoken: German

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

SCHROEDER, JENNIFER

Provider ID: 256639

Board Certified Specialty: No
JENNIFER K SCHROEDER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (858) 453-1469

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1780851253

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

D3. Directorio de proveedores especialistas

SCHROEDER, JENNIFER

Provider ID: 256640

Board Certified Specialty: No

JENNIFER K SCHROEDER

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780851253

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SCHULZ, STEFAN

Provider ID: 243419

Board Certified Specialty: No

STEFAN K SCHULZ

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1316102163

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SHAUL, SHERA

Provider ID: 247974

Board Certified Specialty: No

SHERA M SHAUL

4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1336659507

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SPEH, BRIAN

Provider ID: 305009

Board Certified Specialty: No

BRIAN A SPEH

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124593926

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

STALLINGS, ANDREA

Provider ID: 255913

Board Certified Specialty: No

ANDREA M STALLINGS

330 LEWIS ST

SAN DIEGO, CA 92103

Phone: (619) 543-7496

After Hours Phone: (619)
543-7496

Provider Gender: Female

NPI: 1972595478

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

TESFAI, HELEN

Provider ID: 287372

Board Certified Specialty: No

HELEN S TESFAI

4168 FRONT ST

SAN DIEGO, CA 92103

Phone: (800) 926-8273

D3. Directorio de proveedores especialistas

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1942724042

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299600

Board Certified Specialty: No
TAMARA A WAHLIN

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1083823322

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299599

Board Certified Specialty: No
TAMARA A WAHLIN

📍 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1083823322

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299598

Board Certified Specialty: No
TAMARA A WAHLIN

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1083823322

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PHYSICIANS ASSISTANT

WEBB, SHANNON

Provider ID: 305285

Board Certified Specialty: No
SHANNON L WEBB

📍 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

☎ Phone: (858) 750-2983

Fax: (858) 750-2984

☎ After Hours Phone: (858) 750-2983

Provider Gender: Female

NPI: 1821271685

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
9:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

WEIR, JACQUELINE

Provider ID: 278203

Board Certified Specialty: No
JACQUELINE R WEIR



























📍 9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

D3. Directorio de proveedores especialistas

-  After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932494499
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A
- PHYSICIANS ASSISTANT**
WEIR, JACQUELINE
Provider ID: 278201
Board Certified Specialty: No
JACQUELINE R WEIR
 4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932494499
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A
- PHYSICIANS ASSISTANT**
WRIGHT, DEREK
Provider ID: 302388
- Board Certified Specialty: No
DEREK J WRIGHT
 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
 Phone: (619) 325-1161
Fax: (619) 325-1717
 After Hours Phone: (619) 325-1161
Provider Gender: Male
NPI: 1629674858
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A
- PREVENTATIVE MEDICINE**
GENERAL
ROMERO, CAMILA
Provider ID: 303060
Board Certified Specialty: No
CAMILA X ROMERO
 330 LEWIS ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1508912130
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR

D3. Directorio de proveedores especialistas

WOMEN AND NEWBORNS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PREVENTATIVE MEDICINE


GENERAL

ROMERO, CAMILA

Provider ID: 293289

Board Certified Specialty: No
CAMILA X ROMERO

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925


Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1508912130

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PREVENTATIVE MEDICINE


GENERAL

ROMERO, CAMILA

Provider ID: 293290

Board Certified Specialty: No
CAMILA X ROMERO

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1508912130

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PSYCHOLOGIST

ABERCROMBIE, SHERI

Provider ID: 290770

Board Certified Specialty: No
SHERI ABERCROMBIE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1932292422


 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PSYCHOLOGIST

ABERCROMBIE, SHERI

Provider ID: 293400

Board Certified Specialty: No
SHERI ABERCROMBIE

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1932292422

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:30AM-5:30PM

SA 8:30AM-4:00PM

 Website: N/A


PSYCHOLOGIST

BANKS, SARAH

Provider ID: 203173

Board Certified Specialty: No
SARAH J BANKS

 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)

D3. Directorio de proveedores especialistas

926-8273
Provider Gender: Female
NPI: 1164701132
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PSYCHOLOGIST

BANKS, SARAH

Provider ID: 203174
Board Certified Specialty: No
SARAH J BANKS
📍 4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1164701132

☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT

PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PSYCHOLOGIST

BANKS, SARAH

Provider ID: 304195
Board Certified Specialty: No
SARAH J BANKS
📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
☎ Phone: (800) 926-8273
☎ Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1164701132
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

PSYCHOLOGIST

BASS, GURGIANA

Provider ID: 306550
Board Certified Specialty: No
GURGIANA BASS
📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 279-0925
🕒 After Hours Phone: (858)
279-0925
Provider Gender: Female

NPI: 1639325277
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M 8:00AM-4:30PM
TU 8:00AM-0:00PM
W 8:00AM-4:30PM
TH 8:00AM-0:00PM
🌐 Website: N/A

PSYCHOLOGIST

BASS, GURGIANA

Provider ID: 290752
Board Certified Specialty: No
GURGIANA BASS
📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 810-8700
☎ Fax: (858) 633-4680
🕒 After Hours Phone: (858)
810-8700

Provider Gender: Female
NPI: 1639325277
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

PSYCHOLOGIST

CHESHER, NICHOLAS

Provider ID: 273811
Board Certified Specialty: No

D3. Directorio de proveedores especialistas

NICHOLAS J CHESHER

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124539697

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

CLEMENT, LUIS

Provider ID: 290745

Board Certified Specialty: No

LUIS F CLEMENT

2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0206

After Hours Phone: (619)
234-2158

Provider Gender: Male

NPI: 1235364712

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PSYCHOLOGIST

DIOKNO, RHODA

Provider ID: 290800

Board Certified Specialty: No

ROHDA CARINO DIOKNO

2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0206

After Hours Phone: (619)
234-2158

Provider Gender: Female

NPI: 1629109483

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PSYCHOLOGIST

FIRESTONE, MICHELLE

Provider ID: 290954

Board Certified Specialty: No

MICHELLE E FIRESTONE

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1114687803

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PSYCHOLOGIST

FIRESTONE, MICHELLE

Provider ID: 290773

Board Certified Specialty: No

MICHELLE E FIRESTONE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1114687803

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PSYCHOLOGIST

FORZANI, CHRISTINA

Provider ID: 290780

Board Certified Specialty: No

CHRISTINA A FORZANI


4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681

D3. Directorio de proveedores especialistas

 After Hours Phone: (619) 563-0250

Provider Gender: Female

NPI: 1902939630

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PSYCHOLOGIST


GIAMONA, KRISTEN

Provider ID: 290801

Board Certified Specialty: No

KRISTEN M GIAMONA

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858) 810-8700

Provider Gender: Female

NPI: 1376824383

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PSYCHOLOGIST


GIAMONA, KRISTEN

Provider ID: 294171


Board Certified Specialty: No

KRISTEN M GIAMONA

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858) 279-0925

Provider Gender: Female

NPI: 1376824383

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PSYCHOLOGIST

GOMEZ, JUANITA

Provider ID: 291424


Board Certified Specialty: No

JUANITA GOMEZ

 6030 VILLAGE WAY
SAN DIEGO, CA 92130


 Phone: (800) 926-8372

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8372

Provider Gender: Female

NPI: 1790915759

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PSYCHOLOGIST


KLUEMPER, NICOLE

Provider ID: 296237


Board Certified Specialty: No

NICOLE S KLUEMPER

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858) 279-0925

Provider Gender: Female

NPI: 1902125818

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 2\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PSYCHOLOGIST


KLUEMPER, NICOLE

Provider ID: 290792

Board Certified Specialty: No

NICOLE S KLUEMPER

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858) 810-8700

Provider Gender: Female

NPI: 1902125818

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

D3. Directorio de proveedores especialistas

Min/Max Age: 2\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PSYCHOLOGIST


LABIB, MICHAEL

Provider ID: 301617

Board Certified Specialty: No

MICHAEL LABIB

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173


 Phone: (619) 662-4100

Fax: (619) 785-3384

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1609055797

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST

LEBENSOHN CHIALVO, FLORENCIA

Provider ID: 245225


Board Certified Specialty: No

FLORENCIA LEBENSOHN

CHIALVO

 7910 FROST ST STE 350


SAN DIEGO, CA 92123

 Phone: (858) 496-4800

 After Hours Phone: (858)
496-4800

Provider Gender: Female

NPI: 1134788730

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST

LEBENSOHN CHIALVO, FLORENCIA

Provider ID: 245224


Board Certified Specialty: No


FLORENCIA LEBENSOHN

CHIALVO

 9333 GENESEE AVE STE
200

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1134788730

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST

LINKE, SARAH

Provider ID: 273639

Board Certified Specialty: No

SARAH E LINKE

 4910 DIRECTORS PL STE
250

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1487026415

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL


CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST

LINKE, SARAH

D3. Directorio de proveedores especialistas

Provider ID: 273638

Board Certified Specialty: No
SARAH E LINKE

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1487026415

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

MAGINOT-CHESHER, TAMARA

Provider ID: 273223

Board Certified Specialty: No
TAMARA R MAGINOT

CHESHER

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (858) 534-8019
Fax: (858) 534-6727

After Hours Phone: (858)
534-8019

Provider Gender: Female

NPI: 1043441165

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

MCCULLUM, TIFFANY

Provider ID: 290689

Board Certified Specialty: No
TIFFANY MCCULLUM

286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

Phone: (619) 662-4100
Fax: (619) 428-7952

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1528306206

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 13\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

MONTOYA, JESSICA

Provider ID: 274619

Board Certified Specialty: No
JESSICA L MONTOYA

4168 FRONT ST FL 3
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1003421256

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

NING, GRACE

Provider ID: 296219

Board Certified Specialty: No
GRACE J NING

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925
Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Female

D3. Directorio de proveedores especialistas

NPI: 1598911315

Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
 Website: N/A

PSYCHOLOGIST

NING, GRACE

Provider ID: 290742

Board Certified Specialty: No
GRACE J NING

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1598911315

Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
 Website: N/A

PSYCHOLOGIST

NORMAN, MARC

Provider ID: 276869

Board Certified Specialty: No

MARC A NORMAN

350 DICKINSON ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1922169101

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST

NORMAN, MARC

Provider ID: 272916

Board Certified Specialty: No
MARC A NORMAN

200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (619) 543-2827
 After Hours Phone: (619)
543-2827

Provider Gender: Male

NPI: 1922169101

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST

ORFF, HENRY

Provider ID: 273009

Board Certified Specialty: No
HENRY J ORFF

4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
 Phone: (844) 757-5337
 After Hours Phone: (844)
757-5337

Provider Gender: Male

NPI: 1144685215

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST

ORTIZ, MARIA

Provider ID: 290721

Board Certified Specialty: No
MARIA E ORTIZ

950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100

D3. Directorio de proveedores especialistas

Fax: (619) 662-4158

☎ After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1497980775

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PSYCHOLOGIST

**PATTERSON-HYATT,
KIMBERLY**

Provider ID: 290730

Board Certified Specialty: No

KIMBERLY G

PATTERSON-HYATT

📍 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

☎ Phone: (619) 662-4100

Fax: (619) 205-6305

☎ After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1780997742

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PSYCHOLOGIST

PRINCE, RENEE

Provider ID: 303603

Board Certified Specialty: No

RENEE K PRINCE

📍 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

☎ Phone: (844) 200-2426

Fax: (619) 474-4008

☎ After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1467737908

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-6:00PM

🌐 Website: N/A

PSYCHOLOGIST

RADOJEVIC, NATASHA

Provider ID: 306574

Board Certified Specialty: No

NATASHA RADOJEVIC

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

☎ After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1821365008

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TU
8:30AM-5:30PM
TH-F 8:30AM-5:30PM

🌐 Website: N/A

PSYCHOLOGIST

RADOJEVIC, NATASHA

Provider ID: 290690

Board Certified Specialty: No

NATASHA RADOJEVIC

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700

Fax: (858) 633-4680

☎ After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1821365008

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TU
8:30AM-5:30PM
TH-F 8:30AM-5:30PM

🌐 Website: N/A

PSYCHOLOGIST

SALO, STEPHANIE

Provider ID: 307831

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

STEPHANIE P SALO

4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619)
563-0250

Provider Gender: Female

NPI: 1477967784

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 17\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

SCHELLINGER, KRISTON

Provider ID: 213752

Board Certified Specialty: No

KRISTON B SCHELLINGER

330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (858) 246-1979
After Hours Phone: (858)
246-1979

Provider Gender: Female

NPI: 1710234273

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

SCHELLINGER, KRISTON

Provider ID: 213750

Board Certified Specialty: No

KRISTON B SCHELLINGER

9333 GENESEE AVE STE
200

SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1710234273

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

SCHELLINGER, KRISTON

Provider ID: 213751

Board Certified Specialty: No

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Phone: (858) 246-1979
After Hours Phone: (858)
246-1979

Provider Gender: Female

NPI: 1710234273

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

TARLE, STEPHANIE

Provider ID: 303115

Board Certified Specialty: No

STEPHANIE J TARLE

6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1659920403

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

D3. Directorio de proveedores especialistas

Min/Max Age: 0\None

American Sign Language (ASL): Provider Gender: Male

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PSYCHOLOGIST

TO, TUAN

Provider ID: 290283

Board Certified Specialty: No
TUAN TO

 4290 POLK AVE
SAN DIEGO, CA 92105


 Phone: (619) 563-0250

Fax: (858) 633-4681

 After Hours Phone: (619)
563-0250

Provider Gender: Male

NPI: 1255696183

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PSYCHOLOGIST

TO, TUAN

Provider ID: 290285

Board Certified Specialty: No
TUAN TO

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925


Fax: (858) 633-4680


 After Hours Phone: (858)

279-0925

Provider Gender: Male

NPI: 1255696183

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 5\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PSYCHOLOGIST

TO, TUAN

Provider ID: 290284

Board Certified Specialty: No
TUAN TO

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Male

NPI: 1255696183

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 5\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PSYCHOLOGIST

TWAMLEY, ELIZABETH

Provider ID: 290717

Board Certified Specialty: No
ELIZABETH W TWAMLEY

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

Fax: (619) 687-1067

 After Hours Phone: (619)
233-8500

Provider Gender: Female

NPI: 1700089141


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-W
8:30AM-5:00PM
TH 8:30AM-9:00PM
F 8:30AM-5:00PM

 Website: N/A

PULMONARY DISEASES

BAILEY, JACOB


Provider ID: 299923

Board Certified Specialty: No
JACOB A BAILEY

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male



NPI: 1598150039

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

D3. Directorio de proveedores especialistas

American Sign Language (ASL): N
N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PULMONARY DISEASES

BAILEY, JACOB

Provider ID: 299924
Board Certified Specialty: No
JACOB A BAILEY
 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273




Provider Gender: Male

NPI: 1598150039

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PULMONARY DISEASES

JOSHUA, JISHA

Provider ID: 238061
Board Certified Specialty: No
JISHA K JOSHUA
 4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1023436417




Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Malayalam
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes



Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PULMONARY DISEASES

JOSHUA, JISHA

Provider ID: 238062
Board Certified Specialty: No
JISHA K JOSHUA
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1023436417

Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Malayalam
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PULMONARY DISEASES

LE, HUAN

Provider ID: 300636
Board Certified Specialty: No
HUAN A LE
 5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115
 Phone: (619) 582-1448
Fax: (619) 582-1081
 After Hours Phone: (619)
582-1448

Provider Gender: Male

NPI: 1780797381

Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish,
Vietnamese
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PARADISE VALLEY
HOSPITAL, SHARP CHULA
VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-W
9:00AM-5:00PM
TH 8:00AM-1:00PM
F 9:00AM-6:00PM
SA 8:00AM-11:00AM

D3. Directorio de proveedores especialistas


 Website: N/A


PULMONARY DISEASES

LE, HUAN

Provider ID: 27358

Board Certified Specialty: No
HUAN A LE

 5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115


 Phone: (619) 582-1448


Fax: (619) 582-1081

 After Hours Phone: (619)
582-1448

Provider Gender: Male

NPI: 1780797381

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA, PARADISE VALLEY

HOSPITAL, SHARP CHULA

VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\99

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-W
9:00AM-5:00PM
TH 8:00AM-1:00PM
F 9:00AM-6:00PM
SA 8:00AM-11:00AM

 Website: N/A

PULMONARY DISEASES

MCGUIRE, WILLIAM

Provider ID: 299986

Board Certified Specialty: No
WILLIAM C MCGUIRE

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1841684081

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP

CORONADO HOSP AND
HEALTHCARE CTR, SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,
SHARP CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PULMONARY DISEASES

PEARCE, ALEX

Provider ID: 300055

Board Certified Specialty: No
ALEX K PEARCE

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265896856

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIATION ONCOLOGY

CARMONA, RUBEN

Provider ID: 303100

Board Certified Specialty: No
RUBEN CARMONA

 7901 FROST ST
SAN DIEGO, CA 92123

 Phone: (858) 939-5010

Fax: (619) 740-8499

 After Hours Phone: (858)
939-5010

Provider Gender: Male

NPI: 1275929242

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp

Grossmont Hospital, SHARP


MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIATION ONCOLOGY

D3. Directorio de proveedores especialistas

COLEMAN, LORI

Provider ID: 221091

Board Certified Specialty: No

LORI A COLEMAN

3075 HEALTH CENTER DR
SAN DIEGO, CA 92123

Phone: (858) 939-5010

Fax: (858) 939-5021

After Hours Phone: (858)
939-5010

Provider Gender: Female

NPI: 1053348920

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SHARP MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,

PALOMAR MEDICAL CENTER,

Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIATION ONCOLOGY

HATTANGADI-GLUTH, JONA

Provider ID: 262270

Board Certified Specialty: No

JONA A HATTANGADI-GLUTH

16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858)
649-5100

Provider Gender: Female

NPI: 1467625491

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-5:00PM
F 8:00AM-8:00PM

Website: N/A

RADIATION ONCOLOGY

HATTANGADI-GLUTH, JONA

Provider ID: 254496

Board Certified Specialty: No

JONA A HATTANGADI-GLUTH

16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858)
649-5100

Provider Gender: Female

NPI: 1467625491

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-5:00PM
F 8:00AM-8:00PM

Website: N/A

RADIATION ONCOLOGY

HOOPES, DAVID

Provider ID: 269725

Board Certified Specialty: No

DAVID J HOOPES

16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858)
649-5100

Provider Gender: Male

NPI: 1962520080

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

RADIATION ONCOLOGY

HOOPES, DAVID

Provider ID: 262206

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

DAVID J HOOPES

16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858)
649-5100

Provider Gender: Male

NPI: 1962520080

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:30AM-5:00PM

Website: N/A

RADIATION ONCOLOGY

TRINGALE, KATHRYN

Provider ID: 306883

Board Certified Specialty: No
KATHRYN R TRINGALE

9730 SUMMERS RIDGE RD
STE 101

SAN DIEGO, CA 92121

Phone: (858) 345-2445

Fax: (858) 578-1144

After Hours Phone: (858)
345-2445

Provider Gender: Female

NPI: 1780172031

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

RADIATION ONCOLOGY

VOLPP, PAUL

Provider ID: 221105

Board Certified Specialty: No
PAUL B VOLPP

3075 HEALTH CENTER DR
SAN DIEGO, CA 92123

Phone: (858) 939-5010

Fax: (858) 939-5021

After Hours Phone: (858)
939-5010

Provider Gender: Male

NPI: 1225186232

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

GROSSMONT HOSPITAL,

PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

BERMAN, ZACHARY

Provider ID: 269318

Board Certified Specialty: No

ZACHARY T BERMAN

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033521190

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

BERMAN, ZACHARY

Provider ID: 304163

Board Certified Specialty: No

ZACHARY T BERMAN

6655 ALVARADO RD

SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

D3. Directorio de proveedores especialistas

NPI: 1033521190

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

BRANCH, CODY

Provider ID: 304199

Board Certified Specialty: No
CODY BRANCH

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1851770622

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

BRANCH, CODY

Provider ID: 283675

Board Certified Specialty: No
CODY BRANCH

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1851770622

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

CARSWELL, AIMEE

Provider ID: 303054

Board Certified Specialty: No
AIMEE P CARSWELL

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (858) 554-1212
Fax: (858) 795-1195

 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1619156635

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC


CARSWELL, AIMEE

Provider ID: 303055

Board Certified Specialty: No
AIMEE P CARSWELL

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (858) 554-1212
Fax: (858) 795-1195

 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1619156635

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:


EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC

CARSWELL, AIMEE

Provider ID: 304194

Board Certified Specialty: No
AIMEE P CARSWELL

 6655 ALVARADO RD

D3. Directorio de proveedores especialistas

SAN DIEGO, CA 92120
☎ Phone: (858) 554-1212
Fax: (858) 795-1195
🕒 After Hours Phone: (858) 554-1212
Provider Gender: Female
NPI: 1619156635
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 304207
Board Certified Specialty: No
KAREN Y CHENG
📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1427430511
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 283228
Board Certified Specialty: No
KAREN Y CHENG
📍 330 LEWIS ST STE 202
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1427430511
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 283226
Board Certified Specialty: No
KAREN Y CHENG
📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1427430511
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

CHEWNING, RUSH

Provider ID: 301914
Board Certified Specialty: No
RUSH CHEWNING
📍 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
☎ Phone: (858) 966-8863
Fax: (858) 966-8863
🕒 After Hours Phone: (858) 966-8863
Provider Gender: Male
NPI: 1083872212
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 0\19

American Sign Language (ASL): Provider Gender: Female

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

FAZELI, SOUDABEH

Provider ID: 299991

Board Certified Specialty: No
SOUDABEH FAZELI

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1639553613

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

FAZELI, SOUDABEH

Provider ID: 299992

Board Certified Specialty: No
SOUDABEH FAZELI

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1639553613

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

FAZELI, SOUDABEH

Provider ID: 304171

Board Certified Specialty: No
SOUDABEH FAZELI

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1639553613


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

FORCIER, NANCY

Provider ID: 286954

Board Certified Specialty: No
NANCY J FORCIER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1497721724

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS


MEMORIAL HOSPITAL,

Providence Mission Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

FORCIER, NANCY

Provider ID: 286956

Board Certified Specialty: No
NANCY J FORCIER

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1497721724

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

Providence Mission Hospital

D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): **RADIOLOGY DIAGNOSTIC**

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC


FOWLER, KATHRYN

Provider ID: 201289

Board Certified Specialty: No
KATHRYN J FOWLER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1255457941

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL,


SCRIPPS GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC


FOWLER, KATHRYN

Provider ID: 201291

Board Certified Specialty: No
KATHRYN J FOWLER

 330 LEWIS ST STE 202
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1255457941

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL,


SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC


GRISSOM, MURRAY

Provider ID: 271569

Board Certified Specialty: No

MURRAY J GRISSOM

 330 LEWIS ST STE 202
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1720465396

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON, Stanford Health Care,


STANFORD HEALTH CARE TRI-VALLEY


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


RADIOLOGY DIAGNOSTIC

GRISSOM, MURRAY


Provider ID: 271567

Board Certified Specialty: No
MURRAY J GRISSOM

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1720465396

 Provider English Spoken: Y
Cultural Competency: N


D3. Directorio de proveedores especialistas

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
Stanford Health Care,
STANFORD HEALTH CARE
TRI-VALLEY

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

HANNSUN, GEMMY

Provider ID: 282789

Board Certified Specialty: No
GEMMY HANNSUN


 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1992120026

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Khmer, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

HANNSUN, GEMMY

Provider ID: 282791

Board Certified Specialty: No
GEMMY HANNSUN


 330 LEWIS ST STE 202
SAN DIEGO, CA 92103


 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1992120026

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Khmer, Spanish

Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC


HORKY, LAURA

Provider ID: 241853

Board Certified Specialty: No
LAURA L HORKY


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1598967812

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL

Provider ID: 299957

Board Certified Specialty: No
PAUL M JAFFRAY

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1275700999



 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Los Angeles
General Medical Center
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

D3. Directorio de proveedores especialistas

 Accessibility: CONTACT PROVIDER
 Website: N/A

RADIOLOGY DIAGNOSTIC


JAFFRAY, PAUL

Provider ID: 299958
Board Certified Specialty: No
PAUL M JAFFRAY



 330 LEWIS ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1275700999

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Los Angeles
General Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None



American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Website: N/A

RADIOLOGY DIAGNOSTIC


JAFFRAY, PAUL

Provider ID: 304165
Board Certified Specialty: No
PAUL M JAFFRAY



 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1275700999

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Los Angeles
General Medical Center



Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Website: N/A

RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER

Provider ID: 304167
Board Certified Specialty: No
SAMMER JAZBEH

 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1770825457

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,
PROVIDENCE LITTLE CO OF
MARY MED CTR TORRANCE,
PROVIDENCE LITTLE CO OF
MARY MED CTR SAN PEDRO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N


 Accessibility: CONTACT

PROVIDER
 Website: N/A

RADIOLOGY DIAGNOSTIC



JAZBEH, SAMMER

Provider ID: 271127
Board Certified Specialty: No
SAMMER JAZBEH

 330 LEWIS ST STE 202
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273


Provider Gender: Male
NPI: 1770825457

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
PROVIDENCE LITTLE CO OF
MARY MED CTR TORRANCE,
PROVIDENCE LITTLE CO OF
MARY MED CTR SAN PEDRO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER

Provider ID: 271126
Board Certified Specialty: No

D3. Directorio de proveedores especialistas

SAMMER JAZBEH

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1770825457

Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
PROVIDENCE LITTLE CO OF
MARY MED CTR TORRANCE,
PROVIDENCE LITTLE CO OF
MARY MED CTR SAN PEDRO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC

KHURANA, AMAN

Provider ID: 307768
Board Certified Specialty: No
AMAN KHURANA

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male

NPI: 1427496710

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC

KHURANA, AMAN

Provider ID: 307766
Board Certified Specialty: No
AMAN KHURANA

330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1427496710

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC

KHURANA, AMAN

Provider ID: 307765
Board Certified Specialty: No
AMAN KHURANA

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1427496710
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER

Provider ID: 283145
Board Certified Specialty: No
DHIMITER KONDILI

330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1699125450
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

D3. Directorio de proveedores especialistas

RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER

Provider ID: 283143

Board Certified Specialty: No

DHIMITER KONDILI

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699125450

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

MARKS, ROBERT

Provider ID: 300064

Board Certified Specialty: No

ROBERT M MARKS

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952389934

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: ST MARY

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

MARKS, ROBERT

Provider ID: 300065

Board Certified Specialty: No

ROBERT M MARKS

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952389934

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: ST MARY

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

RITCHIE, DAVID

Provider ID: 300031

Board Certified Specialty: No

DAVID J RITCHIE

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1407201916

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

SADAT, SAYED

Provider ID: 299968

Board Certified Specialty: No

SAYED W SADAT

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1679000806

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

D3. Directorio de proveedores especialistas

SADAT, SAYED

Provider ID: 299969

Board Certified Specialty: No
SAYED W SADAT

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1679000806

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

SADAT, SAYED

Provider ID: 304202

Board Certified Specialty: No
SAYED W SADAT

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1679000806

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

SCHULTZ, HEATHER

Provider ID: 240344

Board Certified Specialty: No
HEATHER M SCHULTZ

330 LEWIS ST STE 202
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1871910810

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

SCHULTZ, HEATHER

Provider ID: 240342

Board Certified Specialty: No
HEATHER M SCHULTZ

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1871910810

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

SEARLEMAN, ADAM

Provider ID: 299948

Board Certified Specialty: No
ADAM C SEARLEMAN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1134570641

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

SEARLEMAN, ADAM

Provider ID: 299949

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
ADAM C SEARLEMAN

📍 330 LEWIS ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
📠 Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1134570641

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

SLATER, JERRY

Provider ID: 283312

Board Certified Specialty: No
JERRY SLATER

📍 330 LEWIS ST STE 202
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
📠 Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1851746382

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,
LOMA LINDA UNIVERSITY
MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

SLATER, JERRY

Provider ID: 283310

Board Certified Specialty: No
JERRY SLATER

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
📠 Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1851746382

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,
LOMA LINDA UNIVERSITY
MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

SPENGLER, NATHAN

Provider ID: 303049

Board Certified Specialty: No
NATHAN M SPENGLER

📍 330 LEWIS ST
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
📠 Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1992919666

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

SPENGLER, NATHAN

Provider ID: 303048

Board Certified Specialty: No
NATHAN M SPENGLER

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
📠 Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1992919666

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA

D3. Directorio de proveedores especialistas

IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): JASON D SWEET

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC

STRAKA, CHRISTOPHER


Provider ID: 276875

Board Certified Specialty: No

CHRISTOPHER A STRAKA

 16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127


 Phone: (858) 649-5100

Fax: (858) 649-5099

 After Hours Phone: (858)
649-5100

Provider Gender: Male

NPI: 1801281399

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 17\120

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC


SWEET, JASON


Provider ID: 305028

Board Certified Specialty: No

JASON D SWEET

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1326197393

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC

TADDONIO, MICHAEL

Provider ID: 304179

Board Certified Specialty: No

MICHAEL A TADDONIO

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1386987261

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC

TADDONIO, MICHAEL


Provider ID: 240407

Board Certified Specialty: No

MICHAEL A TADDONIO

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1386987261

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC

TADDONIO, MICHAEL

Provider ID: 240408

Board Certified Specialty: No

MICHAEL A TADDONIO

 4168 FRONT ST

D3. Directorio de proveedores especialistas

SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1386987261
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC

TADDONIO, MICHAEL

Provider ID: 240405
Board Certified Specialty: No
MICHAEL A TADDONIO
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1386987261
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC

TADROS, ANTHONY

Provider ID: 268546
Board Certified Specialty: No
ANTHONY S TADROS
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1306112057

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC

TADROS, ANTHONY

Provider ID: 304150
Board Certified Specialty: No
ANTHONY S TADROS
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1306112057
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC

THOMPSON, COLE

Provider ID: 304175
Board Certified Specialty: No
COLE P THOMPSON
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1700315264
Provider English Spoken: Y
Cultural Competency: N

D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1700315264

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC


THOMPSON, COLE

Provider ID: 299988

Board Certified Specialty: No

COLE P THOMPSON

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1700315264


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1285165183

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC

THOMPSON, COLE

Provider ID: 299989

Board Certified Specialty: No

COLE P THOMPSON

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1700315264

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1285165183

 Accessibility: CONTACT PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC


UNSDORFER, KYLE

Provider ID: 300035

Board Certified Specialty: No

KYLE M UNSDORFER

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1285165183


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1285165183

 Accessibility: CONTACT PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC

UNSDORFER, KYLE

Provider ID: 300034

Board Certified Specialty: No

KYLE M UNSDORFER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1285165183

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1285165183

 Accessibility: CONTACT PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC


VAHDAT, NOUSHIN


Provider ID: 300071

Board Certified Specialty: No

NOUSHIN VAHDAT

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1396700852


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1396700852

 Accessibility: CONTACT PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC

VAHDAT, NOUSHIN

D3. Directorio de proveedores especialistas

Provider ID: 300070
Board Certified Specialty: No
NOUSHIN VAHDAT

330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1396700852

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC **VAKILIAN, SIAVOSH**

Provider ID: 283207
Board Certified Specialty: No
SIAVOSH VAKILIAN

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Phone: (858) 505-4100
Fax: (858) 429-7939
After Hours Phone: (858) 505-4100

Provider Gender: Male
NPI: 1427456151

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC **VAKILIAN, SIAVOSH**

Provider ID: 283205
Board Certified Specialty: No
SIAVOSH VAKILIAN

3366 5TH AVE
SAN DIEGO, CA 92103
Phone: (619) 230-0400
Fax: (858) 429-7936
After Hours Phone: (619) 230-0400

Provider Gender: Male
NPI: 1427456151

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC **YORK, VINCENT**

Provider ID: 283519
Board Certified Specialty: No
VINCENT M YORK

330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1790146611

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC **YORK, VINCENT**

Provider ID: 283517
Board Certified Specialty: No
VINCENT M YORK

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1790146611

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC

D3. Directorio de proveedores especialistas

ZAPALA, MATTHEW

Provider ID: 307675

Board Certified Specialty: No
MATTHEW A ZAPALA

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346482809

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S
HOSPITAL OAKLAND, UCSF
MEDICAL CENTER, UCSF

Medical Center At Mission Bay,
UCSF MEDICAL CENTER AT
MOUNT ZION

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

ZAPALA, MATTHEW

Provider ID: 307678

Board Certified Specialty: No
MATTHEW A ZAPALA

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346482809

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S
HOSPITAL OAKLAND, UCSF
MEDICAL CENTER, UCSF

Medical Center At Mission Bay,
UCSF MEDICAL CENTER AT
MOUNT ZION

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

ZAPALA, MATTHEW

Provider ID: 307676

Board Certified Specialty: No
MATTHEW A ZAPALA

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346482809

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S
HOSPITAL OAKLAND, UCSF
MEDICAL CENTER, UCSF

Medical Center At Mission Bay,
UCSF MEDICAL CENTER AT
MOUNT ZION

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

REGISTERED PHYSICAL THERAPIST

AGUERO, PETER

Provider ID: 258298

Board Certified Specialty: No
PETER D AGUERO

8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982120861

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

AGUERO, PETER

Provider ID: 258299

Board Certified Specialty: No
PETER D AGUERO

9333 GENESEE AVE STE
310
SAN DIEGO, CA 92121

Phone: (800) 926-8273

D3. Directorio de proveedores especialistas

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982120861

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

BARTZ, BRYAN

Provider ID: 273381

Board Certified Specialty: No
BRYAN M BARTZ

📍 8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1669818993

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

BARTZ, BRYAN

Provider ID: 273380

Board Certified Specialty: No
BRYAN M BARTZ

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1669818993

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

BERGERON, PATRICK

Provider ID: 206534

Board Certified Specialty: No
PATRICK BERGERON

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1285061390

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

BUNOSKY, ABIGAIL

Provider ID: 258304

Board Certified Specialty: No
ABIGAIL S BUNOSKY

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1780018416

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST

BUNOSKY, ABIGAIL

Provider ID: 246022
Board Certified Specialty: No
ABIGAIL S BUNOSKY

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1780018416

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

CORTEZ, AARON

Provider ID: 279194
Board Certified Specialty: No
AARON J CORTEZ

16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273

Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1639693187

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

COSTELLO, MARK

Provider ID: 295634
Board Certified Specialty: No
MARK A COSTELLO

7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111

Phone: (818) 894-2273
Fax: (818) 357-2505

After Hours Phone: (818)
894-2273

Provider Gender: Male
NPI: 1710193602

Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Armenian,
Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

REGISTERED PHYSICAL THERAPIST

DANG, ERIC

Provider ID: 258363
Board Certified Specialty: No
ERIC A DANG

8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122

Phone: (858) 543-3333
Fax: (858) 657-1809

After Hours Phone: (858)
543-3333

Provider Gender: Male
NPI: 1891237756

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

DANG, KAYLEE

Provider ID: 279261
Board Certified Specialty: No
KAYLEE T DANG

16950 VIA TAZON

D3. Directorio de proveedores especialistas

SAN DIEGO, CA 92127
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1316426356
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

FARRAR, COURTNEY
Provider ID: 295259
Board Certified Specialty: No
COURTNEY L FARRAR
📍 3434 MIDWAY DR STE 2001 SAN DIEGO, CA 92110
☎ Phone: (619) 325-1161
Fax: (619) 325-1717
📞 After Hours Phone: (619) 325-1161
Provider Gender: Male
NPI: 1124577952
📄 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 13\None

American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

FARRAR, COURTNEY
Provider ID: 303843
Board Certified Specialty: No
COURTNEY L FARRAR
📍 3434 MIDWAY DR STE 2001 SAN DIEGO, CA 92110
☎ Phone: (619) 325-1161
Fax: (619) 325-1717
📞 After Hours Phone: (619) 325-1161
Provider Gender: Male
NPI: 1124577952
📄 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

JOHNSON, KENNADY
Provider ID: 305041
Board Certified Specialty: No
KENNADY L JOHNSON
📍 16950 VIA TAZON SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1730834417
📄 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

MC ELROY, CARTER
Provider ID: 206523
Board Certified Specialty: No
CARTER J MC ELROY
📍 16950 VIA TAZON SAN DIEGO, CA 92127
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1114472230
📄 Provider English Spoken: Y
📄 Provider Language(s) Spoken: Thai
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F

D3. Directorio de proveedores especialistas

8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST

MC ELROY, CARTER

Provider ID: 206522
Board Certified Specialty: No
CARTER J MC ELROY

8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122

Phone: (855) 543-0333

Fax: (858) 657-6873

After Hours Phone: (855)
543-0333

Provider Gender: Male

NPI: 1114472230

Provider English Spoken: Y

Provider Language(s)
Spoken: Thai

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

NGUYEN, HARRY

Provider ID: 271871
Board Certified Specialty: No
HARRY D NGUYEN

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1629558499

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

RICKERTS, MATTHEW

Provider ID: 287652
Board Certified Specialty: No
MATTHEW RICKERTS PT

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1063882579

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST

RUDD, CHRISTOPHER

Provider ID: 207560
Board Certified Specialty: No
CHRISTOPHER D RUDD

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1831539337

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

SKINNER, NICOLE

Provider ID: 206547
Board Certified Specialty: No
NICOLE J SKINNER

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

D3. Directorio de proveedores especialistas

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1386964997

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

VANDEWIELE, EMILY

Provider ID: 285183

Board Certified Specialty: No
EMILY R VANDEWIELE

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1942818505

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

VASQUEZ, BENJAMIN

Provider ID: 302870

Board Certified Specialty: No
BENJAMIN P VASQUEZ

📍 4910 DIRECTORS PL
SAN DIEGO, CA 92121

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1568938413

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

WALKER, JULIE

Provider ID: 258489

Board Certified Specialty: No
JULIE C WALKER

📍 8929 UNIVERSITY CENTER

LN STE 200

SAN DIEGO, CA 92122

☎ Phone: (855) 543-0333
Fax: (858) 535-6422

☎ After Hours Phone: (855) 543-0333

Provider Gender: Female

NPI: 1720489503

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

WILLIAMS, STACY

Provider ID: 259683

Board Certified Specialty: No
STACY M WILLIAMS

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1689962169

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

REGISTERED PHYSICAL


THERAPIST

WILLIAMS, STACY

Provider ID: 259684

*Board Certified Specialty: No
STACY M WILLIAMS*

 4520 EXECUTIVE DR STE 1
SAN DIEGO, CA 92121

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1689962169

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA*


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

SPEECH PATHOLOGIST


AROCHO-SALGADO, MIRELIS

Provider ID: 296932

*Board Certified Specialty: No
MIRELIS AROCHO-SALGADO*

 7510 CLAIREMONT MESA
BLVD STE 103

SAN DIEGO, CA 92111

 *Phone: (877) 757-8353*

Fax: (818) 357-2505

 *After Hours Phone: (877)
757-8353*

Provider Gender: Female

NPI: 1063660165

 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

SPEECH PATHOLOGIST


AROCHO-SALGADO, MIRELIS

Provider ID: 296930

*Board Certified Specialty: No
MIRELIS AROCHO-SALGADO*

 9655 GRANITE RIDGE DR
STE 200

SAN DIEGO, CA 92123

 *Phone: (877) 757-8353*

Fax: (818) 357-2505

 *After Hours Phone: (877)
757-8353*

Provider Gender: Female

NPI: 1063660165

 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


 *Website: N/A*

SPEECH PATHOLOGIST


AROCHO-SALGADO, MIRELIS

Provider ID: 296929

*Board Certified Specialty: No
MIRELIS AROCHO-SALGADO*

 11440 W BERNARDO CT
STE 300

SAN DIEGO, CA 92127

 *Phone: (877) 757-8353*

Fax: (818) 357-2505

 *After Hours Phone: (877)
757-8353*

Provider Gender: Female

NPI: 1063660165


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


 *Website: N/A*

SPEECH PATHOLOGIST


CLARK, MELISSA

Provider ID: 296920

*Board Certified Specialty: No
MELISSA A CLARK*

 11440 W BERNARDO CT
STE 300

SAN DIEGO, CA 92127

 *Phone: (877) 757-8353*

Fax: (818) 357-2505

 *After Hours Phone: (877)
757-8353*

Provider Gender: Female

NPI: 1760546428

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Arabic, Armenian,*

D3. Directorio de proveedores especialistas

Farsi, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 7:00AM-7:00PM
M-F 7:00AM-7:00PM


 Website: N/A


SPEECH PATHOLOGIST

CLARK, MELISSA

Provider ID: 296921

Board Certified Specialty: No
MELISSA A CLARK

 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123


 Phone: (877) 757-8353
Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1760546428

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 7:00AM-7:00PM
M-F 7:00AM-7:00PM


 Website: N/A


SPEECH PATHOLOGIST

CLARK, MELISSA

Provider ID: 296922

Board Certified Specialty: No
MELISSA A CLARK

 7510 CLAIREMONT MESA
BLVD STE 102
SAN DIEGO, CA 92111


 Phone: (877) 757-8353


Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1760546428

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 7:00AM-9:00PM
M-F 7:00AM-9:00PM

 Website: N/A


SPEECH PATHOLOGIST

DURNAN, CASSANDRA

Provider ID: 307885

Board Certified Specialty: No
CASSANDRA L DURNAN

 8929 AERO DR STE E
SAN DIEGO, CA 92123


 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1073873501

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 7:00AM-7:00PM


 Website: N/A


SPEECH PATHOLOGIST

DURNAN, CASSANDRA

Provider ID: 307883

Board Certified Specialty: No
CASSANDRA L DURNAN

 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

 Phone: (877) 757-8353
Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1073873501

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 7:00AM-7:00PM

 Website: N/A

SPEECH PATHOLOGIST

DURNAN, CASSANDRA

Provider ID: 307882

D3. Directorio de proveedores especialistas

Board Certified Specialty: No

CASSANDRA L DURMAN

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127

Phone: (877) 757-8353

Fax: (818) 357-2505

After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1073873501

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7:00AM-7:00PM

Website: N/A

SPEECH PATHOLOGIST

SCHIEDERMAYER, BENJAMIN

Provider ID: 288937

Board Certified Specialty: No

BENJAMIN F

SCHIEDERMAYER

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1164979837

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SPEECH PATHOLOGIST

UNGER, LINDSEY

Provider ID: 207202

Board Certified Specialty: No

LINDSEY A UNGER

8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1972936813

Provider English Spoken: Y

Provider Language(s)
Spoken: Sign Language

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL

Provider ID: 286384

Board Certified Specialty: No
SAMUEL EISENSTEIN

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (858) 657-7237

After Hours Phone: (858)
657-7237

Provider Gender: Male

NPI: 1194983932

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL

Provider ID: 286364

Board Certified Specialty: No
SAMUEL EISENSTEIN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1194983932

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY COLON SURGERY **EISENSTEIN, SAMUEL**

Provider ID: 286363
Board Certified Specialty: No
SAMUEL EISENSTEIN
4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1194983932

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A

SURGERY COLON SURGERY **LIU, SHANGLEI**

Provider ID: 273363
Board Certified Specialty: No
SHANGLEI LIU
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1043558653

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UNIVERSITY HSP
OF SAN DIEGO CO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY COLON SURGERY **LOPEZ, NICOLE**

Provider ID: 286387
Board Certified Specialty: No
NICOLE E LOPEZ
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 543-6886
After Hours Phone: (619)
543-6886
Provider Gender: Female
NPI: 1518163005

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY COLON SURGERY **LOPEZ, NICOLE**

Provider ID: 286366
Board Certified Specialty: No
NICOLE E LOPEZ
4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1518163005

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY COLON SURGERY **PARRY, LISA**

Provider ID: 278553
Board Certified Specialty: No
LISA A PARRY
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

D3. Directorio de proveedores especialistas

Provider Gender: Female

NPI: 1235369067


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


SURGERY COLON SURGERY

PARRY, LISA

Provider ID: 286341

Board Certified Specialty: No
LISA A PARRY

 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1235369067

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


SURGERY COLON SURGERY

RAMAMOORTHY, SONIA

Provider ID: 286370

Board Certified Specialty: No
SONIA L RAMAMOORTHY

 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

 Phone: (800) 926-8273
Fax: (888) 529-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1801812656

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL

AL-NOURI, OMAR

Provider ID: 211903

Board Certified Specialty: No
OMAR AL-NOURI

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

 After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1770742264

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Arabic


Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



SURGERY GENERAL

ARMANI, AVA

Provider ID: 282141

Board Certified Specialty: Yes
AVA ARMANI

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (858) 822-6100
 After Hours Phone: (858)

822-6100

Provider Gender: Female

NPI: 1861759383

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
MEDICAL CENTER, UCSF
Medical Center At Mission Bay,
UCSF MEDICAL CENTER AT
MOUNT ZION, UCSD LA JOLLA
JOHN SALLY THORNTON,

D3. Directorio de proveedores especialistas


UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL


BARNES, RYAN

Provider ID: 299904

Board Certified Specialty: No
RYAN M BARNES

 7910 FROST ST STE 250
SAN DIEGO, CA 92123

 Phone: (858) 565-0104
Fax: (858) 565-0194

 After Hours Phone: (858)
565-0104

Provider Gender: Male

NPI: 1831493501


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Board Certified Specialty: Yes
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-4:30PM

 Website: N/A


SURGERY GENERAL

BARNES, RYAN

Provider ID: 129062

Board Certified Specialty: No
RYAN M BARNES

 7910 FROST ST STE 250
SAN DIEGO, CA 92123

 Phone: (858) 565-0104
Fax: (858) 565-0194

 After Hours Phone: (858)
565-0104

Provider Gender: Male

NPI: 1831493501

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Board Certified Specialty: Yes
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-4:30PM

 Website: N/A


SURGERY GENERAL


BENCH, SHAWN

Provider ID: 129060

Board Certified Specialty: Yes
SHAWN R BENCH


 7910 FROST ST STE 250
SAN DIEGO, CA 92123

 Phone: (858) 565-0104
Fax: (858) 565-0194

 After Hours Phone: (858)
565-0104

Provider Gender: Male

NPI: 1669700753

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, KERN
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Board Certified Specialty: Yes
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM

 Website: N/A


SURGERY GENERAL


BENCH, SHAWN

Provider ID: 299895

Board Certified Specialty: Yes
SHAWN R BENCH

 7910 FROST ST STE 250
SAN DIEGO, CA 92123

 Phone: (858) 565-0104
Fax: (858) 565-0194

 After Hours Phone: (858)
565-0104

Provider Gender: Male

NPI: 1669700753

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, KERN
MEDICAL CENTER


Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM

 Website: N/A


SURGERY GENERAL

BERUMEN, JENNIFER

Provider ID: 260052

Board Certified Specialty: No
JENNIFER A BERUMEN

 8001 FROST ST
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1558566372

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON,
RADY CHILDRENS HOSPITAL
SAN DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY GENERAL


BRODERICK, RYAN

Provider ID: 247073

Board Certified Specialty: No
RYAN C BRODERICK

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1619252418

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY GENERAL

BRODERICK, RYAN

Provider ID: 286342

Board Certified Specialty: No
RYAN C BRODERICK

 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1619252418

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL


BRODERICK, RYAN

Provider ID: 201617

Board Certified Specialty: Yes
RYAN C BRODERICK

 4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121

 Phone: (858) 657-8860

 After Hours Phone: (858)
657-8860

Provider Gender: Male

NPI: 1619252418

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

SURGERY GENERAL

BRUBAKER, ALEAH

Provider ID: 285272

Board Certified Specialty: No

ALEAH LIN BRUBAKER

4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790104305

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
UCSD LA JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

BRUBAKER, ALEAH

Provider ID: 289164

Board Certified Specialty: No

ALEAH LIN BRUBAKER

8001 FROST ST
SAN DIEGO, CA 92123

Phone: (858) 966-8354

Fax: (858) 966-5815

After Hours Phone: (858)
966-8354

Provider Gender: Female

NPI: 1790104305

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
UCSD LA JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO

Provider ID: 304608

Board Certified Specialty: No

SERGIO G CASILLAS

BERUMEN

6719 ALVARADO RD STE
303

SAN DIEGO, CA 92120

Phone: (619) 500-7699

Fax: (619) 483-3997

After Hours Phone: (619)
500-7699

Provider Gender: Male

NPI: 1437470762

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PARADISE VALLEY
HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,
SCRIPPS MERCY HOSPITAL,
PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO

Provider ID: 304609

Board Certified Specialty: No

SERGIO G CASILLAS

BERUMEN

6402 EL CAJON BLVD STE
100

SAN DIEGO, CA 92115

Phone: (619) 582-4490

Fax: (619) 501-9702

After Hours Phone: (619)
582-4490

Provider Gender: Male

NPI: 1437470762

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PARADISE VALLEY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MERCY HOSPITAL,
PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL

FAIRBANKS, TIMOTHY

Provider ID: 260842

Board Certified Specialty: No
TIMOTHY J FAIRBANKS

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 966-7711

Fax: (858) 966-7712

 After Hours Phone: (858)
966-7711

Provider Gender: Male

NPI: 1407010556

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL

OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


SURGERY GENERAL

HORGAN, SANTIAGO

Provider ID: 286367

Board Certified Specialty: No
SANTIAGO HORGAN

 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1932297231

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL


HORGAN, SANTIAGO

Provider ID: 286379

Board Certified Specialty: No
SANTIAGO HORGAN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 471-0700

 After Hours Phone: (619)
471-0700

Provider Gender: Male

NPI: 1932297231

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY GENERAL


IGNACIO, ROMEO


Provider ID: 217053

Board Certified Specialty: No
ROBERT C IGNACIO

 8110 BIRMINGHAM WAY FL
2

SAN DIEGO, CA 92123

 Phone: (858) 966-7711

 After Hours Phone: (858)
966-7711

Provider Gender: Male

NPI: 1538147145

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

D3. Directorio de proveedores especialistas

8:00AM-5:00PM
Website: N/A

SURGERY GENERAL

JACOBSEN, GARTH

Provider ID: 286356

Board Certified Specialty: No
GARTH R JACOBSEN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265649966

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

JACOBSEN, GARTH

Provider ID: 201729

Board Certified Specialty: No
GARTH R JACOBSEN

4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121

Phone: (858) 657-8860

After Hours Phone: (858)
657-8860

Provider Gender: Male

NPI: 1265649966

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

JACOBSEN, GARTH

Provider ID: 286355

Board Certified Specialty: No
GARTH R JACOBSEN

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265649966

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL

MUELLER, GEORGE

Provider ID: 54298

Board Certified Specialty: No
GEORGE A MUELLER

7910 FROST ST STE 250
SAN DIEGO, CA 92123

Phone: (858) 565-0104

Fax: (858) 565-0194

After Hours Phone: (858)
565-0104

Provider Gender: Male

NPI: 1629179684

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:30AM-5:00PM

F 8:30AM-4:00PM

Website: N/A

SURGERY GENERAL









MUELLER, GEORGE

Provider ID: 300091







Board Certified Specialty: No
GEORGE A MUELLER




7910 FROST ST STE 250
SAN DIEGO, CA 92123

D3. Directorio de proveedores especialistas





 Phone: (858) 565-0104
 Fax: (858) 565-0194
 After Hours Phone: (858) 565-0104
Provider Gender: Male
NPI: 1629179684
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish,
Vietnamese
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TH
8:30AM-5:00PM
F 8:30AM-4:00PM
 Website: N/A





SURGERY GENERAL

POLLACK, LARRY
Provider ID: 54346
Board Certified Specialty: Yes
LARRY H POLLACK
 7910 FROST ST STE 250
SAN DIEGO, CA 92123
 Phone: (858) 565-0104
 Fax: (858) 565-0194
 After Hours Phone: (858) 565-0104
Provider Gender: Male
NPI: 1104998400
 Provider English Spoken: Y
 Provider Language(s)
Spoken: German, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP

MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM
 Website: N/A

SURGERY GENERAL

SANDLER, BRYAN
Provider ID: 286383
Board Certified Specialty: No
BRYAN J SANDLER
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1043410186

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL

SANDLER, BRYAN
Provider ID: 286357

Board Certified Specialty: No
BRYAN J SANDLER
 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1043410186
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL

SANTORELLI, JARRETT
Provider ID: 272303
Board Certified Specialty: No
JARRETT E SANTORELLI
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1033529201
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

D3. Directorio de proveedores especialistas

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY GENERAL

VASCULAR

AL-NOURI, OMAR

Provider ID: 275349

Board Certified Specialty: No

OMAR AL-NOURI

 4510 EXECUTIVE DR STE
215

SAN DIEGO, CA 92121


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1770742264

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL


CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY GENERAL

VASCULAR

BARLEBEN, ANDREW


Provider ID: 275372

Board Certified Specialty: No

ANDREW R BARLEBEN

 4510 EXECUTIVE DR STE
215

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497936900

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY HAND

CAGE, DORI


Provider ID: 296731

Board Certified Specialty: No

DORI CAGE

 8008 FROST ST STE 403

SAN DIEGO, CA 92123


 Phone: (858) 715-9200

Fax: (858) 715-9202

 After Hours Phone: (858)
715-9200

Provider Gender: Female

NPI: 1871592253

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, Sharp


Grossmont Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

Email: DCAGE@SDHAND.ORG

SURGERY NEUROLOGICAL

BARBA, DAVID


Provider ID: 244087


Board Certified Specialty: No

DAVID BARBA

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (619) 543-5720

 After Hours Phone: (619)
543-5720

Provider Gender: Male

NPI: 1093730251


 Provider English Spoken: Y

 Provider Language(s)

D3. Directorio de proveedores especialistas






Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY NEUROLOGICAL **BELVERUD, SHAWN**

Provider ID: 202333
Board Certified Specialty: No
SHAWN A BELVERUD
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1073817268
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

 Website: N/A




SURGERY NEUROLOGICAL **BEN-HAIM, SHARONA**

Provider ID: 304129
Board Certified Specialty: No
SHARONA BEN-HAIM
 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1942469663
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hebrew, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

SURGERY NEUROLOGICAL **LEVY, MICHAEL**

Provider ID: 298705
Board Certified Specialty: No
MICHAEL L LEVY
 7910 FROST ST STE 180
SAN DIEGO, CA 92123
 Phone: (858) 966-8574
Fax: (858) 966-7930
 After Hours Phone: (858)

966-8574
Provider Gender: Male
NPI: 1164593927
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
CHILDRENS HOSP OF LOS
ANGELES
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

SURGERY NEUROLOGICAL **MARSHALL, LAWRENCE**

Provider ID: 244150
Board Certified Specialty: No
LAWRENCE F MARSHALL
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1750306171
 Provider English Spoken: Y
 Provider Language(s)
Spoken: German, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F

D3. Directorio de proveedores especialistas

8:00AM-5:00PM
Website: N/A

SURGERY NEUROLOGICAL

OSORIO, JOSEPH

Provider ID: 304170

Board Certified Specialty: No
JOSEPH A OSORIO

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437416591

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY NEUROLOGICAL

OSORIO, JOSEPH

Provider ID: 242007

Board Certified Specialty: No
JOSEPH A OSORIO

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437416591

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY NEUROLOGICAL

PHAM, MARTIN

Provider ID: 244158

Board Certified Specialty: No
MARTIN H PHAM

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1609130921

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY NEUROLOGICAL

SOUMEKH, MASSOUD

Provider ID: 257468

Board Certified Specialty: Yes
MASSOUD HERTZEL

SOUMEKH

8008 FROST ST STE 401
SAN DIEGO, CA 92123

Phone: (858) 560-8544

Fax: (858) 560-8546

After Hours Phone: (858)
560-8544

Provider Gender: Male

NPI: 1265495014

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ALVARADO
HOSP MED CTR, ALVARADO
HOSPITAL LLC, SHARP

MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
9:00AM-4:30PM

Website: N/A

Email: JSOUMEKH@AOL.COM




SURGERY NEUROLOGICAL

TOMLIN, JEFFREY

Provider ID: 272950


Board Certified Specialty: No
JEFFREY M TOMLIN

D3. Directorio de proveedores especialistas


 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
 Phone: (858) 657-8540
 After Hours Phone: (858)
657-8540

Provider Gender: Male

NPI: 1366530321

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY NEUROLOGICAL

U, HOI


Provider ID: 244132

Board Certified Specialty: No
HOI S U

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1164468146

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM



 Website: N/A


SURGERY ORTHOPEDIC

ANDRY, JAMES

Provider ID: 302086

Board Certified Specialty: No
JAMES P ANDRY



 7910 FROST ST STE 340
SAN DIEGO, CA 92123
 Phone: (858) 824-1703

 Fax: (858) 455-6473

 After Hours Phone: (858)
824-1703

Provider Gender: Male

NPI: 1679726103

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS MERCY
HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, Sharp

Grossmont Hospital, SHARP
MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC


BALLARD, BROOKE


Provider ID: 262204

Board Certified Specialty: No
BROOKE L BALLARD

 5555 RESERVOIR DR STE
104

SAN DIEGO, CA 92120

 Phone: (619) 286-9480

 Fax: (619) 286-4568

 After Hours Phone: (619)
286-9480

Provider Gender: Female

NPI: 1841447950

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: ALVARADO

HOSPITAL LLC, SHARP

CORONADO HOSP AND


HEALTHCARE CTR, SHARP


MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC

BUI, CHRISTOPHER


Provider ID: 241162

Board Certified Specialty: No
CHRISTOPHER N BUI

D3. Directorio de proveedores especialistas


 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1619231537

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM



 Website: N/A

SURGERY ORTHOPEDIC

BUKATA, SUSAN


Provider ID: 304181

Board Certified Specialty: No
SUSAN V BUKATA

 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1932140639

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER



 Website: N/A

SURGERY ORTHOPEDIC

BUKATA, SUSAN

Provider ID: 277948

Board Certified Specialty: No
SUSAN V BUKATA

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1932140639

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM



 Website: N/A

SURGERY ORTHOPEDIC

CAMPBELL, TANNER


Provider ID: 301633

Board Certified Specialty: No
TANNER R CAMPBELL

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-6789
Fax: (858) 966-8519

 After Hours Phone: (858)
966-6789

Provider Gender: Male
NPI: 1821593096


 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Website: N/A

SURGERY ORTHOPEDIC

CHENG, YU-TSUN

Provider ID: 301903

Board Certified Specialty: No
YU-TSUN CHENG

 3030 CHILDRENS WAY FL
3
SAN DIEGO, CA 92123
 Phone: (858) 966-6789
Fax: (858) 966-6706

 After Hours Phone: (858)
966-6789

Provider Gender: Male
NPI: 1992982854

 Provider English Spoken: Y
Cultural Competency: N



Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

D3. Directorio de proveedores especialistas

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY ORTHOPEDIC

CHIARAPPA, FRANK

Provider ID: 304174
Board Certified Specialty: No
FRANK E CHIARAPPA
 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1932536828

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

SURGERY ORTHOPEDIC

CHOI, JIHOON

Provider ID: 284788
Board Certified Specialty: No
JIHOON CHOI
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)

926-8273
Provider Gender: Male
NPI: 1285097741
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

SURGERY ORTHOPEDIC







CIDAMBI, EMILY

Provider ID: 246466
Board Certified Specialty: No
EMILY O CIDAMBI
 3030 CHILDRENS WAY FL
3
SAN DIEGO, CA 92123
 Phone: (858) 966-6789
Fax: (858) 966-6706
 After Hours Phone: (858)
966-6789
Provider Gender: Female
NPI: 1659634699
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

 Website: N/A





SURGERY ORTHOPEDIC

CIDAMBI, EMILY

Provider ID: 296446
Board Certified Specialty: No
EMILY O CIDAMBI
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800
Provider Gender: Female
NPI: 1659634699
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

SURGERY ORTHOPEDIC

EDMONDS, ERIC

Provider ID: 205495
Board Certified Specialty: No
ERIC W EDMONDS
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800
Provider Gender: Male
NPI: 1013048412
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF

D3. Directorio de proveedores especialistas

CHILDREN'S HOSPITAL OAKLAND

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): JAMES H FLINT

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

SURGERY ORTHOPEDIC

EDMONDS, ERIC


Provider ID: 260841

Board Certified Specialty: No

ERIC W EDMONDS

 3030 CHILDRENS WAY FL
3

SAN DIEGO, CA 92123

 Phone: (858) 966-6789

Fax: (858) 966-6706

 After Hours Phone: (858)
966-6789

Provider Gender: Male

NPI: 1013048412

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL


OAKLAND

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC

FLINT, JAMES


Provider ID: 203178


Board Certified Specialty: No

JAMES H FLINT

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (858) 657-8200

 After Hours Phone: (858)
657-8200

Provider Gender: Male

NPI: 1629239140

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC

FLINT, JAMES


Provider ID: 304177

Board Certified Specialty: No

JAMES H FLINT

 6655 ALVARADO RD

SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1629239140

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Website: N/A

SURGERY ORTHOPEDIC

GOEB, YANNICK

Provider ID: 284794

Board Certified Specialty: No

YANNICK L GOEB

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1730542747

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F

D3. Directorio de proveedores especialistas

8:00AM-5:00PM
Website: N/A

SURGERY ORTHOPEDIC

JACKSON, MADELEINE

Provider ID: 301818

Board Certified Specialty: No
MADELEINE E JACKSON

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1386140085

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY ORTHOPEDIC

KUSNEZOV, NICHOLAS

Provider ID: 303196

Board Certified Specialty: No
NICHOLAS A KUSNEZOV

7910 FROST ST STE 340
SAN DIEGO, CA 92123

Phone: (858) 824-1703

Fax: (858) 455-6473

After Hours Phone: (858)
824-1703

Provider Gender: Male

NPI: 1396185161

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TWIN

CITIES COMMUNITY

HOSPITAL, TRI CITY MEDICAL

CTR, PARADISE VALLEY

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, Sharp

Grossmont Hospital, Sharp

Grossmont Hospital, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

PRUSS, ERIKA

Provider ID: 303797

Board Certified Specialty: No
ERIKA L PRUSS

3030 CHILDRENS WAY FL
3

SAN DIEGO, CA 92123

Phone: (858) 966-6789

Fax: (858) 966-6706

After Hours Phone: (858)
966-6789

Provider Gender: Female

NPI: 1538402441

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

SULLIVAN, THOMAS

Provider ID: 285247

Board Certified Specialty: No
THOMAS B SULLIVAN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437565488

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

D3. Directorio de proveedores especialistas

SURGERY ORTHOPEDIC

SULLIVAN, THOMAS

Provider ID: 304164

Board Certified Specialty: No
THOMAS B SULLIVAN

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437565488

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

SURGERY ORTHOPEDIC

UPASANI, VIDYADHAR

Provider ID: 205914

Board Certified Specialty: No
VIDYADHAR V UPASANI

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-8800

🕒 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1548417652

🗣 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

SURGERY ORTHOPEDIC

UPASANI, VIDYADHAR

Provider ID: 260953

Board Certified Specialty: No
VIDYADHAR V UPASANI

📍 3030 CHILDRENS WAY FL
3

SAN DIEGO, CA 92123

☎ Phone: (858) 966-6789

Fax: (858) 966-6706

🕒 After Hours Phone: (858)
966-6789

Provider Gender: Male

NPI: 1548417652

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY PEDIATRIC

BICKLER, STEPHEN

Provider ID: 270090

Board Certified Specialty: No
STEPHEN W BICKLER

📍 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

☎ Phone: (858) 966-7711

Fax: (858) 966-7712

🕒 After Hours Phone: (858)
966-7711

Provider Gender: Male

NPI: 1891866653

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY PEDIATRIC

GOSMAN, AMANDA

Provider ID: 205841

Board Certified Specialty: Yes
AMANDA A GOSMAN

📍 7920 FROST ST STE 200
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5999


Fax: (858) 966-4064

🕒 After Hours Phone: (858)
966-5999

Provider Gender: Female

D3. Directorio de proveedores especialistas

NPI: 1164436291

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY PEDIATRIC

KELLER, BENJAMIN


Provider ID: 285941

Board Certified Specialty: No
BENJAMIN A KELLER

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-7711

Fax: (858) 966-7712

 After Hours Phone: (858)
966-7711

Provider Gender: Male

NPI: 1285953364

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY PEDIATRIC

KELLER, BENJAMIN

Provider ID: 272196

Board Certified Specialty: Yes
BENJAMIN A KELLER

 7920 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 966-5999

Fax: (858) 966-4064

 After Hours Phone: (858)
966-5999

Provider Gender: Male

NPI: 1285953364

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY PEDIATRIC


KLING, KAREN

Provider ID: 205340


Board Certified Specialty: No
KAREN M KLING

 8110 BIRMINGHAM WAY FL
2

SAN DIEGO, CA 92123

 Phone: (858) 966-7711

Fax: (858) 966-7712

 After Hours Phone: (858)
966-7711

Provider Gender: Female

NPI: 1982775144

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MARY BIRCH HOSP
FOR WOMEN AND


NEWBORNS, NATIONAL
NAVAL MED CTR, SHARP
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY PEDIATRIC

KLING, KAREN


Provider ID: 283380

Board Certified Specialty: No
KAREN M KLING

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 966-7711

Fax: (858) 966-7712

 After Hours Phone: (858)
966-7711

Provider Gender: Female

NPI: 1982775144


 Provider English Spoken: Y


D3. Directorio de proveedores especialistas

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND

NEWBORNS, NATIONAL NAVAL MED CTR, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8:00AM-5:00PM*


 *Website: N/A*

SURGERY PEDIATRIC

LAZAR, DAVID

Provider ID: 205606
Board Certified Specialty: No
DAVID A LAZAR

 8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123

 *Phone: (858) 966-7711*

Fax: (858) 966-7712

 *After Hours Phone: (858) 966-7711*

Provider Gender: Male

NPI: 1538365002

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*


 *Website: N/A*

SURGERY PEDIATRIC

LAZAR, DAVID

Provider ID: 283140
Board Certified Specialty: No
DAVID A LAZAR

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 *Phone: (858) 966-7711*

Fax: (858) 966-7712

 *After Hours Phone: (858) 966-7711*

Provider Gender: Male

NPI: 1538365002


 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*


SURGERY PEDIATRIC

THANGARAJAH, HARIHARAN


Provider ID: 206172
Board Certified Specialty: No
HARIHARAN THANGARAJAH

 8110 BIRMINGHAM WAY FL 2

SAN DIEGO, CA 92123

 *Phone: (858) 966-7711*

Fax: (858) 966-7712

 *After Hours Phone: (858) 966-7711*

Provider Gender: Male

NPI: 1598979593


 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*


 *Website: N/A*


SURGERY PEDIATRIC

THANGARAJAH, HARIHARAN

Provider ID: 256194
Board Certified Specialty: No
HARIHARAN THANGARAJAH

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 *Phone: (858) 966-7711*

 *After Hours Phone: (858) 966-7711*

Provider Gender: Male


NPI: 1598979593

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

D3. Directorio de proveedores especialistas

American Sign Language (ASL):  7920 FROST ST STE 200
N
SAN DIEGO, CA 92123

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY PLASTIC


HINCHCLIFF, KATHARINE

Provider ID: 277288

Board Certified Specialty: Yes

KATHARINE M HINCHCLIFF

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346674561

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY PLASTIC

HINCHCLIFF, KATHARINE

Provider ID: 277965

Board Certified Specialty: No

KATHARINE M HINCHCLIFF

 Phone: (858) 966-5999
Fax: (858) 966-8394

 After Hours Phone: (858)
966-5999

Provider Gender: Female

NPI: 1346674561

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY PLASTIC



KOLB, FREDERIC

Provider ID: 246240

Board Certified Specialty: No



FREDERIC J KOLB

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790341832

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL


CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY PLASTIC


KOLB, FREDERIC

Provider ID: 255575

Board Certified Specialty: No

FREDERIC J KOLB

 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790341832

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA


JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL


CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

SURGERY PLASTIC

KOLB, FREDERIC

Provider ID: 255576

Board Certified Specialty: No

FREDERIC J KOLB

7920 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 966-5999

Fax: (858) 966-8394

After Hours Phone: (858)
966-5999

Provider Gender: Female

NPI: 1790341832

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PLASTIC

KOLB, FREDERIC

Provider ID: 246239

Board Certified Specialty: No

FREDERIC J KOLB

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790341832

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PLASTIC

LEWIS, PRIYA

Provider ID: 302132

Board Certified Specialty: No

PRIYA G LEWIS

7920 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 966-5999

Fax: (858) 966-8394

After Hours Phone: (858)
966-5999

Provider Gender: Female

NPI: 1720465024

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PLASTIC

REID, CHRISTOPHER

Provider ID: 245523

Board Certified Specialty: No

CHRISTOPHER M REID

7920 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 966-5999

Fax: (858) 966-8394

After Hours Phone: (858)
966-5999

Provider Gender: Male

NPI: 1982964276

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY PLASTIC

REID, CHRISTOPHER

Provider ID: 255564

Board Certified Specialty: No

CHRISTOPHER M REID

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

D3. Directorio de proveedores especialistas

Provider Gender: Male

NPI: 1982964276

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY PLASTIC


REID, CHRISTOPHER

Provider ID: 224795

Board Certified Specialty: No
CHRISTOPHER M REID

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982964276

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


SURGERY THORACIC


FOX, KENNETH

Provider ID: 257841

Board Certified Specialty: No
KENNETH A FOX

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8030

 After Hours Phone: (858)
966-8030

Provider Gender: Male

NPI: 1235153552

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY THORACIC


GANTA, SRUJAN

Provider ID: 275611

Board Certified Specialty: No
SRUJAN GANTA

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8030

 After Hours Phone: (858)
966-8030

Provider Gender: Male

NPI: 1265071005

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY THORACIC


GANTA, SRUJAN

Provider ID: 256383

Board Certified Specialty: No
SRUJAN GANTA

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8030

 After Hours Phone: (858)
966-8030

Provider Gender: Male

NPI: 1265071005

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

SURGERY THORACIC

LEWIS, MICHAEL

Provider ID: 296906

Board Certified Specialty: Yes

MICHAEL J LEWIS

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8030

Fax: (858) 966-8032

After Hours Phone: (858)
966-8030

Provider Gender: Male

NPI: 1780847533

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY THORACIC

NIGRO, JOHN

Provider ID: 205367

Board Certified Specialty: Yes

JOHN J NIGRO

3030 CHILDRENS WAY STE
202
SAN DIEGO, CA 92123

Phone: (858) 966-8030

Fax: (858) 966-8032

After Hours Phone: (858)
966-8030

Provider Gender: Male

NPI: 1881707818

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY THORACIC

VOSSLER, JOHN

Provider ID: 306389

Board Certified Specialty: No

JOHN D VOSSLER

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1659630572

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

TRANSPLANT SURGERY

MEKEEL, KRISTIN

Provider ID: 262109

Board Certified Specialty: Yes

KRISTIN L MEKEEL

3020 CHILDRENS WAY STE
107

SAN DIEGO, CA 92123

Phone: (858) 966-7711

After Hours Phone: (858)
966-7711

Provider Gender: Female

NPI: 1104861947

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

TRANSPLANT SURGERY

SCHNICKEL, GABRIEL

Provider ID: 262192

Board Certified Specialty: No

GABRIEL T SCHNICKEL

8001 FROST ST
SAN DIEGO, CA 92123

Phone: (858) 966-8354

Fax: (858) 966-5815

After Hours Phone: (858)
966-8354

D3. Directorio de proveedores especialistas

Provider Gender: Male

NPI: 1619111440

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
RADY CHILDRENS HOSPITAL


SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


UROLOGY

CHEN, TONY

Provider ID: 283960

Board Certified Specialty: No
TONY T CHEN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1245684497

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR, PALOMAR MEDICAL
CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


UROLOGY

KATZ, JONATHAN

Provider ID: 299918

Board Certified Specialty: No
JONATHAN E KATZ

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952756207

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


UROLOGY

MONGA, MANOJ

Provider ID: 274480

Board Certified Specialty: No
MANOJ MONGA


 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174609127

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


UROLOGY

MONGA, MANOJ

Provider ID: 256847

Board Certified Specialty: No
MANOJ MONGA

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174609127

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON



Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D3. Directorio de proveedores especialistas


 Hours: M-F
8:00AM-5:00PM
 Website: N/A


UROLOGY

PATEL, DEVIN

Provider ID: 246094
Board Certified Specialty: No
DEVIN N PATEL

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (858) 657-7876

 After Hours Phone: (858)
657-7876

Provider Gender: Male

NPI: 1437505559

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,


CEDARS SINAI MEDICAL
CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

UROLOGY

SWORDS, KELLY

Provider ID: 206183
Board Certified Specialty: No
KELLY SWORDS

 7920 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 966-7484
Fax: (858) 966-4064

 After Hours Phone: (858)
966-7484

Provider Gender: Female

NPI: 1316101256

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF


CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

UROLOGY

UNTERBERG, STEPHEN

Provider ID: 295833
Board Certified Specialty: Yes
STEPHEN H UNTERBERG

 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

 Phone: (619) 297-4707
Fax: (858) 429-7927

 After Hours Phone: (619)
297-4707

Provider Gender: Male

NPI: 1215374210

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL


CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM


 Website: N/A

UROLOGY

UNTERBERG, STEPHEN

Provider ID: 284664
Board Certified Specialty: Yes
STEPHEN H UNTERBERG


 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

 Phone: (619) 297-4707
Fax: (858) 429-7927

 After Hours Phone: (619)
297-4707

Provider Gender: Male


NPI: 1215374210


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL
CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 16\110

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

UROLOGY

UNTERBERG, STEPHEN

Provider ID: 284665

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
STEPHEN H UNTERBERG

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Phone: (858) 485-0554

Fax: (858) 429-7933

After Hours Phone: (858)
485-0554

Provider Gender: Male

NPI: 1215374210

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 16\110

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

UROLOGY

UNTERBERG, STEPHEN

Provider ID: 295834

Board Certified Specialty: No
STEPHEN H UNTERBERG

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Phone: (858) 485-0554

Fax: (858) 429-7933

After Hours Phone: (858)
485-0554

Provider Gender: Male

NPI: 1215374210

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

UROLOGY

WANG, LUKE

Provider ID: 299933

Board Certified Specialty: No
LUKE L WANG

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033630173

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

LERNER, JONATHAN

Provider ID: 303448

Board Certified Specialty: No
JONATHAN H LERNER

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Phone: (760) 798-8855

Fax: (619) 616-2104

After Hours Phone: (760)
798-8855

Provider Gender: Male

NPI: 1962899823

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

CARRA, BARBARA

Provider ID: 308116

Board Certified Specialty: No
BARBARA CARRA

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1588173629

Provider English Spoken: Y








SAN MARCOS

CARDIOVASCULAR DISEASE




D3. Directorio de proveedores especialistas






 *Provider Language(s)*
Spoken: French, Italian, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

CERTIFIED ACUPUNCTURIST **CARRA, BARBARA**





Provider ID: 303128
Board Certified Specialty: No
BARBARA CARRA
 1595 GRAND AVE STE 100
SAN MARCOS, CA 92078
 *Phone: (760) 736-6767*
Fax: (760) 736-8740
 *After Hours Phone: (760) 736-6767*
Provider Gender: Female
NPI: 1588173629
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: French, Italian, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*





CERTIFIED ACUPUNCTURIST **GONZALEZ, ANDRES**

Provider ID: 298658
Board Certified Specialty: No
ANDRES D GONZALEZ
 1595 GRAND AVE STE 100
SAN MARCOS, CA 92078
 *Phone: (760) 736-6767*
Fax: (760) 736-6744
 *After Hours Phone: (760) 736-6767*
Provider Gender: Male
NPI: 1841857729









 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Chinese, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

CERTIFIED NURSE **PRACTITIONER**

BLAND, JACELIS
Provider ID: 296766
Board Certified Specialty: No
JACELIS BLAND
 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
Fax: (760) 736-6744
 *After Hours Phone: (760) 736-6767*
Provider Gender: Female
NPI: 1801522859
 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM SA 8:00AM-4:30PM*
 *Website: N/A*

CERTIFIED NURSE **PRACTITIONER**

CABRAL, ALEJANDRA
Provider ID: 297888
Board Certified Specialty: No
ALEJANDRA J CABRAL
 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
Fax: (760) 736-6744
 *After Hours Phone: (760) 736-6767*
Provider Gender: Female
NPI: 1699222620
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

D3. Directorio de proveedores especialistas

CERTIFIED NURSE

PRACTITIONER

FODDA, RAMI

Provider ID: 296603

Board Certified Specialty: No

RAMI M FODDA

📍 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

📞 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1164660452

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-6:00PM

SA 8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

FREEMAN, WANDA

Provider ID: 305751

Board Certified Specialty: No

WANDA FREEMAN

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

📞 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1659504264

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

SA 8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

GARCIA, REGINA

Provider ID: 297837

Board Certified Specialty: No

REGINA J GARCIA

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

📞 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1639673858

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HAN, ANGELA

Provider ID: 300215

Board Certified Specialty: No

ANGELA D HAN

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

📞 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1629242839

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Korean

Cultural Competency: N

Hospital Affiliation: JOHN

MUIR MEDICAL CENTER

WALNUT CREEK CAMPUS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

KOHOUT, KATHRYN

Provider ID: 291105

Board Certified Specialty: No

KATHRYN KOHOUT

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

📞 After Hours Phone: (760)
736-6767

Provider Gender: Female

D3. Directorio de proveedores especialistas


NPI: 1316544331


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MOONEY, PATRICIA

Provider ID: 280382

Board Certified Specialty: No
PATRICIA J MOONEY

 838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

 Phone: (760) 747-8935

Fax: (760) 466-0078

 After Hours Phone: (760)
747-8935

Provider Gender: Female


NPI: 1700470200


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

NGUYEN, VANESSA

Provider ID: 306716

Board Certified Specialty: No
VANESSA T NGUYEN

 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

 Phone: (760) 281-3662

Fax: (760) 316-5268

 After Hours Phone: (760)
281-3662

Provider Gender: Female

NPI: 1376219246


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

PARSONS, MEKRAE

Provider ID: 303220

Board Certified Specialty: No
MEKRAE L PARSONS

 150 VALPREDA RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1972090306


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

VAHDAT, VALERIE


Provider ID: 294758

Board Certified Specialty: No
VALERIE K VAHDAT

 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069

 Phone: (833) 867-4642

Fax: (360) 462-5827

 After Hours Phone: (833)
867-4642

Provider Gender: Female


NPI: 1093474090


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


YCASAS, EMILY


Provider ID: 307853

Board Certified Specialty: No
EMILY JO YCASAS

 150 VALPREDA RD
SAN MARCOS, CA 92069

D3. Directorio de proveedores especialistas


 Phone: (760) 736-6767

 Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1033841861


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE MIDWIFE


BELANGER, TANYA

Provider ID: 290739

Board Certified Specialty: No
TANYA M BELANGER

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1407287469

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Website: N/A


CHIROPRACTOR


HINES, TAYTE


Provider ID: 302080

Board Certified Specialty: No
TAYTE C HINES

 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069

 Phone: (833) 867-4642

 Fax: (360) 462-5827

 After Hours Phone: (833)
867-4642

Provider Gender: Male

NPI: 1598265647


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CHIROPRACTOR


HINES, TAYTE

Provider ID: 302081

Board Certified Specialty: No
TAYTE C HINES

 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069


 Phone: (833) 867-4642

 Fax: (360) 462-5827

 After Hours Phone: (833)
867-4642

Provider Gender: Male

NPI: 1598265647

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CHIROPRACTOR


JIMENEZ, CLARIBEL

Provider ID: 307941

Board Certified Specialty: No
CLARIBEL JIMENEZ

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1801255484

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

NGUYEN, MINH

Provider ID: 308467

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

MINH Q NGUYEN

1595 GRAND AVE STE 100
SAN MARCOS, CA 92078
Phone: (760) 736-6767
After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1154403640

Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

TOLENTINO, ARTURO

Provider ID: 298696

Board Certified Specialty: No
ARTURO M TOLENTINO

2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069

Phone: (833) 867-4642

Fax: (360) 462-5827

After Hours Phone: (833)
867-4642

Provider Gender: Male

NPI: 1609066018

Provider English Spoken: Y
Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: PALOMAR

HEALTH, PALOMAR MEDICAL
CENTER, LAKEWOOD
REGIONAL MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\17

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERVENTIONAL

CARDIOLOGY

DO, HULBERT

Provider ID: 291583

Board Certified Specialty: No
HULBERT N DO

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1679733760

Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-8:00PM

SA 8:00AM-8:00PM

Website: N/A

INTERVENTIONAL

CARDIOLOGY

DO, HULBERT

Provider ID: 295941

Board Certified Specialty: No
HULBERT N DO

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Phone: (760) 798-8855

Fax: (619) 616-2104

After Hours Phone: (760)
798-8855

Provider Gender: Male

NPI: 1679733760

Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

INTERVENTIONAL

CARDIOLOGY









MOHAMEDALI, BURHAN

Provider ID: 245578

Board Certified Specialty: No
BURHAN MOHAMEDALI

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

D3. Directorio de proveedores especialistas




 Phone: (760) 798-8855
 Fax: (760) 755-5245
 After Hours Phone: (760) 798-8855
Provider Gender: Male
NPI: 1831393289
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Swahili
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, Adventist Health and Rideout
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM
 Website: N/A

INTERVENTIONAL

CARDIOLOGY

SUDHAKAR, DEEPTHI








Provider ID: 296052
Board Certified Specialty: No DEEPTHI SUDHAKAR
 955 BOARDWALK STE 100 SAN MARCOS, CA 92078
 Phone: (760) 798-8855
Fax: (619) 616-2104
 After Hours Phone: (760) 798-8855
Provider Gender: Female
NPI: 1811307051
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 15\99
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

INTERVENTIONAL

CARDIOLOGY






SUDHAKAR, DEEPTHI

Provider ID: 291607
Board Certified Specialty: No DEEPTHI SUDHAKAR
 150 VALPRED A RD SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1811307051
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 15\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

INTERVENTIONAL



CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 295847
Board Certified Specialty: No DEEPTHI SUDHAKAR
 955 BOARDWALK STE 100 SAN MARCOS, CA 92078
 Phone: (760) 798-8855
Fax: (619) 616-2104
 After Hours Phone: (760) 798-8855
Provider Gender: Female
NPI: 1811307051
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 15\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEUROLOGY

ANDER, AZIZ

Provider ID: 290382
Board Certified Specialty: No AZIZ N ANDER
 838 NORDAHL RD STE 310 SAN MARCOS, CA 92069
 Phone: (442) 999-5977
Fax: (442) 999-5914
 After Hours Phone: (442) 999-5977
Provider Gender: Male
NPI: 1316131832
 Provider English Spoken: Y
 Provider Language(s)


D3. Directorio de proveedores especialistas

Spoken: Faroese, Pashto, Persian, Urdu
Cultural Competency: N
Hospital Affiliation: DESERT REGIONAL MED CTR, JOHN F KENNEDY MEMORIAL HOSP, PALOMAR HEALTH, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-4:30PM

 Website: N/A


NEUROLOGY

GUPTA, MONIKA

Provider ID: 307938

Board Certified Specialty: No
MONIKA A GUPTA

 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069


 Phone: (760) 281-3662


Fax: (760) 316-5268

 After Hours Phone: (760)
281-3662

Provider Gender: Female

NPI: 1922243401

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC, UCSD

LA JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY

HOSSEINZADEHMALEKI, ANA

Provider ID: 304998

Board Certified Specialty: No
ANA HOSSEINZADEHMALEKI

 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069


 Phone: (760) 281-3662

Fax: (760) 316-5268

 After Hours Phone: (760)
281-3662

Provider Gender: Female

NPI: 1316471485

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Persian

Cultural Competency: N


Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


MAREK, MAKSYM

Provider ID: 306708


Board Certified Specialty: No

MAKSYM S MAREK

 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

 Phone: (760) 281-3662


Fax: (619) 425-3842

 After Hours Phone: (760)
281-3662

Provider Gender: Male

NPI: 1881182079

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish,
Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA


VISTA, SCRIPPS MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-6:00PM

SA 9:00AM-0:30PM

 Website: N/A


NEUROLOGY

SORIA LOPEZ, JOSE


Provider ID: 295745

Board Certified Specialty: No
JOSE A SORIA LOPEZ

 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

 Phone: (760) 281-3662

Fax: (760) 316-5268

 After Hours Phone: (760)
281-3662

Provider Gender: Male

NPI: 1225474034


D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, TEMECULA
VALLEY HOSPITAL INC*
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-6:00PM*
 *Website: N/A*

OBSTETRICS / GYNECOLOGY



CABRERA, MICHELLE





Provider ID: 303025
Board Certified Specialty: No
MICHELLE M CABRERA
 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
Fax: (760) 736-6744
 *After Hours Phone: (760)
736-6767*
Provider Gender: Female
NPI: 1174774723
 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: French, Spanish*
Cultural Competency: N
*Hospital Affiliation: Adventist
Health and Rideout*
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None

*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

OBSTETRICS / GYNECOLOGY


HINSHAW, PAUL







Provider ID: 288907
Board Certified Specialty: No
PAUL W HINSHAW
 120 CRAVEN RD STE 101
SAN MARCOS, CA 92078
 *Phone: (760) 740-2710*
Fax: (858) 207-0003
 *After Hours Phone: (760)
740-2710*
Provider Gender: Male
NPI: 1215170717

 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: PALOMAR
MEDICAL CENTER*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

PEDIATRICS





LUMHO, RACHEL

Provider ID: 303150
Board Certified Specialty: No
RACHEL L LUMHO
 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*
Fax: (760) 736-6744
 *After Hours Phone: (760)
736-6767*
Provider Gender: Female
NPI: 1215469283
 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: PALOMAR
MEDICAL CENTER*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM*
 *Website: N/A*

PEDIATRICS


LUMHO, RACHEL

Provider ID: 304047
Board Certified Specialty: No
RACHEL L LUMHO
 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
Fax: (760) 736-6744
 *After Hours Phone: (760)
736-6767*
Provider Gender: Female
NPI: 1215469283
 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: PALOMAR
MEDICAL CENTER*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM*

 *Website: N/A*


PEDIATRICS

POSADAS, EMERITO

Provider ID: 257536

*Board Certified Specialty: No
EMERITO D POSADAS*

 150 VALPRED A RD
SAN MARCOS, CA 92069


 *Phone: (760) 736-6767*


Fax: (760) 566-1501

 *After Hours Phone: (760)
736-6767*

Provider Gender: Male

NPI: 1720093198

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish, Tagalog*

Cultural Competency: N

*Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER*


Medi-Cal Open Panel: Yes


Min/Max Age: 0\18

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-6:00PM*

 *Website: N/A*

PEDIATRICS


QUINTERO, CAROLYN

Provider ID: 303142

Board Certified Specialty: No

CAROLYN S QUINTERO

 150 VALPRED A RD
SAN MARCOS, CA 92069


 *Phone: (760) 736-6767*

Fax: (760) 736-6744

 *After Hours Phone: (760)
736-6767*

Provider Gender: Female

NPI: 1023033156

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Afar, Spanish*

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-6:00PM
SA 8:00AM-5:00PM*

 *Website: N/A*

PHYSICIANS ASSISTANT


CELESTINO, MISH EL

Provider ID: 302439

Board Certified Specialty: No

MISH EL N CELESTINO

 150 VALPRED A RD
SAN MARCOS, CA 92069


 *Phone: (760) 736-6767*


Fax: (760) 736-6744

 *After Hours Phone: (760)
736-6767*

Provider Gender: Female

NPI: 1578263760

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


PHYSICIANS ASSISTANT

HERNANDEZ, MIRIAM

Provider ID: 298336

*Board Certified Specialty: No
MIRIAM HERNANDEZ*

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

Fax: (760) 736-6744

 *After Hours Phone: (760)
736-6767*

Provider Gender: Female

NPI: 1457903700

 *Provider English Spoken: Y
Cultural Competency: N*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


PHYSICIANS ASSISTANT

POLLEY, SHANNON

Provider ID: 296093

*Board Certified Specialty: No
SHANNON POLLEY*

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

Fax: (760) 736-6744

 *After Hours Phone: (760)*

D3. Directorio de proveedores especialistas

736-6767
Provider Gender: Female
NPI: 1225608722
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

RUBIO, HALEY

Provider ID: 301290
Board Certified Specialty: No
HALEY M RUBIO
📍 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
☎ Phone: (760) 736-6767
Fax: (760) 736-6744
🕒 After Hours Phone: (760)
736-6767
Provider Gender: Female
NPI: 1598394371
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 2\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PSYCHOLOGIST

ALTAMIRANO, LEON
Provider ID: 290362
Board Certified Specialty: No
LEON ALTAMIRANO
📍 150 VALPRED A RD
SAN MARCOS, CA 92069
☎ Phone: (760) 736-6767
Fax: (760) 736-6744
🕒 After Hours Phone: (760)
736-6767
Provider Gender: Male
NPI: 1619271517
☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

PSYCHOLOGIST

ARIELLA, LYNDA
Provider ID: 299716
Board Certified Specialty: No
LYNDA R ARIELLA
📍 150 VALPRED A RD
SAN MARCOS, CA 92069
☎ Phone: (760) 736-6767
Fax: (760) 736-6744
🕒 After Hours Phone: (760)
736-6767
Provider Gender: Female
NPI: 1073518965
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 5\50
American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PSYCHOLOGIST

FLYNN, DANIELLE

Provider ID: 290795
Board Certified Specialty: No
DANIELLE I FLYNN
📍 150 VALPRED A RD
SAN MARCOS, CA 92069
☎ Phone: (760) 736-6767
Fax: (760) 736-6744
🕒 After Hours Phone: (760)
736-6767
Provider Gender: Female
NPI: 1477785137
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

PSYCHOLOGIST

GEORGIEV, MARY-JO

Provider ID: 290793
Board Certified Specialty: No
MARY-JO GEORGIEV
📍 150 VALPRED A RD
SAN MARCOS, CA 92069
☎ Phone: (760) 736-6767
Fax: (760) 736-6744
🕒 After Hours Phone: (760)
736-6767
Provider Gender: Female

D3. Directorio de proveedores especialistas


NPI: 1518996875

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST

IMAM, SYED

Provider ID: 298174

Board Certified Specialty: No
SYED IMAM

 150 VALPRED A RD
SAN MARCOS, CA 92069


 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1447428271

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Hindi, Urdu


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 15\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST


SIMPSON, ERIC

Provider ID: 290803

Board Certified Specialty: No

ERIC SIMPSON

 150 VALPRED A RD
SAN MARCOS, CA 92069


 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1710110416

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST

TORRES, HECTOR

Provider ID: 290788

Board Certified Specialty: No
HECTOR M TORRES

 150 VALPRED A RD
SAN MARCOS, CA 92069


 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1720265614

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


RHEUMATOLOGY

AL NAHLAWI, BASMA

Provider ID: 290068

Board Certified Specialty: No
BASMA AL NAHLAWI

 334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078


 Phone: (760) 736-8091

Fax: (760) 736-8092

 After Hours Phone: (760)
736-8091

Provider Gender: Female

NPI: 1144455262

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: LOMA

LINDA UNIVERSITY MED CTR

MURRIETA, PALOMAR


MEDICAL CENTER, LOMA


LINDA UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RHEUMATOLOGY

AL NAHLAWI, BASMA

Provider ID: 295532

Board Certified Specialty: No
BASMA AL NAHLAWI

 960 W SAN MARCOS BLVD
STE 210

D3. Directorio de proveedores especialistas

SAN MARCOS, CA 92078
☎ Phone: (760) 736-8091
Fax: (760) 736-8092
🕒 After Hours Phone: (760) 736-8091
Provider Gender: Female
NPI: 1144455262
🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: LOMA LINDA UNIVERSITY MED CTR MURRIETA, PALOMAR MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 9:00AM-5:00PM
🌐 Website: N/A

SAN YSIDRO

CERTIFIED NURSE

PRACTITIONER

KANTAS, PARIS

Provider ID: 306684
Board Certified Specialty: No
PARIS KANTAS
📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100
Fax: (619) 205-6341
🕒 After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1114329612

🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 2\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

ROSCOE, SYDNEY

Provider ID: 306249
Board Certified Specialty: No
SYDNEY R ROSCOE
📍 4050 BEYER BLVD
SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100
Fax: (619) 205-5305
🕒 After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1992448864
🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL
Provider ID: 294925
Board Certified Specialty: No
MIGUEL ALVAREZ-ESTRADA
📍 4050 BEYER BLVD
SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100
Fax: (619) 205-6305
🕒 After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1588197826
🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A


FAMILY PRACTICE

ARRIETA, NOEMI

Provider ID: 297794
Board Certified Specialty: No
NOEMI J ARRIETA
📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100
Fax: (619) 205-6341
🕒 After Hours Phone: (619) 662-4100
Provider Gender: Female

D3. Directorio de proveedores especialistas

NPI: 1912223496

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

FAMILY PRACTICE


DALUGDUGAN, ESTHER

Provider ID: 302285

Board Certified Specialty: No

ESTHER D DALUGDUGAN

 4004 BEYER BLVD
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1962662718

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP


CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A

FAMILY PRACTICE


MALEKMADANI, ARIENNE

Provider ID: 303333


Board Certified Specialty: No

ARIENNE G MALEKMADANI

 4004 BEYER BLVD
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100


Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1124648332

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Persian, Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A

FAMILY PRACTICE


NAVARRO, VANESSA MARIA

Provider ID: 297756


Board Certified Specialty: No

VANESSA MARIA M NAVARRO

 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


Fax: (619) 785-3384

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1952563421

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Filipino, Spanish,
Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA


MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM

 Website: N/A

FAMILY PRACTICE


ORTEGA, LUIS

Provider ID: 295225

Board Certified Specialty: No

LUIS M ORTEGA

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1558924936

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

D3. Directorio de proveedores especialistas

Min/Max Age: 0\None

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A


FAMILY PRACTICE

ORTIZ ILIZALITURRI, ANA

Provider ID: 296008

Board Certified Specialty: No
ANA K ORTIZ ILIZALITURRI

 4050 BEYER BLVD
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1316407026

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,


SCRIPPS MERCY HOSPITAL


CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


FAMILY PRACTICE

QURESHI, SOFIA

Provider ID: 308756

Board Certified Specialty: No
SOFIA H QURESHI

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1902197544


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


FAMILY PRACTICE GERIATRIC MEDICINE

BULOW, KWI

Provider ID: 302346

Board Certified Specialty: No
KWI Y BULOW

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1073608576

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:00PM


 Website: N/A


GENERAL PRACTICE

GARCIA SANDOVAL, DAMARIS

Provider ID: 302644

Board Certified Specialty: No
DAMARIS GARCIA SANDOVAL

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 662-4198

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1447838883

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

GENERAL PRACTICE

SAMI, REMAN

Provider ID: 305484

Board Certified Specialty: No
REMAN A SAMI

 4004 BEYER BLVD

D3. Directorio de proveedores especialistas

SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100
☎ Fax: (619) 205-6305
🕒 After Hours Phone: (619) 662-4100

Provider Gender: Female
NPI: 1295362242

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

INFECTIOUS DISEASE

ALDOUS, JEANNETTE

Provider ID: 290421
Board Certified Specialty: No
JEANNETTE L ALDOUS

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100
☎ Fax: (619) 205-6305
🕒 After Hours Phone: (619) 662-4100

Provider Gender: Female
NPI: 1073650339

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): Board Certified Specialty: No
DINH, MY T

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

INFECTIOUS DISEASE

RAMIREZ SANCHEZ, CLAUDIA

Provider ID: 296122
Board Certified Specialty: Yes
CLAUDIA CAROLINA RAMIREZ
SANCHEZ

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100
☎ Fax: (619) 205-6305

🕒 After Hours Phone: (619) 662-4100

Provider Gender: Female
NPI: 1659720555

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

DINH, MY

Provider ID: 290490

📍 4050 BEYER BLVD
SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100
☎ Fax: (619) 205-6305

🕒 After Hours Phone: (619) 662-4100

Provider Gender: Female
NPI: 1316146996

☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
9:00AM-5:00PM

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA

Provider ID: 294885
Board Certified Specialty: No
DANIELA GOMEZ

📍 4004 BEYER BLVD STE 400
SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100
☎ Fax: (619) 205-6305

🕒 After Hours Phone: (619) 662-4100

Provider Gender: Female
NPI: 1255878997

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM*

 *Website: N/A*


OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA

Provider ID: 294886

*Board Certified Specialty: No
DANIELA GOMEZ*


 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*
Fax: (619) 205-1967

 *After Hours Phone: (619)
662-4100*

Provider Gender: Female

NPI: 1255878997

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM*

 *Website: N/A*

PEDIATRICS


FUJII, CINDY

Provider ID: 298309

*Board Certified Specialty: No
CINDY M FUJII*

 4050 BEYER BLVD


SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*
Fax: (619) 205-6305

 *After Hours Phone: (619)
662-4100*

Provider Gender: Female

NPI: 1871664821

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM*

SA 8:00AM-2:30PM

 *Website: N/A*


PEDIATRICS

RODRIGUEZ, ALDO

Provider ID: 295779

*Board Certified Specialty: No
ALDO E RODRIGUEZ*


 4050 BEYER BLVD
SAN YSIDRO, CA 92173


 *Phone: (619) 662-4100*
Fax: (619) 205-6305

 *After Hours Phone: (619)
662-4100*

Provider Gender: Male

NPI: 1508209651

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Portuguese,
Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: SU 10:00AM-4:00PM
M 8:30AM-8:00PM*

*W-F 8:30AM-5:30PM
SA 8:00AM-2:30PM*


 *Website: N/A*


PEDIATRICS

TAYLOR, TASHA

Provider ID: 290077

*Board Certified Specialty: No
TASHA K TAYLOR*

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*
Fax: (619) 205-6305

 *After Hours Phone: (619)
662-4100*

Provider Gender: Female

NPI: 1528144433

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

*Hospital Affiliation: TRI CITY
MEDICAL CTR*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

PSYCHOLOGIST

IBANEZ, BERENICE

Provider ID: 290465

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
BERENICE B IBANEZ

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1740394386

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

REGISTERED PHYSICAL

THERAPIST

SHAUF, JOANN

Provider ID: 296045

Board Certified Specialty: No

JOANN SHAUF

3364 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1134732522

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RHEUMATOLOGY

LWIN, THUTHIRI

Provider ID: 307650

Board Certified Specialty: No
THUTHIRI T LWIN

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1174010896

Provider English Spoken: Y

Provider Language(s)
Spoken: Burmese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SPEECH PATHOLOGIST

HILL, CARLA

Provider ID: 295894

Board Certified Specialty: No
CARLA J HILL

3364 BEYER BLVD STE
102-103
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 600-4870

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1043950751

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

SANTEE

PHYSICIANS ASSISTANT

ROSENBLATT, SHERILYN

Provider ID: 295738

Board Certified Specialty: No
SHERILYN ROSENBLATT

120 TOWN CENTER PKWY
SANTEE, CA 92071

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1114041621

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-4:00PM

D3. Directorio de proveedores especialistas

M-F 8:30AM-5:30PM

SA 10:00AM-2:30PM

 Website: N/A

TEMECULA

CERTIFIED ACUPUNCTURIST


CRAFT, KEVIN

Provider ID: 290944

Board Certified Specialty: No

KEVIN E CRAFT

 41840 ENTERPRISE CIR N
TEMECULA, CA 92590


 Phone: (951) 225-6400

Fax: (360) 462-2751

 After Hours Phone: (951)
225-6400

Provider Gender: Male

NPI: 1659745610

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: TU-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


MIRACLE, ANGELYN

Provider ID: 300260

Board Certified Specialty: No

ANGELYN M MIRACLE

 31170 TEMECULA PKWY
STE 200
TEMECULA, CA 92592

 Phone: (951) 699-3299

Fax: (951) 302-1313

 After Hours Phone: (951)
699-3299

Provider Gender: Female

NPI: 1144539842


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


VAHDAT, VALERIE

Provider ID: 306580

Board Certified Specialty: No

VALERIE K VAHDAT

 41840 ENTERPRISE CIR N
TEMECULA, CA 92590

 Phone: (951) 225-6400

Fax: (360) 462-2751

 After Hours Phone: (951)
225-6400

Provider Gender: Female

NPI: 1093474090


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

ANWAR, YASMIN


Provider ID: 300846

Board Certified Specialty: No

YASMIN ANWAR

 31515 RANCHO PUEBLO RD
STE 102

TEMECULA, CA 92592

 Phone: (951) 225-7873


Fax: (951) 305-9117

 After Hours Phone: (951)
225-7873

Provider Gender: Female

NPI: 1588602247

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Persian, Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST


WOODWORTH, JENNIFER

Provider ID: 290633

Board Certified Specialty: No

JENNIFER WOODWORTH

 41840 ENTERPRISE CIR N
TEMECULA, CA 92590

 Phone: (951) 225-6400

Fax: (360) 462-2751

 After Hours Phone: (951)
225-6400

Provider Gender: Female

D3. Directorio de proveedores especialistas


NPI: 1639362494


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL


VASCULAR


HOWE, STEVEN

Provider ID: 206759

Board Certified Specialty: No
STEVEN C HOWE

 31700 TEMECULA VALLEY
PARKWAY
TEMECULA, CA 92592

 Phone: (951) 303-2349
Fax: (951) 303-8591

 After Hours Phone: (951)
303-2349

Provider Gender: Male

NPI: 1497702740


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, TRI
CITY MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

VISTA


ANESTHESIOLOGY PAIN MANAGEMENT

GUPTA, ANUJ

Provider ID: 297703

Board Certified Specialty: No
ANUJ GUPTA



 2023 W VISTA WAY STE D
VISTA, CA 92083

 Phone: (619) 330-8771
Fax: (619) 330-8772

 After Hours Phone: (619)
330-8771

Provider Gender: Male

NPI: 1073629549

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: POMONA
VALLEY HOSP MED CTR,
PARADISE VALLEY HOSPITAL,
TRI CITY MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

Email:
CARAMEDBILL@AOL.COM


CARDIOVASCULAR DISEASE

ABELHAD, NADIA

Provider ID: 306896

Board Certified Specialty: No
NADIA I ABELHAD

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619400801

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


CARDIOVASCULAR DISEASE

ABELHAD, NADIA

Provider ID: 306897

Board Certified Specialty: No
NADIA I ABELHAD

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619400801


 Provider English Spoken: Y
Cultural Competency: N

D3. Directorio de proveedores especialistas

Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM


 Website: N/A

CARDIOVASCULAR DISEASE

DO, HULBERT

Provider ID: 290574
Board Certified Specialty: No
HULBERT N DO

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1679733760

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N


Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

 Hours: SU 9:00AM-8:00PM

M-TH 9:00AM-8:00PM

F 9:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED ACUPUNCTURIST


SONG, CAROL

Provider ID: 290550

Board Certified Specialty: No

CAROL U SONG

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1518166685

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:00AM-8:00PM

F 9:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


APRIL, MONIQUE

Provider ID: 306980

Board Certified Specialty: No

MONIQUE APRIL

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1093288730

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


APRIL, MONIQUE

Provider ID: 306977

Board Certified Specialty: No

MONIQUE APRIL

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1093288730

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes



Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D3. Directorio de proveedores especialistas


 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE

Provider ID: 307939
Board Certified Specialty: No
MONIQUE APRIL

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1093288730

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

CERTIFIED NURSE PRACTITIONER

AYELE, MAHOGANY

Provider ID: 257586
Board Certified Specialty: No
MAHOGANY A AYELE

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1902120421

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-8:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM


 Website: N/A

CERTIFIED NURSE PRACTITIONER

AYELE, MAHOGANY

Provider ID: 257587
Board Certified Specialty: No
MAHOGANY A AYELE

 134 GRAPEVINE RD
VISTA, CA 92083


 Phone: (844) 308-5003

Fax: (760) 414-3763

 After Hours Phone: (844)
308-5003

Provider Gender: Female

NPI: 1902120421

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM


W-F 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

BERNETICH, MEGHAN

Provider ID: 304506
Board Certified Specialty: No
MEGHAN A BERNETICH

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3702

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1629354360

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

SA 9:00AM-4:00PM


 Website: N/A

CERTIFIED NURSE PRACTITIONER

BERNETICH, MEGHAN

Provider ID: 302526
Board Certified Specialty: No
MEGHAN A BERNETICH

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3702

 After Hours Phone: (760)
631-5000

D3. Directorio de proveedores especialistas

Provider Gender: Female

NPI: 1629354360


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\24

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER

CARDINELL, ANNA

Provider ID: 291411

Board Certified Specialty: No
ANNA C CARDINELL

 910 SYCAMORE AVE STE
270

VISTA, CA 92081

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1306978614

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 301312

Board Certified Specialty: No
SAMUEL U CHILAKA

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1679140644


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 301311

Board Certified Specialty: No
SAMUEL U CHILAKA

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1679140644


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 303927

Board Certified Specialty: No
TYLER D CHRISTY

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1689094971


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 303932

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
TYLER D CHRISTY

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1689094971

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHRISTY, TYLER

Provider ID: 303928

Board Certified Specialty: No
TYLER D CHRISTY

517 N HORNE ST
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1689094971

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHRISTY, TYLER

Provider ID: 307298

Board Certified Specialty: No
TYLER D CHRISTY

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1689094971

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHRISTY, TYLER

Provider ID: 303929

Board Certified Specialty: No
TYLER D CHRISTY

105 DURIAN ST STE A
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1689094971

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

CORY, ALLISON

Provider ID: 245207

Board Certified Specialty: No
ALLISON H CORY

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1194027706

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

D3. Directorio de proveedores especialistas

 Website: N/A


CERTIFIED NURSE
PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 241907

Board Certified Specialty: No
YI TING T HALGEDAHL

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1619246907


Provider English Spoken: Y


Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


CERTIFIED NURSE
PRACTITIONER

HARRIS, PAMELA

Provider ID: 303439

Board Certified Specialty: No
PAMELA R HARRIS

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1407545221


Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


CERTIFIED NURSE
PRACTITIONER

HARRIS, PAMELA

Provider ID: 302286

Board Certified Specialty: No
PAMELA R HARRIS

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1407545221


Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-7:00PM

F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


CERTIFIED NURSE
PRACTITIONER

HARRIS, PAMELA

Provider ID: 302287

Board Certified Specialty: No
PAMELA R HARRIS

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


Provider Gender: Female
NPI: 1407545221


Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


CERTIFIED NURSE
PRACTITIONER


HARRIS, PAMELA

Provider ID: 302291

Board Certified Specialty: No
PAMELA R HARRIS

 105 DURIAN ST STE A
VISTA, CA 92083

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

D3. Directorio de proveedores especialistas

Provider Gender: Female

NPI: 1407545221


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE


PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302301

Board Certified Specialty: No
JESSICA A HERNANDEZ

 105 DURIAN ST STE A
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female


NPI: 1013668680


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 304493

Board Certified Specialty: No
JESSICA A HERNANDEZ

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302297

Board Certified Specialty: No
JESSICA A HERNANDEZ

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female


NPI: 1013668680


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 304492

Board Certified Specialty: No
JESSICA A HERNANDEZ

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female


NPI: 1013668680


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE

PRACTITIONER



HERNANDEZ, JESSICA

Provider ID: 302296

Board Certified Specialty: No
JESSICA A HERNANDEZ

 1000 VALE TERRACE DR
VISTA, CA 92084

D3. Directorio de proveedores especialistas

 Phone: (760) 631-5000
 Fax: (760) 414-3892


 After Hours Phone: (760) 631-5000


Provider Gender: Female
NPI: 1013668680

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE



PRACTITIONER

HUERTA, STEVEN

Provider ID: 307931

Board Certified Specialty: No
STEVEN T HUERTA

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
 Fax: (760) 414-3892


 After Hours Phone: (760) 631-5000


Provider Gender: Male
NPI: 1558607440

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE



PRACTITIONER

HUERTA, STEVEN

Provider ID: 307933

Board Certified Specialty: No
STEVEN T HUERTA

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
 Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000


Provider Gender: Male
NPI: 1558607440

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE



PRACTITIONER


KELLEHER, BRIDGET

Provider ID: 305737

Board Certified Specialty: No
BRIDGET M KELLEHER

 105 DURIAN ST STE B
VISTA, CA 92083

 Phone: (760) 631-5000
 Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

Provider Gender: Female
NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


CERTIFIED NURSE



PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 298083

Board Certified Specialty: No
BRIDGET M KELLEHER

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000

Provider Gender: Female
NPI: 1245695006

 Provider English Spoken: Y
 Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE

D3. Directorio de proveedores especialistas

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 298085

Board Certified Specialty: No

BRIDGET M KELLEHER

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

KORMANIK, PATRICIA

Provider ID: 282072

Board Certified Specialty: No

PATRICIA A KORMANIK

910 SYCAMORE AVE STE
102

VISTA, CA 92081

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093895047

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MONTGOMERY JR, KEITH

Provider ID: 295288

Board Certified Specialty: No

KEITH MONTGOMERY JR JR

134 GRAPEVINE RD

VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1790978617

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU

8:00AM-5:00PM

W 10:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MONTGOMERY JR, KEITH

Provider ID: 295284

Board Certified Specialty: No

KEITH MONTGOMERY JR JR

1000 VALE TERRACE DR

VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1790978617

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU

8:00AM-5:00PM

W 10:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

NICHOLAS, ESTELA

Provider ID: 239866

Board Certified Specialty: No

ESTELA M NICHOLAS

1000 VALE TERRACE DR

VISTA, CA 92084

Phone: (760) 631-5000


Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

D3. Directorio de proveedores especialistas

Provider Gender: Female

NPI: 1558384792

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:00AM-5:00PM
TU-TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


PRITZKER, JOELY

Provider ID: 239773

Board Certified Specialty: No

JOELY R PRITZKER

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619384351

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

SRILASAK, MICHELE

Provider ID: 281857

Board Certified Specialty: No
MICHELE SRILASAK

 910 SYCAMORE AVE STE
102
VISTA, CA 92081

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265487326

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295507

Board Certified Specialty: No
CHRISTOPHER TAYLOR

 134 GRAPEVINE RD
VISTA, CA 92083


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male


NPI: 1851747166


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-2:00PM
SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295504

Board Certified Specialty: No
CHRISTOPHER TAYLOR

 105 DURIAN ST STE A
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1851747166

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
8:00AM-2:00PM
SA 9:00AM-4:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295502
Board Certified Specialty: No
CHRISTOPHER TAYLOR
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000

Provider Gender: Male
NPI: 1851747166
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-2:00PM
SA 9:00AM-4:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

YCASAS, EMILY

Provider ID: 298837
Board Certified Specialty: No
EMILY JO YCASAS
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000

Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1033841861
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-8:00PM
Website: N/A

CERTIFIED REGISTERED NURSE MIDWIFE

GUIDI, CASEY

Provider ID: 300224
Board Certified Specialty: No
CASEY L GUIDI
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1013349919
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM

SA 9:00AM-4:00PM
Website: N/A

CERTIFIED REGISTERED NURSE MIDWIFE

GUIDI, CASEY

Provider ID: 303315
Board Certified Specialty: No
CASEY L GUIDI
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1013349919
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
Website: N/A

CHIROPRACTOR


CORTEZ, JAIME

Provider ID: 290483
Board Certified Specialty: No
CORTEZ, JAIME
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000

D3. Directorio de proveedores especialistas

Provider Gender: Male

NPI: 1508195348

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CHIROPRACTOR

JU, NATHANIEL

Provider ID: 290220

Board Certified Specialty: No
NATHANIEL JU

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1972883882

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Chinese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 9:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A


CHIROPRACTOR

JU, NATHANIEL

Provider ID: 290222

Board Certified Specialty: No
NATHANIEL JU

 134 GRAPEVINE RD
VISTA, CA 92083


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1972883882

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

HOSPICE AND PALLIATIVE

MEDICINE


RUBENZIK, TAMARA

Provider ID: 282128

Board Certified Specialty: No
TAMARA T RUBENZIK

 910 SYCAMORE AVE STE
102

VISTA, CA 92081

 Phone: (619) 543-6397

Fax: (888) 539-8781

 After Hours Phone: (619)
543-6397

Provider Gender: Female

NPI: 1811200652

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INFECTIOUS DISEASE

HALPERIN, JASON

Provider ID: 296420

Board Certified Specialty: No
JASON I HALPERIN

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1952626228


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

INTERNAL MEDICINE

DAO, MARC

Provider ID: 297754

Board Certified Specialty: No
MARC DAO

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3763

🕒 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1467542175

🗣 Provider English Spoken: Y

🗣 Provider Language(s)

Spoken: French,
Vietnamese

Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL,
PALOMAR MEDICAL CENTER,
SHARP MEMORIAL HOSPITAL,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, EL CENTRO
REGIONAL MEDICAL CENTER,
PALOMAR HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH

8:00AM-8:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

🌐 Website: N/A

INTERNAL MEDICINE

SHABANIAN, LEILA

Provider ID: 307216

Board Certified Specialty: No

LEILA SHABANIAN

📍 134 GRAPEVINE RD
VISTA, CA 92083

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013963073

🗣 Provider English Spoken: Y

🗣 Provider Language(s)

Spoken: Farsi, French,
Persian

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, TRI CITY MEDICAL CTR,
PALOMAR HEALTH, SCRIPPS
MERCY HOSPITAL, PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: TU 10:30AM-7:30PM

F 8:00AM-5:00PM

🌐 Website: N/A

INTERNAL MEDICINE

SHABANIAN, LEILA

Provider ID: 307214

Board Certified Specialty: No

LEILA SHABANIAN

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013963073

🗣 Provider English Spoken: Y

🗣 Provider Language(s)

Spoken: Farsi, French,
Persian

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, TRI CITY MEDICAL CTR,

PALOMAR HEALTH, SCRIPPS

MERCY HOSPITAL, PALOMAR

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

INTERNAL MEDICINE

SHABANIAN, LEILA

Provider ID: 306766

Board Certified Specialty: No

LEILA SHABANIAN

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013963073




🗣 Provider English Spoken: Y

🗣 Provider Language(s)

Spoken: Farsi, French,
Persian

D3. Directorio de proveedores especialistas

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, TRI CITY MEDICAL CTR,
PALOMAR HEALTH, SCRIPPS
MERCY HOSPITAL, PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):


N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*


INTERVENTIONAL

CARDIOLOGY

PARKS, MONICA



Provider ID: 302414
Board Certified Specialty: No
MONICA M PARKS

 906 SYCAMORE AVE STE
104
VISTA, CA 92081




 *Phone: (760) 630-2550*
Fax: (760) 726-2305

 *After Hours Phone: (760)*
630-2550

Provider Gender: Female
NPI: 1740634971

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish,
Vietnamese

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, TRI CITY


MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

OBSTETRICS / GYNECOLOGY

ARRIETA, IRIS



Provider ID: 290607
Board Certified Specialty: No
IRIS R ARRIETA

 1000 VALE TERRACE DR
VISTA, CA 92084

 *Phone: (760) 631-5000*
Fax: (760) 414-3892



 *After Hours Phone: (760)*
631-5000

Provider Gender: Female
NPI: 1659614303

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-TH*
8:00AM-8:00PM
F 9:00AM-5:00PM


SA 9:00AM-4:00PM
 *Website: N/A*

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA


Provider ID: 282168
Board Certified Specialty: No
PRATIBHA S BINDER

 910 SYCAMORE AVE STE
102
VISTA, CA 92081

 *Phone: (800) 926-8273*
Fax: (888) 539-8781


 *After Hours Phone: (800)*
926-8273

Provider Gender: Female
NPI: 1174758031

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM


 *Website: N/A*

OBSTETRICS / GYNECOLOGY

FRANCIS, LARRY

Provider ID: 290292
Board Certified Specialty: No
LARRY N FRANCIS

 1000 VALE TERRACE DR
VISTA, CA 92084

 *Phone: (760) 631-5000*
Fax: (760) 414-3892

 *After Hours Phone: (760)*

D3. Directorio de proveedores especialistas

631-5000
Provider Gender: Male
NPI: 1215008552
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SHARP MEMORIAL HOSPITAL,
POMONA VALLEY HOSP MED
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 13\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TH
9:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

HAWKINS, MELISSA
Provider ID: 290596
Board Certified Specialty: No
MELISSA A HAWKINS
 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1851620447
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR

MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

LEONARD, LISA
Provider ID: 290710
Board Certified Specialty: No
LISA A LEONARD
 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1477588598
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TH
9:00AM-8:00PM
F 9:00AM-5:00PM

SA 9:00AM-4:00PM
 Website: N/A

OPTOMETRIST **GEE, JENNIFER**

Provider ID: 273113
Board Certified Specialty: No
JENNIFER W GEE
 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1336589332
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC
MEDICAL CENTER - D P APH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Hours: M-TH
8:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM
 Website: N/A

OPTOMETRIST **GEE, JENNIFER**

Provider ID: 290209
Board Certified Specialty: No
JENNIFER W GEE
 134 GRAPEVINE RD

D3. Directorio de proveedores especialistas

VISTA, CA 92083
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1336589332
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC
MEDICAL CENTER - D P APH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): 🗣

N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M 8:00AM-5:00PM
TU 9:30AM-5:00PM
W 8:00AM-5:00PM
TH 10:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
🌐 Website: N/A

OPTOMETRIST

GEE, JENNIFER

Provider ID: 290208
Board Certified Specialty: No
JENNIFER W GEE
📍 1000 VALE TERRACE DR
VISTA, CA 92084
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1336589332
🗣 Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC
MEDICAL CENTER - D P APH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): 🗣
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-TH
8:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM
🌐 Website: N/A

OPTOMETRIST

GEE, JENNIFER

Provider ID: 273114
Board Certified Specialty: No
JENNIFER W GEE
📍 134 GRAPEVINE RD
VISTA, CA 92083
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1336589332
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC
MEDICAL CENTER - D P APH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): 🗣

N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M 8:00AM-5:00PM
TU 9:30AM-5:00PM
W 8:00AM-5:00PM
TH 10:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
🌐 Website: N/A

OPTOMETRIST

KIM, MICHAEL

Provider ID: 290697
Board Certified Specialty: No
MICHAEL S KIM

📍 134 GRAPEVINE RD
VISTA, CA 92083
☎ Phone: (760) 631-5000
Fax: (760) 414-3892

🕒 After Hours Phone: (760) 631-5000

Provider Gender: Male
NPI: 1164546313

🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): 🗣

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-W
8:00AM-5:00PM
TH 10:30AM-7:30PM
F 8:00AM-5:00PM

🌐 Website: N/A

OPTOMETRIST

KIM, MICHAEL

Provider ID: 245239
Board Certified Specialty: No

D3. Directorio de proveedores especialistas

MICHAEL S KIM

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1164546313

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-W

8:00AM-5:00PM

TH 10:30AM-7:30PM

F 8:00AM-5:00PM

Website: N/A

OPTOMETRIST

KIM, MICHAEL

Provider ID: 290903

Board Certified Specialty: No

MICHAEL S KIM

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1164546313

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 8:00AM-5:00PM
M-F 8:00AM-5:00PM

Website: N/A

OPTOMETRIST

MORA, WENDY

Provider ID: 290236

Board Certified Specialty: No

WENDY A MORA

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1376958389

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-8:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

Website: N/A

OPTOMETRIST

MORA, WENDY

Provider ID: 242634

Board Certified Specialty: No

WENDY A MORA

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1376958389

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH

8:00AM-8:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

Website: N/A

OPTOMETRIST

MORA, WENDY

Provider ID: 290238

Board Certified Specialty: No

WENDY A MORA

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1376958389

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


OPTOMETRIST


TAM, EMILY

Provider ID: 290316

Board Certified Specialty: No

EMILY TAM

 134 GRAPEVINE RD
VISTA, CA 92083


 *Phone: (760) 631-5000*


Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

Provider Gender: Female

NPI: 1497161236

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Chinese, Mandarin,
Yue Chinese*


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

OPTOMETRIST


TAM, EMILY

Provider ID: 277978

Board Certified Specialty: No

EMILY TAM

 1000 VALE TERRACE DR
VISTA, CA 92084


 *Phone: (760) 631-5000*


Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

Provider Gender: Female

NPI: 1497161236

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Chinese, Mandarin,
Yue Chinese*

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: SU 9:00AM-4:00PM*

M-TH 8:00AM-8:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

 *Website: N/A*

OPTOMETRIST


TAM, EMILY

Provider ID: 290315

Board Certified Specialty: No

EMILY TAM

 1000 VALE TERRACE DR
VISTA, CA 92084


 *Phone: (760) 631-5000*


Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

Provider Gender: Female

NPI: 1497161236

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Chinese, Mandarin,
Yue Chinese*

Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT*

PROVIDER

 *Hours: SU 9:00AM-4:00PM*

M-TH 8:00AM-8:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

 *Website: N/A*

OPTOMETRIST


TRAN, JESSICA

Provider ID: 304595

Board Certified Specialty: No

JESSICA A TRAN

 1000 VALE TERRACE DR
VISTA, CA 92084

 *Phone: (760) 631-5000*

Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

Provider Gender: Female

NPI: 1457922957

 *Provider English Spoken: Y*

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM

SA 9:00AM-4:00PM

 *Website: N/A*

OPTOMETRIST


TRAN, JESSICA

Provider ID: 303729

Board Certified Specialty: No

JESSICA A TRAN

 1000 VALE TERRACE DR
VISTA, CA 92084

 *Phone: (760) 631-5000*

Fax: (760) 414-3892

D3. Directorio de proveedores especialistas

 After Hours Phone: (760)
631-5000

Provider Gender: Female


NPI: 1457922957


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\21

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM


 Website: N/A


OPTOMETRIST

TRAN, JESSICA

Provider ID: 304596

Board Certified Specialty: No
JESSICA A TRAN

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female


NPI: 1457922957


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


OPTOMETRIST

TRAN, JESSICA


Provider ID: 303733

Board Certified Specialty: No
JESSICA A TRAN

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1457922957


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 5\21

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


PEDIATRICS

RAHIMI, NASSRIN

Provider ID: 257581

Board Certified Specialty: No
NASSRIN RAHIMI

 1000 VALE TERRACE DR
VISTA, CA 92084



 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1063438166

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Farsi, Persian

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


PHYSICIANS ASSISTANT

WALLACE, STEPHANIE


Provider ID: 239770

Board Certified Specialty: No
STEPHANIE C WALLACE

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (888)
216-8482

Provider Gender: Female

NPI: 1518104942

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D3. Directorio de proveedores especialistas


 Hours: M 8:00AM-5:00PM
TU-TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
 Website: N/A

PODIATRIST

MILLER, JULIE

Provider ID: 290666
Board Certified Specialty: No
MILLER, JULIE ANN

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


Provider Gender: Female
NPI: 1619115664


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, TRI CITY MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM


 Website: N/A

PODIATRIST

MILLER, JULIE

Provider ID: 305464
Board Certified Specialty: No
MILLER, JULIE ANN

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1619115664


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, TRI CITY MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


 Website: N/A

PULMONARY DISEASES

BAUTISTA, JENNIFER



Provider ID: 300864
Board Certified Specialty: No
JENNIFER D BAUTISTA

 2067 W VISTA WAY STE 160
VISTA, CA 92083

 Phone: (760) 230-8994
Fax: (760) 944-1309

 After Hours Phone: (760)
230-8994

Provider Gender: Female
NPI: 1770727034

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, COMMUNITY

HOSPITAL OF THE MONTEREY
PENINSULA, NATIVIDAD
MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 21\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

REGISTERED PHYSICAL THERAPIST

AMBROSE, CHRISTOPHER

Provider ID: 248009
Board Certified Specialty: No
CHRISTOPHER S AMBROSE

 2067 W VISTA WAY STE 185
VISTA, CA 92083

 Phone: (760) 631-5888
Fax: (760) 631-5880

 After Hours Phone: (760)
591-7750


Provider Gender: Male
NPI: 1114977535


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 8\125

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 7:00AM-7:00PM
TU 7:00AM-5:00PM
W 7:00AM-7:00PM
TH 7:00AM-5:00PM
F 7:00AM-7:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

RHEUMATOLOGY

AL NAHLAWI, BASMA

Provider ID: 306869

Board Certified Specialty: No

BASMA AL NAHLAWI

2095 W VISTA WAY STE 216
VISTA, CA 92083

Phone: (760) 736-8091

Fax: (760) 736-8092

After Hours Phone: (760)
736-8091

Provider Gender: Female

NPI: 1144455262

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: LOMA

LINDA UNIVERSITY MED CTR

MURRIETA, PALOMAR

MEDICAL CENTER, LOMA

LINDA UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

SURGERY GENERAL

ARMANI, AVA

Provider ID: 282144

Board Certified Specialty: No

AVA ARMANI

910 SYCAMORE AVE STE
102

VISTA, CA 92081

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861759383

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

MEDICAL CENTER, UCSF

Medical Center At Mission Bay,

UCSF MEDICAL CENTER AT

MOUNT ZION, UCSD LA JOLLA

JOHN SALLY THORNTON,

UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

GROVE, JAY

Provider ID: 245227

Board Certified Specialty: No

JAY R GROVE

2385 S MELROSE DR
VISTA, CA 92081

Phone: (760) 300-3647

Fax: (760) 482-1316

After Hours Phone: (760)
300-3647

Provider Gender: Male

NPI: 1912971334

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

HEALTH, PALOMAR MEDICAL
CENTER, TRI CITY MEDICAL
CTR, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

WILDOMAR

ANESTHESIOLOGY

HYLTON, DIANA

Provider ID: 241737

Board Certified Specialty: No

DIANA J HYLTON

36485 INLAND VALLEY DR
WILDOMAR, CA 92595

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932527751

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, SOUTHWEST

HEALTHCARE INLAND VALLEY

HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL

D3. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): JINGHONG LI

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY

KRAUSE, MARTIN


Provider ID: 287654

Board Certified Specialty: No
MARTIN KRAUSE

 36485 INLAND VALLEY DR
WILDOMAR, CA 92595


 Phone: (951) 677-1111

Fax: (951) 677-9757

 After Hours Phone: (951)
677-1111

Provider Gender: Male

NPI: 1417243239

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE


LI, JINGHONG


Provider ID: 255940

Board Certified Specialty: No

JINGHONG LI

 36485 INLAND VALLEY DR
WILDOMAR, CA 92595

 Phone: (951) 677-1111

 After Hours Phone: (951)
677-1111

Provider Gender: Female

NPI: 1619014479

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PULMONARY DISEASES

KUMAR, AVNEE


Provider ID: 300013

Board Certified Specialty: No
AVNEE J KUMAR

 36485 INLAND VALLEY DR
WILDOMAR, CA 92595

 Phone: (951) 677-1111

Fax: (951) 677-9757

 After Hours Phone: (951)
677-1111

Provider Gender: Female

NPI: 1750745394

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PULMONARY DISEASES

SURI, RAJAT

Provider ID: 283349

Board Certified Specialty: No
RAJAT SURI

 36485 INLAND VALLEY DR
WILDOMAR, CA 92595

 Phone: (951) 677-1111

Fax: (951) 677-9757

 After Hours Phone: (951)
677-1111

Provider Gender: Male

NPI: 1144615337

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D4. Directorio de hospitales: hospital general de atención aguda

SAN DIEGO

ALVARADO HOSPITAL LLC

Provider ID: 170056

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (619) 287-3270

After Hours Phone: (619)
287-3270

Accepting New Patients: No

Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: M-F
8:00AM-4:30PM

License Number: N/A

NPI: 1265468946

Website: www.alvaradohospital.com

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

LA MESA

GROSSMONT HOSPITAL

Provider ID: 170046

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Phone: (619) 740-6000

After Hours Phone: (619)
740-6000

Accepting New Patients: No

Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7

days/week

License Number: 080000006

NPI: 1528041811

Website: www.sharp.com/hospitals/grossmont/

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Birthing Friendly: Y

SAN DIEGO

KINDRED HOSPITAL SAN DIEGO

Provider ID: 169663

1940 EL CAJON BLVD
SAN DIEGO, CA 92104

Phone: (619) 543-4500

After Hours Phone: (619)
543-4500

Accepting New Patients: No
Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: N/A

NPI: 1992880512

Website: N/A

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

POWAY

PALOMAR HEALTH

Provider ID: 170052

15615 POMERADO RD
POWAY, CA 92064

Phone: (858) 613-4000

After Hours Phone: (858)
613-4000

Accepting New Patients: No
Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: 080000127

NPI: 1376513754

Website: www.palomarhealth.org/facilities/palomar-poway-outpatient

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Birthing Friendly: Y

ESCONDIDO

PALOMAR MEDICAL CENTER

Provider ID: 173011

2185 CITRACADO PKWY
ESCONDIDO, CA 92029

Phone: (442) 281-5000

After Hours Phone: (442)
281-5000

Accepting New Patients: No
Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO


Hours: 24 Hours / 7
days/week

License Number: 080000083

NPI: 1457321317




Website: www.palomarhealth.org/facilities/palomar-

D4. Directorio de hospitales: hospital general de atención aguda


medical- center
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


NATIONAL CITY

PARADISE VALLEY HOSPITAL

Provider ID: 170057
 2400 E 4TH ST
NATIONAL CITY, CA 91950
 Phone: (619) 470-4321
 After Hours Phone: (619) 470-4321

Accepting New Patients: No
Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status:
JCAHO


 Hours: 24 Hours / 7 days/week

License Number: N/A

NPI: 1356410351




 Website: www.paradisevalleyhospital.net

American Sign Language (ASL):
N



 Accessibility: CONTACT PROVIDER

SAN DIEGO

RADY CHILDRENS HOSPITAL SAN DIEGO

Provider ID: 171083
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 576-1700
 After Hours Phone: (858) 576-1700

Accepting New Patients: No

Min/Max Age: 0\None
 Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status:
 Hours: 24 Hours / 7 days/week
License Number: N/A


NPI: 1710065933
 Website: www.rchsd.org
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


LA JOLLA

SCRIPPS GREEN HOSPITAL

Provider ID: 171084
 10666 N TORREY PINES RD
MS 220
LA JOLLA, CA 92037
 Phone: (858) 455-9100
 After Hours Phone: (858) 455-9100


Accepting New Patients: No
Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status:
JCAHO

 Hours: 24 Hours / 7 days/week

License Number: 080000139

NPI: 1841233780




 Website: www.scripps.org/locations/hospitals__scripps-green-hospital

American Sign Language (ASL):
N



 Accessibility: CONTACT PROVIDER

SCRIPPS MEMORIAL


HOSPITAL

Provider ID: 170045
 9888 GENESEE AVE
LA JOLLA, CA 92037
 Phone: (800) 727-4777
 After Hours Phone: (800) 727-4777


Accepting New Patients: No
Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status:
 Hours: 24 Hours / 7 days/week

License Number: 080000050
NPI: 1841277704

 Website: www.scripps.org/locations/hospitals__scripps-memorial-hospital-la-jolla




American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Birth Friendly: Y


ENCINITAS

SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Provider ID: 170305
 354 SANTA FE DR
ENCINITAS, CA 92024
 Phone: (760) 753-6501
 After Hours Phone: (760) 753-6501


Accepting New Patients: No
Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status:
JCAHO

 Hours: 24 Hours / 7

D4. Directorio de hospitales: hospital general de atención aguda

days/week
License Number: 080000148
NPI: 1700829199

 Website: www.scripps.org/locations/hospitals__scripps-memorial-hospital-encinitas

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Birth Friendly: Y


SAN DIEGO

SCRIPPS MERCY HOSPITAL


Provider ID: 170048

 4077 5TH AVE
SAN DIEGO, CA 92103


 Phone: (619) 294-8111

 After Hours Phone: (619) 294-8111

Accepting New Patients: No
Min/Max Age: 0\None


 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO


 Hours: 24 Hours / 7 days/week

License Number: N/A

NPI: 1659359446

 Website: www.scripps.org/locations/hospitals__scripps-mercy-hospital-san-diego

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Birth Friendly: Y


CHULA VISTA

SCRIPPS MERCY HOSPITAL CHULA VISTA

Provider ID: 170256

 435 H ST
CHULA VISTA, CA 91910


 Phone: (619) 691-7000

 After Hours Phone: (619) 691-7000

Accepting New Patients: No
Min/Max Age: 0\None


 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

 Hours: 24 Hours / 7 days/week

License Number: 090000074

NPI: 1659359446

 Website: www.scripps.org/locations/hospitals__scripps-mercy-hospital-chula-vista

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


SAN DIEGO

SELECT SPECIALTY HOSPITAL SAN DIEGO


Provider ID: 170165

 555 WASHINGTON ST
SAN DIEGO, CA 92103


 Phone: (619) 260-8300

 After Hours Phone: (619) 260-8300

Accepting New Patients: No
Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO


 Hours: 24 Hours / 7 days/week

License Number: 090000404

NPI: 1639172133

 Website: N/A

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


CHULA VISTA

SHARP CHULA VISTA MED CTR

Provider ID: 170251

 751 MEDICAL CENTER CT
CHULA VISTA, CA 91911


 Phone: (619) 502-5800

 After Hours Phone: (619) 502-5800

Accepting New Patients: No
Min/Max Age: 0\None


 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO


 Hours: 24 Hours / 7 days/week

License Number: 090000008

NPI: 1396728630

 Website: www.sharp.com/hospitals/chula-vista/

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER




Birth Friendly: Y

CORONADO

SHARP CORONADO HOSP AND HEALTHCARE CTR

D4. Directorio de hospitales: hospital general de atención aguda

Provider ID: 170252


 250 PROSPECT PL
CORONADO, CA 92118
 Phone: (619) 522-3600
 After Hours Phone: (619)
522-3600

Accepting New Patients: No

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

 Hours: 24 Hours / 7
days/week

License Number: N/A

NPI: 1154304475

 Website: www.sharp.com/hospitals/coronado/




American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

SAN DIEGO

SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS

Provider ID: 170054


 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
 Phone: (858) 939-3400
 After Hours Phone: (858)
939-3400

Accepting New Patients: No

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

 Hours: 24 Hours / 7
days/week

License Number: 080000039

NPI: 1407839921

 Website: www.sharp.com
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

SHARP MEMORIAL HOSPITAL

Provider ID: 170047


 7901 FROST ST
SAN DIEGO, CA 92123
 Phone: (858) 939-3400
 After Hours Phone: (858)
939-3400

Accepting New Patients: No

Min/Max Age: 0\None


 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

 Hours: 24 Hours / 7
days/week

License Number: N/A

NPI: 1407839921

 Website: www.sharp.com/hospitals/memorial/

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Birthing Friendly: Y

OCEANSIDE

TRI CITY MEDICAL CTR

Provider ID: 170049


 4002 VISTA WAY
OCEANSIDE, CA 92056
 Phone: (760) 724-8411
 After Hours Phone: (760)
724-8411

Accepting New Patients: No

Min/Max Age: 0\None


 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

 Hours: 24 Hours / 7
days/week

License Number: N/A

NPI: 1801861190

 Website: www.tricitymed.org

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Birthing Friendly: Y

LA JOLLA


UCSD LA JOLLA JOHN SALLY THORNTON

Provider ID: 170053


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 657-7000
 After Hours Phone: (858)
657-7000

Accepting New Patients: No

Min/Max Age: 0\None

 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:


 Hours: 24 Hours / 7
days/week

License Number: 090000101

NPI: 1497021265

 Website: N/A

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


SAN DIEGO


D4. Directorio de hospitales: hospital general de atención aguda

UCSD MEDICAL CTR

Provider ID: 170051

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-6222

 After Hours Phone: (619)
543-6222


Accepting New Patients: No

Min/Max Age: 0\None

 Site English Spoken: Y


Cultural Competency: N

Hospital Accreditation Status:

 Hours: 24 Hours / 7
days/week

License Number: 090000101

NPI: 1184722779

 Website: <https://health.ucsd.edu/locations/pages/hillcrest.aspx>

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Birthing Friendly: Y


D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)


CARLSBAD

N

 Accessibility: CONTACT PROVIDER

 Website: www.sharp.com/hospitals/coronado/departments/long-term-care.cfm

Credentials and/or certifications:


 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

LA COSTA HOUSE

Provider ID: 662923

 6433 FLAMENCO ST
CARLSBAD, CA 92009

 Phone: (760) 721-1706

Fax: (760) 721-9872

 After Hours Phone: (760) 721-1706

Accepting New Patients: No

NPI: 1962488007

 Website: N/A

Credentials and/or certifications:

 Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

SOUTH BAY POST ACUTE CARE

Provider ID: 394308


 553 F ST
CHULA VISTA, CA 91910

 Phone: (619) 426-8611

Fax: (619) 240-7378

 After Hours Phone: (619) 426-8611

Accepting New Patients: No

 Hours: M-F
9:00AM-5:30PM

NPI: 1376946277

 Website: <http://southbaypostacute.com>

Credentials and/or certifications:

 Site English Spoken: Y
 Site Language(s) Spoken: Spanish, Filipino, Pilipino

Cultural Competency: N

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

EL CAJON

AVOCADO POST ACUTE

Provider ID: 171985


 510 E WASHINGTON AVE
EL CAJON, CA 92020

 Phone: (619) 440-1211


Fax: (619) 956-3929

 After Hours Phone: (619) 440-1211

Accepting New Patients: No
NPI: 1568484517

 Website: www.avocadopostacute.com

Credentials and/or certifications:

 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

CHULA VISTA

BIRCH PATRICK CONV CTR

Provider ID: 171998

 751 MEDICAL CENTER CT
CHULA VISTA, CA 91911


 Phone: (619) 502-3600

Fax: (619) 502-5835

 After Hours Phone: (619) 502-3600

Accepting New Patients: No

NPI: 1538142369

 Website: www.sharp.com/hospitals/chula-vista/departments/skilled-nursing.cfm

Credentials and/or certifications:

 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):


CORONADO

VILLA CORONADO


CONVALESCENT

Provider ID: 172644

 233 PROSPECT PL
CORONADO, CA 92118

 Phone: (619) 552-3900

Fax: (619) 522-3939


 After Hours Phone: (619) 552-3900

Accepting New Patients: No
NPI: 1184607418

COTTONWOOD CANYON HEALTHCARE CENTER

Provider ID: 171983

 1391 E MADISON AVE
EL CAJON, CA 92021

 Phone: (619) 444-1107

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

Fax: (619) 444-1403

☎ After Hours Phone: (619) 444-1107

Accepting New Patients: No

NPI: 1013953199

🌐 Website: <http://cottonwoodcanyonhc.com>

Credentials and/or

certifications:

☐ Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

COUNTRY HILLS HEALTH CARE CENTER

Provider ID: 416853

📍 1580 BROADWAY
EL CAJON, CA 92021

☎ Phone: (619) 441-8745

☎ After Hours Phone: (619) 441-8745

Accepting New Patients: No

NPI: 1700973963

🌐 Website: www.countryhills.com

Credentials and/or

certifications:

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: American Sign Language, Arabic, Korean, Spanish, Tagalog, Farsi, Vietnamese, Mandarin

Cultural Competency: N

American Sign Language (ASL):

Y

♿ Accessibility: CONTACT PROVIDER

COUNTRY HILLS POST ACUTE

Provider ID: 503510

📍 1580 BROADWAY
EL CAJON, CA 92021

☎ Phone: (619) 441-8745

Fax: (619) 441-9029

☎ After Hours Phone: (619) 441-8745

Accepting New Patients: No

NPI: 1063974285

🌐 Website: N/A

Credentials and/or

certifications:

☐ Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

GRANITE HILLS HEALTHCARE AND WELLNESS CENTRE LLC

Provider ID: 286282

📍 1340 E MADISON AVE
EL CAJON, CA 92021

☎ Phone: (619) 447-1020

Fax: (619) 447-1024

☎ After Hours Phone: (619) 447-1020

Accepting New Patients: No

NPI: 1346516937

🌐 Website: N/A

Credentials and/or

certifications:

☐ Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

KASEY'S HOME

Provider ID: 674600

📍 1164 CRYSTAL LN
EL CAJON, CA 92020

☎ Phone: (619) 465-8010

Fax: (619) 465-8348

☎ After Hours Phone: (619) 465-8010

Accepting New Patients: No

🕒 Hours: M-F
8:00AM-5:00PM

NPI: 1639392079

🌐 Website: N/A

Credentials and/or

certifications:

☐ Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

MAGNOLIA POST ACUTE CARE

Provider ID: 380518

📍 635 S MAGNOLIA AVE
EL CAJON, CA 92020

☎ Phone: (616) 442-8826

Fax: (619) 442-0288

☎ After Hours Phone: (616) 442-8826

Accepting New Patients: No

NPI: 1316340227

🌐 Website: N/A

Credentials and/or

certifications:

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL):

N


♿ Accessibility: CONTACT PROVIDER


D5. Proveedores de apoyo y servicios a largo plazo (LTSS)


I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

PARKSIDE HEALTH AND WELLNESS CENTER

Provider ID: 349923


 444 W LEXINGTON AVE
EL CAJON, CA 92020

 Phone: (619) 442-7744

 After Hours Phone: (619)
442-7744

Accepting New Patients: No

NPI: 1447653340

 Website: <http://parksidehealth.net>

Credentials and/or

certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL):


N

 Accessibility: CONTACT
PROVIDER

SAN DIEGO POST ACUTE CENTER

Provider ID: 173508

 1201 S ORANGE AVE
EL CAJON, CA 92020


 Phone: (619) 441-1988

Fax: (619) 441-7416

 After Hours Phone: (619)
441-1988

Accepting New Patients: No

NPI: 1285061085

 Website: <http://sdpostacute.com>

Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N


American Sign Language (ASL):


N

 Accessibility: CONTACT
PROVIDER

SOMERSET SUBACUTE AND CARE

Provider ID: 348526

 151 CLAYDELLE AVE
EL CAJON, CA 92020

 Phone: (619) 442-0245

Fax: (614) 423-3631

 After Hours Phone: (619)
442-0245

Accepting New Patients: No

NPI: 1073916987

 Website: <http://somensetsubacute.com>

Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):


N

 Accessibility: CONTACT
PROVIDER

THE BRADLEY COURT

Provider ID: 419158

 675 E BRADLEY AVE
EL CAJON, CA 92021

 Phone: (619) 448-6633

Fax: (619) 448-5462

 After Hours Phone: (619)
448-6633

Accepting New Patients: No

NPI: 1629129267

 Website: N/A

Credentials and/or

certifications:

Site English Spoken: Y

Site Languages(s) Spoken:

Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL):


N


 Accessibility: CONTACT
PROVIDER

VICTORIA POST ACUTE CARE

Provider ID: 387720

 654 S ANZA ST
EL CAJON, CA 92020

 Phone: (619) 440-5005

 After Hours Phone: (619)
440-5005

Accepting New Patients: No

NPI: 1326441239

 Website: www.VICTORIAPOSTACUTE.com

Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):


N


 Accessibility: CONTACT
PROVIDER

VICTORIA POST ACUTE CARE

Provider ID: 387720


 654 S ANZA ST
EL CAJON, CA 92020

 Phone: (619) 440-5005

 After Hours Phone: (619)
440-5005

Accepting New Patients: No

NPI: 1326441239

 Website: <http://victoriapostacute.com>

Credentials and/or

certifications:


Site English Spoken: Y

Cultural Competency: N





American Sign Language (ASL):



D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

N
 Accessibility: CONTACT PROVIDER





VILLA LAS PALMAS HEALTHCARE CTR



Provider ID: 172020
 622 S ANZA ST
EL CAJON, CA 92020
 Phone: (619) 442-0544
 After Hours Phone: (619) 442-0544
Accepting New Patients: No
NPI: 1023048295
 Website: <http://villalaspalmascares.com>
Credentials and/or certifications:


 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

ENCINITAS




AVIARA HEALTHCARE CENTER

Provider ID: 171995
 944 REGAL RD
ENCINITAS, CA 92024
 Phone: (760) 944-0331
 After Hours Phone: (760) 944-0331
Accepting New Patients: No
NPI: 1518146620
 Website: <http://aviarahealthcare.com>
Credentials and/or certifications:

 Site English Spoken: Y
 Site Languages(s) Spoken: Tagalog, Spanish



Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

ENCINITAS NURSING AND REHAB CTR

Provider ID: 171977
 900 SANTA FE DR
ENCINITAS, CA 92024
 Phone: (760) 753-6423
Fax: (760) 753-4979
 After Hours Phone: (760) 753-6423

Accepting New Patients: No




 Hours: M-F
8:00AM-5:00PM
NPI: 1265415749
 Website: www.covenantcare.com

Credentials and/or certifications:
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

Cultural Competency: N
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER





THE DORTHY AND JOSEPH GOLDBERG HEALTHCARE CENTER


Provider ID: 172000
 211 SAXONY RD
ENCINITAS, CA 92024
 Phone: (760) 632-0081
Fax: (760) 516-2016
 After Hours Phone: (760) 632-0081



Accepting New Patients: No
 Hours: M-F
7:00AM-4:00PM
NPI: 1659482032
 Website: N/A
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

ESCONDIDO

ESCONDIDO CARE CENTER

Provider ID: 172027
 421 E MISSION AVE
ESCONDIDO, CA 92025
 Phone: (760) 747-0430
Fax: (760) 747-0569
 After Hours Phone: (760) 747-0430
Accepting New Patients: No
 Hours: M-F
8:00AM-4:30PM
NPI: 1588660765

 Website: <http://escondidopostacute.com>
Credentials and/or certifications:

 Site English Spoken: Y
 Site Languages(s) Spoken: Tagalog, Spanish
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

LIFE CARE CENTER OF

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

ESCONDIDO

Provider ID: 172010

1980 FELICITA RD

ESCONDIDO, CA 92025

Phone: (760) 741-6109

After Hours Phone: (760) 741-6109

Accepting New Patients: No

NPI: 1386681286

Website: <http://lifecarecentroscondido.com>

Credentials and/or certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PALOMAR HEIGHTS CARE CTR

Provider ID: 170055

1260 E OHIO AVE

ESCONDIDO, CA 92027

Phone: (760) 746-1100

After Hours Phone: (760) 746-1100

Accepting New Patients: No

NPI: 1255337440

Website: <http://palomarheightsrehab.com>

Credentials and/or certifications:

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PALOMAR VISTA

HEALTHCARE CTR

Provider ID: 171988

201 N FIG ST

ESCONDIDO, CA 92025

Phone: (760) 746-0303

Fax: (760) 738-1749

After Hours Phone: (760) 746-0303

Accepting New Patients: No

NPI: 1861491490

Website: <http://palomarvista.com>

Credentials and/or certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

VALLE VISTA POST ACUTE

Provider ID: 171968

1025 W 2ND AVE

ESCONDIDO, CA 92025

Phone: (760) 745-1842

Fax: (760) 745-4346

After Hours Phone: (760) 745-1842

Accepting New Patients: No

Hours: M-F

8:00AM-5:00PM

NPI: 1659369262

Website: www.covenantcare.com

Credentials and/or certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FALLBROOK

FALLBROOK SKILLED NURSING

Provider ID: 298744

325 POTTER ST

FALLBROOK, CA 92028

Phone: (760) 728-2330

Fax: (909) 863-4644

After Hours Phone: (760) 728-2330

Accepting New Patients: No

Hours: M-F

8:00AM-5:00PM

NPI: 1265823264

Website: www.progressivecarecenters.com

Credentials and/or certifications:

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

VIA RIO HOUSE

Provider ID: 662930

1262 VIA ENCINOS DR

FALLBROOK, CA 92028

Phone: (760) 547-1976

Fax: (760) 721-9872

After Hours Phone: (760) 547-1976

Accepting New Patients: No

NPI: 1962488007

Website: N/A

Credentials and/or

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

LA JOLLA

LA JOLLA NURSING AND REHAB CTR

Provider ID: 171975

2552 TORREY PINES RD
LA JOLLA, CA 92037

Phone: (858) 453-5810
Fax: (858) 214-1212

After Hours Phone: (858)
453-5810

Accepting New Patients: No

Hours: M-F
8:00AM-5:00PM

NPI: 1457486078

Website: www.covenantcare.com

Credentials and/or

certifications:

Site English Spoken: Y

Site Languages(s) Spoken: ,
Spanish

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

THE COVE AT LA JOLLA

Provider ID: 305514

7160 FAY AVE
LA JOLLA, CA 92037

Phone: (858) 459-4361

After Hours Phone: (858)
459-4361

Accepting New Patients: No

Hours: M-F 7:30AM-4:00PM
NPI: 1588067482

Website: <http://thecoveatla.com>

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

LA MESA

ARBOR HILLS NURSING CENTER

Provider ID: 172007

7800 PARKWAY DR
LA MESA, CA 91942

Phone: (619) 460-2330
 After Hours Phone: (619)
460-2330

Accepting New Patients: No
NPI: 1356345706

Website: www.lifegen.net/arborhills/

Credentials and/or
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Tagalog, Spanish, Russian

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CARE MERIDIAN LA MESA

Provider ID: 173379

5640 AZTEC DR

LA MESA, CA 91942

Phone: (949) 263-6632
Fax: (619) 465-0019

After Hours Phone: (949)
263-6632

Accepting New Patients: No
NPI: 1235404674

Website: www.neurorestorative.com

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

COUNTRY MANOR LA MESA HEALTHCARE CENTER

Provider ID: 172023

5696 LAKE MURRAY BLVD
LA MESA, CA 91942

Phone: (619) 460-7871
 After Hours Phone: (619)
460-7871

Accepting New Patients: No
NPI: 1457345001

Website: countrymanorlamesa.com

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N







Accessibility: CONTACT
PROVIDER

GROSSMONT HOSPITAL DP SNF







Provider ID: 172643

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)








I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

 5555 GROSSMONT CENTER DR
LA MESA, CA 91942
 Phone: (619) 740-4110
 After Hours Phone: (619) 740-4110
Accepting New Patients: No
NPI: 1417930249
 Website: www.sharp.com/hospitals/grossmont/departments/skilled-nursing.cfm
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER



GROSSMONT POST ACUTE CARE

Provider ID: 310488
 8787 CENTER DR
LA MESA, CA 91942
 Phone: (619) 460-4444
Fax: (619) 713-5116
 After Hours Phone: (619) 460-4444
Accepting New Patients: No
NPI: 1689077588
 Website: <http://grossmontpostacute.com>
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

HILLDALE HABILITATION CENTER









Provider ID: 527671
 7979 LA MESA BLVD
LA MESA, CA 91942
 Phone: (619) 465-8010
Fax: (619) 465-8348
 After Hours Phone: (619) 465-8010
Accepting New Patients: No
 Hours: M-F
8:00AM-5:00PM
NPI: 1073736427
 Website: N/A
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

LA MESA HEALTHCARE CTR




Provider ID: 172022
 3780 MASSACHUSETTS AVE
LA MESA, CA 91941
 Phone: (619) 465-1313
Fax: (619) 465-8429
 After Hours Phone: (619) 465-1313
Accepting New Patients: No
NPI: 1003852666
 Website: <http://lamesahealthcare.com>
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PARKWAY HILLS NURSING & REHAB

Provider ID: 417047
 7760 PARKWAY DR
LA MESA, CA 91942
 Phone: (619) 469-0124
Fax: (619) 828-7654
 After Hours Phone: (619) 469-0124
Accepting New Patients: No
 Hours: M-TH
9:00AM-5:00PM
F 5:00AM-5:00PM
NPI: 1174926448
 Website: N/A
Credentials and/or certifications:
 Site English Spoken: Y
 Site Languages(s) Spoken: Farsi, Spanish, Tagalog
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

SHASTA HOME

Provider ID: 674614
 10346 CHALLENGE BLVD
LA MESA, CA 91941
 Phone: (619) 465-8010
Fax: (619) 465-8348
 After Hours Phone: (619) 465-8010
Accepting New Patients: No
 Hours: M-F
8:00AM-5:00PM
NPI: 1134342520
 Website: N/A
Credentials and/or

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

LEMON GROVE

BELLA VISTA HEALTH CENTER

Provider ID: 419062

7922 PALM ST
LEMON GROVE, CA 91945

Phone: (619) 644-1000

Fax: (619) 797-2920

After Hours Phone: (619)
644-1000

Accepting New Patients: No

NPI: 1760709687

Website: www.bellavistahealth.com

Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

LEMON GROVE CARE AND REHAB CTR

Provider ID: 172013

8351 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 463-0294

Fax: (619) 461-1064

After Hours Phone: (619)
463-0294

Accepting New Patients: No

NPI: 1336134204

Website: <http://lemongrovecare.com>

Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

NATIONAL CITY

CASTLE MANOR NURSING AND REHABILITATION CTR

Provider ID: 171978

541 S V AVE
NATIONAL CITY, CA 91950

Phone: (619) 791-7900

After Hours Phone: (619)
791-7900

Accepting New Patients: No

NPI: 1497759856

Website: www.lifegen.net/castlemanor/index.html

Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FRIENDSHIP MANOR NURSING AND REHABILITATION CTR

Provider ID: 171973

902 EUCLID AVE
NATIONAL CITY, CA 91950

Phone: (619) 791-7700

Fax: (619) 791-7791

After Hours Phone: (619)

791-7700

Accepting New Patients: No

Hours: M-F
9:00AM-5:00PM

NPI: 1235133687

Website: www.lifegen.net/friendshipmanor/

Credentials and/or

certifications:
Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PARADISE VALLEY HEALTH CARE CENTER

Provider ID: 171106

2575 E 8TH ST
NATIONAL CITY, CA 91950

Phone: (619) 470-6700

After Hours Phone: (619)
470-6700

Accepting New Patients: No

NPI: 1275513293

Website: <http://pvhcc.com>

Credentials and/or

certifications:
Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

WINDSOR GARDENS CONV CTR OF SAN DIEGO

Provider ID: 172011

220 E 24TH ST
NATIONAL CITY, CA 91950

Phone: (619) 474-6741

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

Fax: (619) 474-1925

☎ After Hours Phone: (619) 474-6741

Accepting New Patients: No

NPI: 1730176538

🌐 Website: www.windsorcare.com

Credentials and/or certifications:

☐ Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

OCEANSIDE

LA PALOMA HEALTHCARE CTR

Provider ID: 172021

📍 3232 THUNDER DR
OCEANSIDE, CA 92056

☎ Phone: (760) 724-2193

☎ After Hours Phone: (760) 724-2193

Accepting New Patients: No

NPI: 1265462436

🌐 Website: WWW.LAPALOMAHEALTHCARE.COM

Credentials and/or certifications:

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Armenian, Korean, Tagalog

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

MCNEALY HOUSE

Provider ID: 662925

📍 4602 ALLENDE AVE
OCEANSIDE, CA 92057

☎ Phone: (760) 721-1706

Fax: (760) 721-9872

☎ After Hours Phone: (760) 721-1706

Accepting New Patients: No

NPI: 1962488007

🌐 Website: N/A

Credentials and/or certifications:

☐ Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

MICHALOWSKI HOME

Provider ID: 662925

📍 4602 ALLENDE AVE
OCEANSIDE, CA 92057

☎ Phone: (760) 721-1706

Fax: (760) 721-9872

☎ After Hours Phone: (760) 721-1706

Accepting New Patients: No

NPI: 1962488007

🌐 Website: N/A

Credentials and/or certifications:

☐ Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

MONARCH HOME

Provider ID: 666883

📍 877 MUIRFIELD DR
OCEANSIDE, CA 92058

☎ Phone: (760) 231-8139

Fax: (760) 529-5148

☎ After Hours Phone: (760) 231-8139

Accepting New Patients: No

🕒 Hours: M-F
8:00AM-5:00PM

NPI: 1760660336

🌐 Website: N/A

Credentials and/or certifications:

☐ Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

POWAY

BOULDER CREEK POST ACUTE

Provider ID: 276987

📍 12696 MONTE VISTA RD
POWAY, CA 92064

☎ Phone: (858) 487-6242

Fax: (858) 487-4282

☎ After Hours Phone: (858) 487-6242

Accepting New Patients: No

🕒 Hours: M-F
8:00AM-5:30PM

NPI: 1073902672

🌐 Website: <http://bouldercrekpa.com>

Credentials and/or certifications:

☐ Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)


I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

 *Accessibility: CONTACT PROVIDER*

POWAY HEALTHCARE CENTER

Provider ID: 171989

 15632 POMERADO RD
POWAY, CA 92064

 Phone: (858) 485-5153

Fax: (858) 485-7694

 After Hours Phone: (858)
485-5153

Accepting New Patients: No
NPI: 1407035512

 Website: <http://powaycare.com>

Credentials and/or
certifications:

 Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):


N


 *Accessibility: CONTACT PROVIDER*

THE VILLAS AT POWAY


Provider ID: 172642

 15615 POMERADO RD
POWAY, CA 92064

 Phone: (858) 613-4545

 After Hours Phone: (858)
613-4545

Accepting New Patients: No
NPI: 1619947090

 Website: www.palomarhealth.org/skilled-nursing/villa-pomerado

Credentials and/or
certifications:

 Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


SAN DIEGO

ACCESS TO INDEPENDENCE

Provider ID: 417267

 8885 RIO SAN DIEGO DR
STE 131


SAN DIEGO, CA 92108

 Phone: (619) 293-3500

Fax: (619) 704-2054

 After Hours Phone: (619)
293-3500

Accepting New Patients: No

 Hours: M-F
8:00AM-5:00PM

NPI: 1083039861

 Website: N/A

Credentials and/or

certifications:

 Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):


N

 *Accessibility: CONTACT PROVIDER*

ARROYO VISTA NURSING CTR

Provider ID: 172028


 3022 45TH ST
SAN DIEGO, CA 92105

 Phone: (619) 283-5855

Fax: (619) 284-6327

 After Hours Phone: (619)
283-5855

Accepting New Patients: No


 Hours: SU-SA
9:00AM-5:00PM

NPI: 1487640066

 Website: <http://arroyovistacare.com>

Credentials and/or
certifications:

 Site English Spoken: Y

 Site Languages(s) Spoken:
Mandarin, Spanish,
Vietnamese, Arabic,
Tagalog

Cultural Competency: N

American Sign Language (ASL):


N


 *Accessibility: CONTACT PROVIDER*

BALBOA NURSING AND REHAB CTR

Provider ID: 416840

 3520 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 291-5270


 After Hours Phone: (619)
291-5270

Accepting New Patients: No
NPI: 1578521274

 Website: <http://balboahc.com>

Credentials and/or
certifications:

 Site English Spoken: Y

 Site Languages(s) Spoken:
Mandarin, Spanish,
Tagalog, Vietnamese

Cultural Competency: N

American Sign Language (ASL):


N

 *Accessibility: CONTACT PROVIDER*

BRIGHTON PLACE SAN DIEGO

Provider ID: 402624

 1350 EUCLID AVE
SAN DIEGO, CA 92105


 Phone: (619) 263-2166

 After Hours Phone: (619)

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

263-2166
Accepting New Patients: No
NPI: 1346258274

 Website: N/A
Credentials and/or
certifications:


Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

CARMEL MOUNTAIN REHAB AND HEALTHCARE CTR


Provider ID: 171971

 11895 AVENUE OF
INDUSTRY
SAN DIEGO, CA 92128

 Phone: (858) 673-0101
Fax: (858) 673-8320

 After Hours Phone: (858)
673-0101


Accepting New Patients: No
NPI: 1083727093

 Website: <http://carmelmountain.net>

Credentials and/or
certifications:

Site English Spoken: Y
 Site Languages(s) Spoken:
Tagalog, Armenian,
Mandarin, Spanish, Russian,
Korean, Vietnamese


Cultural Competency: N
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

GOLDEN HILL POST ACUTE


Provider ID: 614821

 1201 34TH ST
SAN DIEGO, CA 92102

 Phone: (619) 232-2946
Fax: (619) 702-7358

 After Hours Phone: (619)
232-2946

Accepting New Patients: No
NPI: 1598229437

 Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish, Tagalog


Cultural Competency: N
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

HILLCREST HEIGHTS HEALTHCARE CENTER

Provider ID: 509489


 4033 6TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 297-4086
Fax: (619) 297-9238

 After Hours Phone: (619)
297-4086

Accepting New Patients: No
 Hours: M-F
8:00AM-5:00PM

NPI: 1558825067

 Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

JACOB HEALTH CARE CENTER LLC


Provider ID: 172617

 4075 54TH ST
SAN DIEGO, CA 92105

 Phone: (619) 582-5168
Fax: (619) 325-0194

 After Hours Phone: (619)
582-5168


Accepting New Patients: No
NPI: 1881684900

 Website: www.jacobhealthcare.com

Credentials and/or
certifications:

Site English Spoken: Y
 Site Languages(s) Spoken:
Tagalog, Spanish


Cultural Competency: N
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

MISSION HILLS POST ACUTE CARE

Provider ID: 339053

 3680 REYNARD WAY
SAN DIEGO, CA 92103

 Phone: (619) 297-4484
Fax: (855) 214-6992

 After Hours Phone: (619)
297-4484

Accepting New Patients: No
NPI: 1669875563


 Website: <http://missionhillspostacute.com>

Credentials and/or
certifications:

Site English Spoken: Y
 Site Languages(s) Spoken:
Tagalog, Spanish

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)


I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

Cultural Competency: N
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

RADY CHILDRENS CONVALESCENT HOSPITAL

Provider ID: 172200


 8022 BIRMINGHAM DR
SAN DIEGO, CA 92123

 *Phone: (858) 966-5833*

Fax: (858) 966-8558


 *After Hours Phone: (858) 966-5833*

Accepting New Patients: No
NPI: 1992881478

 *Website: www.rchsd.org*
Credentials and/or
certifications:

 *Site English Spoken: Y*
Cultural Competency: N


American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

REO VISTA HEALTHCARE CTR

Provider ID: 171993

 6061 BANBURY ST
SAN DIEGO, CA 92139

 *Phone: (619) 475-2211*

Fax: (619) 479-9126


 *After Hours Phone: (619) 475-2211*

Accepting New Patients: No
NPI: 1255499174

 *Website: http://reovista.com*

Credentials and/or
certifications:


 *Site English Spoken: Y*


 *Site Languages(s) Spoken: Tagalog, Spanish*
Cultural Competency: N
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

ST PAULS HEALTH CARE CENTER


Provider ID: 288531

 235 NUTMEG ST
SAN DIEGO, CA 92103

 *Phone: (619) 677-3895*

 *After Hours Phone: (619) 677-3895*

Accepting New Patients: No
NPI: 1972619104

 *Website: N/A*
Credentials and/or
certifications: CMS

 *Site English Spoken: Y*
Cultural Competency: N


American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

THE PAVILION AT OCEAN POINT


Provider ID: 262151

 3202 DUKE ST
SAN DIEGO, CA 92110


 *Phone: (619) 224-4141*

 *After Hours Phone: (619) 224-4141*

Accepting New Patients: No
NPI: 1538174990

 *Website: N/A*
Credentials and/or
certifications:


 *Site English Spoken: Y*

Cultural Competency: N
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

THE SPRINGS AT PACIFIC REGENT

Provider ID: 172008


 3884 NOBEL DR
SAN DIEGO, CA 92122

 *Phone: (858) 625-8700*

Fax: (858) 625-8777

 *After Hours Phone: (858) 625-8700*

Accepting New Patients: No
NPI: 1003198342

 *Website: N/A*
Credentials and/or
certifications:

 *Site English Spoken: Y*
Cultural Competency: N


American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

UNIVERSITY CARE CENTER

Provider ID: 172024


 5602 UNIVERSITY AVE
SAN DIEGO, CA 92105

 *Phone: (619) 583-1993*

Fax: (619) 501-3559

 *After Hours Phone: (619) 583-1993*

Accepting New Patients: No
NPI: 1871522672

 *Website: http://universitycarecenter.com*

Credentials and/or
certifications:

 *Site English Spoken: Y*

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

Site Languages(s) Spoken: Tagalog, Mandarin, Russian, Vietnamese, Farsi, Spanish

Cultural Competency: N
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

VILLA RANCHO BERNARDO CARE CENTER

Provider ID: 172009

15720 BERNARDO CENTER DR

SAN DIEGO, CA 92127

Phone: (858) 672-3900

Fax: (858) 672-9247

After Hours Phone: (858) 672-3900

Accepting New Patients: No
NPI: 1518063437

Website: www.villaranchobernardo.com

Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

WINDSOR GARDENS CONV AND REHAB OF GOLDEN HILL

Provider ID: 172012

1201 34TH ST

SAN DIEGO, CA 92102

Phone: (619) 232-2946

Fax: (310) 595-3529

After Hours Phone: (619) 232-2946

Accepting New Patients: No
NPI: 1811963028

Website: <https://windsorgoIdenhill.com>

Credentials and/or certifications:

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

SAN MARCOS

CARLO HOUSE

Provider ID: 662931

411 CARLO ST

SAN MARCOS, CA 92078

Phone: (760) 721-1706

Fax: (760) 721-9872

After Hours Phone: (760) 721-1706

Accepting New Patients: No
NPI: 1962488007

Website: N/A

Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

SANTEE

STANFORD COURT SKILLED NURSING AND REHAB CENTER

Provider ID: 171994

8778 CUYAMACA ST
SANTEE, CA 92071

Phone: (619) 449-5555

After Hours Phone: (619) 449-5555

Accepting New Patients: No

Hours: SU-SA
8:00AM-5:00PM

NPI: 1184628554

Website: www.lifegen.net/SanfordCourt/

Credentials and/or certifications:

Site English Spoken: Y

Site Languages(s) Spoken: Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

SPRING VALLEY

AMAYA SPRINGS HEALTH CARE CENTER

Provider ID: 420233

8625 LAMAR ST

SPRING VALLEY, CA 91977

Phone: (323) 326-6186

Fax: (619) 461-3575

After Hours Phone: (323) 326-6186

Accepting New Patients: No
NPI: 1518974542

Website: N/A

Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

N
Accessibility: CONTACT PROVIDER

BRIGHTON PLACE SPRING VALLEY

Provider ID: 417094
9009 CAMPO RD
SPRING VALLEY, CA 91977
Phone: (619) 460-2711
Fax: (619) 460-0451
After Hours Phone: (619) 460-2711
Accepting New Patients: No
NPI: 1780682021
Website: N/A
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER

MOUNT MIGUEL COVENANT VILLAGE HEALTH FAC

Provider ID: 171969
325 KEMPTON ST
SPRING VALLEY, CA 91977
Phone: (619) 931-1151
Fax: (224) 233-1397
After Hours Phone: (619) 931-1151
Accepting New Patients: No
Hours: SU-SA
8:00AM-5:00PM
NPI: 1649375403
Website: www.mountmiguelcovenantvillage.org
Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER

MOUNT MIGUEL COVENANT VILLAGE HEALTH FAC

Provider ID: 171969
325 KEMPTON ST
SPRING VALLEY, CA 91977
Phone: (619) 931-1151
Fax: (224) 233-1397
After Hours Phone: (619) 931-1151
Accepting New Patients: No
Hours: SU-SA
8:00AM-5:00PM
NPI: 1649375403

Website: covivingmountmiguel.org
Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER

VALLEY CENTER

AMREEN HOME

Provider ID: 658588
13873 OAKWOOD GLEN PL
VALLEY CENTER, CA 92082
Phone: (760) 751-9879
Fax: (760) 749-3019
After Hours Phone: (760) 751-9879
Accepting New Patients: No

NPI: 1700160405
Website: N/A
Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER

VISTA

ANZA HOUSE

Provider ID: 662920
1736 ANZA AVE
VISTA, CA 92084
Phone: (760) 721-1706
Fax: (760) 721-9872
After Hours Phone: (760) 721-1706

Accepting New Patients: No
NPI: 1962488007

Website: N/A
Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER


GRACE HOUSE

Provider ID: 662919
2507 HIBISCUS AVE
VISTA, CA 92081
Phone: (760) 721-1706
Fax: (760) 721-9872
After Hours Phone: (760) 721-1706
Accepting New Patients: No


D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

NPI: 1962488007


 Website: N/A
Credentials and/or
certifications:


Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

LA FUENTE POST ACUTE


Provider ID: 429590

 247 E BOBIER DR
VISTA, CA 92084


 Phone: (760) 945-3033

 After Hours Phone: (760)
945-3033


Accepting New Patients: No

 Hours: SU-SA
8:30AM-5:00PM

NPI: 1366802696

 Website: N/A
Credentials and/or
certifications:


Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


LIFE CARE CENTER OF VISTA

Provider ID: 171970

 304 N MELROSE DR
VISTA, CA 92083

 Phone: (760) 724-8222

Fax: (760) 941-4870


 After Hours Phone: (760)
724-8222

Accepting New Patients: No

 Hours: SU-SA

9:00AM-5:00PM

NPI: 1811942063

 Website: www.lcca.com
Credentials and/or
certifications:

Site English Spoken: Y
 Site Languages(s) Spoken:
Tagalog
Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

MARSHALL HOUSE

Provider ID: 662924


 758 S MELROSE DR
VISTA, CA 92081

 Phone: (760) 721-1706

Fax: (760) 721-9872

 After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1962488007

 Website: N/A
Credentials and/or
certifications:


Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

MONTGOMERY HOUSE

Provider ID: 662927


 1658 MONTGOMERY DR
VISTA, CA 92084

 Phone: (760) 721-1706

Fax: (760) 721-9872

 After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1962488007


 Website: N/A
Credentials and/or
certifications:


Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

ORIENTE HOUSE

Provider ID: 662928


 3081 ORIENTE DR
VISTA, CA 92084

 Phone: (760) 721-1706

Fax: (760) 721-9872

 After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1962488007


 Website: N/A
Credentials and/or
certifications:


Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

SAVA HOME

Provider ID: 669500

 263 AHMU TER
VISTA, CA 92084

 Phone: (760) 305-7052

Fax: (760) 509-4949

 After Hours Phone: (760)
305-7052

Accepting New Patients: No


 Hours: M-F

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)


8:00AM-5:00PM

NPI: 1962541177

 Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

SUSAN PARHAM HOUSING CORPORATION

Provider ID: 662929


 1658 ANZA AVE
VISTA, CA 92084

 Phone: (760) 721-1706

Fax: (760) 721-9872

 After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1093137762

 Website: N/A
Credentials and/or
certifications:


Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

VISTA HEALTHCARE CENTER

Provider ID: 171990


 247 E BOBIER DR
VISTA, CA 92084

 Phone: (760) 945-3033


Fax: (760) 724-3169

 After Hours Phone: (760)
945-3033

Accepting New Patients: No

 Hours: M-F
8:00AM-5:00PM

NPI: 1912189812

 Website: <http://astorhealth.com>

Credentials and/or
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

VISTA HOUSE

Provider ID: 662916

 1768 MONTE MAR RD
VISTA, CA 92084

 Phone: (760) 721-1706

Fax: (760) 721-9872


 After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1962488007

 Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

VISTA KNOLL SPECIALIZED CARE FACILITY

Provider ID: 172017


 2000 WESTWOOD RD
VISTA, CA 92083

 Phone: (760) 630-2273


Fax: (760) 630-0913

 After Hours Phone: (760)
630-2273

Accepting New Patients: No

 Hours: SU-SA
8:30AM-5:00PM

NPI: 1275533929

 Website: <http://vistaknoll.com>

Credentials and/or
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Korean, Tagalog,

Vietnamese, Spanish

Cultural Competency: N

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)


II. Servicios de apoyo en el hogar (IHSS) del condado

SAN DIEGO

AGING & INDEPENDENCE SERVICES

Specialty: Case Management

 5560 OVERLAND AVE
SAN DIEGO, CA 92123

 Phone: (858) 495-5885


License Number: 1710308986

Accessibility: CONTACT

PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: https://www.sandiegocounty.gov/content/sdc/hhsa/programs/ais/inhome_supportive_services.html

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

III. Servicios comunitarios para adultos (CBAS): servicios diurnos para adultos

CHULA VISTA

OPEN ARMS ADHC

Provider ID: 417307

301 E J ST

CHULA VISTA, CA 91910

Phone: (619) 420-1404

Fax: (619) 420-1408

After Hours Phone: (619) 420-1404

Accepting New Patients: No

Hours: M-F
7:00AM-3:00PM

License Number: 060002076

NPI: 1598882169

Accessibility: CONTACT PROVIDER

American Sign Language (ASL):
N

Language line interpreter services: N

Cultural Competency: N

Facility has access to skilled medical interpreters on site?: N

Interpreter Non-English

Languages: N

Website: <http://openarmsadhc.com>

EL CAJON

WESTERN ADHC

Provider ID: 417305

240 S MAGNOLIA AVE

EL CAJON, CA 92020

Phone: (619) 631-7222

Fax: (619) 631-9228

After Hours Phone: (619) 631-7222

Accepting New Patients: No

Site Language(s) Spoken: Spanish, Arabic, Tagalog,

Farsi

Hours: M-F 7:00AM-3:30PM
NPI: 1821125550

Accessibility: CONTACT PROVIDER

American Sign Language (ASL):
N

Language line interpreter services: Y

Cultural Competency: N

Facility has access to skilled medical interpreters on site?: N

Interpreter Non-English

Languages: Y

Website: <https://westernadhc.wordpress.com/>

MAGNOLIA ADULT DAY HEALTH CARE

Provider ID: 408541

490 N MAGNOLIA AVE

EL CAJON, CA 92020

Phone: (619) 444-1522

Fax: (619) 444-1516

After Hours Phone: (619) 444-1522

Accepting New Patients: No

Hours: M-F
8:00AM-4:00PM

License Number: 60000821

NPI: 1487864468

Accessibility: CONTACT PROVIDER

American Sign Language (ASL):
N

Language line interpreter services: N

Cultural Competency: N

Facility has access to skilled medical interpreters on site?: N

Interpreter Non-English

Languages: N

Website: <http://magnoliaadhc.com>

EL CAJON ADHC

Provider ID: 637126

854 JACKMAN ST

EL CAJON, CA 92020

Phone: (619) 328-2112

Fax: (619) 328-0069

After Hours Phone: (619) 328-2112

Accepting New Patients: No

Hours: SU-SA
9:00AM-3:00PM

License Number: 550008511

NPI: 1184207631

Accessibility: CONTACT PROVIDER

American Sign Language (ASL):
N

Language line interpreter services: N

Cultural Competency: N

Facility has access to skilled medical interpreters on site?: N

Interpreter Non-English

Languages: N

Website: N/A

LA MESA

GOLDEN LIFE ADHC

Provider ID: 619502

9158 FLETCHER PKWY

LA MESA, CA 91942

Phone: (619) 357-7753

Fax: (619) 439-6038



After Hours Phone: (619) 357-7753

Accepting New Patients: No

NPI: 1093921900




D5. Proveedores de apoyo y servicios a largo plazo (LTSS)



III. Servicios comunitarios para adultos (CBAS): servicios diurnos para adultos

 **Accessibility:** CONTACT PROVIDER
American Sign Language (ASL): N
Language line interpreter services: N
Cultural Competency: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: N
 **Website:** N/A

NATIONAL CITY




HORIZON CBAS

Provider ID: 642082
 1035 HARBISON AVE
NATIONAL CITY, CA 91950
 **Phone:** (619) 474-1822
Fax: (619) 474-1826
 **After Hours Phone:** (619) 474-1822
Accepting New Patients: No
License Number: 060000582
NPI: 1396476388


 **Accessibility:** CONTACT PROVIDER
American Sign Language (ASL): N
Language line interpreter services: N
Cultural Competency: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: N
 **Website:** N/A

POWAY

POWAY ADULT DAY HEALTH CARE CENTER






Provider ID: 404183
 12250 CROSTHWAITE CIR
POWAY, CA 92064
 **Phone:** (858) 748-5044
Fax: (858) 748-5405
 **After Hours Phone:** (858) 748-5044
Accepting New Patients: No
License Number: 60000822
NPI: 1568659977
 **Accessibility:** CONTACT PROVIDER

American Sign Language (ASL): N

Language line interpreter services: N
Cultural Competency: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: N
 **Website:** N/A

SAN DIEGO







SAN DIEGO FAMILY CIRCLE ADULT DAY HEALTH CARE

Provider ID: 539018
 4428 CONVOY ST STE 288
SAN DIEGO, CA 92111
 **Phone:** (858) 244-4555
Fax: (858) 724-3302
 **After Hours Phone:** (858) 244-4555
Accepting New Patients: No
 **Site Language(s) Spoken:** Vietnamese, Mandarin, Spanish
 **Hours:** M-F 8:00AM-5:00PM

License Number: 550005837
NPI: 1396201828

 **Accessibility:** CONTACT PROVIDER
American Sign Language (ASL): N
Language line interpreter services: Y
Cultural Competency: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: Y
 **Website:** Sandiegofamilycircle.com

LOVING CARE ADHC

Provider ID: 419961
 2565 CAMINO DEL RIO S
STE 201
SAN DIEGO, CA 92108
 **Phone:** (619) 718-9777
Fax: (619) 569-2855
 **After Hours Phone:** (619) 718-9777
Accepting New Patients: No
 **Hours:** SU-SA 8:30AM-4:00PM
NPI: 1346455961
 **Accessibility:** CONTACT PROVIDER
American Sign Language (ASL): N
Language line interpreter services: N
Cultural Competency: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: N
 **Website:** www.lovingcaread

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

III. Servicios comunitarios para adultos (CBAS): servicios diurnos para adultos


hc.com


 *Accessibility: CONTACT PROVIDER*

CASA PACIFICA ADHCC

Provider ID: 417303

 1424 30TH ST STE C
SAN DIEGO, CA 92154

 *Phone: (619) 424-8181*

 *After Hours Phone: (619) 424-8181*

Accepting New Patients: No

NPI: 1609920305

 *Accessibility: CONTACT PROVIDER*

American Sign Language (ASL):

N

Language line interpreter

services: N

Cultural Competency: N

Facility has access to skilled

medical interpreters on site?: N

Interpreter Non-English

Languages: N

 *Website: www.casa-pacific
a.com*

American Sign Language (ASL):

N

*Language line interpreter
services: N*


Cultural Competency: N

Facility has access to skilled

medical interpreters on site?: N

Interpreter Non-English

Languages: N

 *Website: www.americaread
hc.com*

SAN MARCOS


AMERICARE ADULT DAY

HEALTH CARE CENTER


Provider ID: 420060

 340 RANCHEROS DR STE
196


SAN MARCOS, CA 92069

 *Phone: (760) 682-2424*

Fax: (760) 471-5104

 *After Hours Phone: (760) 682-2424*

Accepting New Patients: No

 *Hours: 24 Hours / 7
days/week*

License Number: 060000832

NPI: 1528271186

D6. Directorio de salud mental

ALPINE

KHALEEL, AMMAR

Provider Gender: Male

License Number: LCS110302

NPI: 1841744208

Provider English Spoken: Y

Provider Language(s) Spoken:

Arabic

Cultural Competency: N

AMMAR KHALEEL

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

TORRES, RANDALL

Provider Gender: Male

License Number: PSY31823

NPI: 1871696435

Provider English Spoken: Y

Cultural Competency: N

RANDALL P TORRES

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 12\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CHULA VISTA

BAYLON, ALDO

Provider Gender: Male

License Number: PSY29904

NPI: 1649429150

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

ALDO BAYLON

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 14\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 8:00AM-4:00PM

CASTLEBERRY, DANI

Provider Gender: Female

License Number: LCS95022

NPI: 1053706853

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

DANI E CASTLEBERRY

780 BAY BLVD STE 200
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 240-7825

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

CELAYA, PATRICIA

Provider Gender: Female

License Number: PSY33233

NPI: 1952656902

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N







PATRICIA E CELAYA

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184








D6. Directorio de salud mental

 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-8:00PM SA 8:00AM-4:00PM

GALLO, LINDA

Provider Gender: Female
License Number: PSY27375
NPI: 1427773621
Provider English Spoken: Y
Cultural Competency: N






LINDA C GALLO

 780 BAY BLVD STE 200
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (619) 240-7852
 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

GOULD, HILARY

Provider Gender: Female
License Number: PSY31088
NPI: 1104297696
Provider English Spoken: Y
Cultural Competency: N

HILARY GOULD

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (619) 271-0260
 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 10:00AM-4:00PM M-F 8:30AM-5:30PM SA 8:00AM-2:30PM

JUAREZ, AMERICA

Provider Gender: Female
License Number: LCS92516
NPI: 1386281541
Provider English Spoken: Y
Cultural Competency: N

AMERICA P JUAREZ

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (619) 425-1184
 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y

TDD: U

Min/Max Age: 5\None









American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

KURZ, TROY

Provider Gender: Male
License Number: A157190
NPI: 1154862357
Provider English Spoken: Y
Cultural Competency: N

TROY L KURZ

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (619) 425-6941
 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-8:00PM SA 8:00AM-4:00PM

MALAK, LAWRENCE

Provider Gender: Male
License Number: A115345
NPI: 1467773028
Provider English Spoken: Y
Cultural Competency: N

D6. Directorio de salud mental

LAWRENCE T MALAK

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MARTINEZ, STEPHANIE

Provider Gender: Female

License Number: A152787

NPI: 1699126367

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

STEPHANIE MARTINEZ

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-4:00PM

M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

SHIELDS, SEBASTIAN

Provider Gender: Male

License Number: MFC124495

NPI: 1558895342

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

SEBASTIAN L SHIELDS

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

TROYER, EMILY

Provider Gender: Female

License Number: A149101

NPI: 1326484437

Provider English Spoken: Y

Cultural Competency: N

EMILY A TROYER

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 8:00AM-4:00PM

WIJAYARATNE, IMANIE

Provider Gender: Female

License Number: PSY25044

NPI: 1932358355

Provider English Spoken: Y

Cultural Competency: N

IMANIE S WIJAYARATNE

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 245-1184

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 5\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

D6. Directorio de salud mental

EL CAJON

ARAIZA, ERNESTINA

Provider Gender: Female
License Number: PSY32549
NPI: 1568608636
Provider English Spoken: Y
Cultural Competency: N
ERNESTINA ARAIZA

875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 785-3356
After Hours Phone: (619)
662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

ARNOLD, REBECCA

Provider Gender: Female
License Number: MFC95778
NPI: 1225580350
Provider English Spoken: Y
Cultural Competency: N
REBECCA L ARNOLD

855 E MADISON AVE
EL CAJON, CA 92020
Phone: (619) 270-3600
Fax: (360) 462-2746
After Hours Phone: (619)
270-3600
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:

Japanese, Spanish, Italian,
Chinese, Farsi, Arabic,
Mandarin

TDD: U
Min/Max Age: 18\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM

ARNOLD, REBECCA

Provider Gender: Female
License Number: MFC95778
NPI: 1225580350
Provider English Spoken: Y
Cultural Competency: N
REBECCA L ARNOLD

855 E MADISON AVE
EL CAJON, CA 92020
Phone: (619) 270-3600
Fax: (360) 462-2746
After Hours Phone: (619)
270-3600
Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Japanese, Spanish, Italian,
Chinese, Farsi, Arabic,
Mandarin

TDD: U
Min/Max Age: 4\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM

CASEY, SHANNON

Provider Gender: Female
License Number: PSY31889
NPI: 1548873755
Provider English Spoken: Y
Provider Language(s) Spoken:
Sign Language





Cultural Competency: N
SHANNON K CASEY
215 W MADISON AVE
EL CAJON, CA 92020
Phone: (760) 737-6935
Fax: (760) 741-2782
After Hours Phone: (760)
737-6935
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
9:00AM-7:00PM

CASEY, SHANNON

Provider Gender: Female
License Number: PSY31889
NPI: 1548873755
Provider English Spoken: Y
Provider Language(s) Spoken:
Sign Language

Cultural Competency: N
SHANNON K CASEY
215 W MADISON AVE
EL CAJON, CA 92020
Phone: (760) 737-6935
Fax: (760) 741-2782
After Hours Phone: (760)
737-6935

D6. Directorio de salud mental







 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-7:00PM

CRUZ, GUADALUPE

Provider Gender: Male
License Number: LCS101900
NPI: 1649727942
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: N

GUADALUPE A CRUZ

 855 E MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 440-2751
Fax: (360) 462-2746
 After Hours Phone: (619)
440-2751
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER







FRAGOSO, DOMINIQUE

Provider Gender: Female
License Number: LCS12601
NPI: 1518521830

Provider English Spoken: Y







Cultural Competency: N

DOMINIQUE C FRAGOSO

 215 W MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 667-6125
Fax: (619) 590-9036
 After Hours Phone: (619)
667-6125
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

GUARDADO-SOTO, RAQUEL

Provider Gender: Female
License Number: PSY26883
NPI: 1194999276
Provider English Spoken: Y
Cultural Competency: N
RAQUEL GUARDADO-SOTO









 855 E MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 440-2751
Fax: (360) 462-2746
 After Hours Phone: (619)
440-2751
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 13\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

MANUEL, FRANCESCA

Provider Gender: Female
License Number: LCS107210
NPI: 1275097081

Provider English Spoken: Y
Cultural Competency: N

FRANCESCA A MANUEL


 215 W MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 667-6125
Fax: (619) 590-9036
 After Hours Phone: (619)
667-6125
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

MAXWELL-JUNGE, MELISSA


Provider Gender: Female
License Number: LCS90791
NPI: 1275182826

Provider English Spoken: Y
Cultural Competency: N

MELISSA K MAXWELL-JUNGE


 215 W MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 667-6125
Fax: (619) 590-9036
 After Hours Phone: (619)
667-6125
 Website: N/A
Accepting New Patients: Yes

D6. Directorio de salud mental

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 18\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

POSTLETHWAITE, ALEJANDRA

Provider Gender: Female

License Number: A88938

NPI: 1750566915


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ALEJANDRA POSTLETHWAITE

 855 E MADISON AVE
EL CAJON, CA 92020


 *Phone: (619) 440-2751*

Fax: (858) 633-4692

 *After Hours Phone: (619)*
440-2751


 *Website: N/A*

Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

SADDA, REEM

Provider Gender: Female

License Number: A163129

NPI: 1871921833


Provider English Spoken: Y


Provider Language(s) Spoken:
Arabic

Cultural Competency: N

REEM J SADDA


 875 EL CAJON BLVD
EL CAJON, CA 92020

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)*
662-4100

 *Website: N/A*


Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 18\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

WEAVER, AMANDA

Provider Gender: Female

License Number: MFC105361


NPI: 1174266423

Provider English Spoken: Y


Cultural Competency: N

AMANDA R WEAVER

 875 EL CAJON BLVD
EL CAJON, CA 92020

 *Phone: (619) 662-4100*


Fax: (619) 205-6305

 *After Hours Phone: (619)*
662-4100

 *Website: N/A*

Accepting New Patients: Yes

 *Site English Spoken: Y*

 *Site Languages(s) Spoken:*
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

WHEELER, KIM

Provider Gender: Female

License Number: PSY34237


NPI: 1700577434

Provider English Spoken: Y

Cultural Competency: N

KIM N WHEELER

 875 EL CAJON BLVD
EL CAJON, CA 92020


 *Phone: (619) 662-4100*

Fax: (619) 785-3356

 *After Hours Phone: (619)*
662-4100

 *Website: N/A*


Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 11\None

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

ZONA, EMILY

Provider Gender: Female

License Number: MFC144893


NPI: 1457876146

Provider English Spoken: Y

Cultural Competency: N

EMILY E ZONA

 855 E MADISON AVE
EL CAJON, CA 92020

 *Phone: (619) 440-2751*

Fax: (360) 462-2746


 *After Hours Phone: (619)*
440-2751

 *Website: N/A*

Accepting New Patients: Yes

 *Site English Spoken: Y*


D6. Directorio de salud mental


 *Site Languages(s) Spoken:* Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility:* CONTACT PROVIDER

 *Hours:* M-F
8:00AM-5:00PM

ENCINITAS

GARCIA, ROSEMARIE

Provider Gender: Female

License Number: MFC123590


NPI: 1710410980

Provider English Spoken: Y

Cultural Competency: N

ROSEMARIE C GARCIA

 1130 2ND ST
ENCINITAS, CA 92024

 *Phone:* (760) 736-6767


Fax: (760) 736-6744

 *After Hours Phone:* (760)
736-6767

 *Website:* N/A

Accepting New Patients: Yes


 *Site English Spoken:* Y


 *Site Languages(s) Spoken:* Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility:* CONTACT PROVIDER

 *Hours:* M-F
8:00AM-5:00PM

GOMEZ, JUANITA

Provider Gender: Female

License Number: PSY27439

NPI: 1790915759

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

JUANITA GOMEZ

 1505 ENCINITAS BLVD
ENCINITAS, CA 92024

 *Phone:* (800) 926-8273

Fax: (888) 539-8781

 *After Hours Phone:* (800)
926-8273

 *Website:* N/A

Accepting New Patients: Yes

 *Site English Spoken:* Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility:* CONTACT PROVIDER

LOPEZ, JOANNA

Provider Gender: Female

License Number: MFC50381


NPI: 1275664385

Provider English Spoken: Y

Cultural Competency: N

JOANNA M LOPEZ

 1130 2ND ST
ENCINITAS, CA 92024

 *Phone:* (760) 736-6767

Fax: (760) 736-6744

 *After Hours Phone:* (760)
736-6767

 *Website:* N/A


Accepting New Patients: Yes


 *Site English Spoken:* Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility:* CONTACT PROVIDER

 *Hours:* M-F
8:00AM-5:00PM

ESCONDIDO

ARLINGHAUS, RENE

Provider Gender: Female

License Number: LCS80909


NPI: 1568973964

Provider English Spoken: Y

Cultural Competency: N

RENE M ARLINGHAUS

 704 E GRAND AVE
ESCONDIDO, CA 92025


 *Phone:* (619) 662-4100

Fax: (619) 662-4196

 *After Hours Phone:* (619)
662-4100


 *Website:* N/A


Accepting New Patients: Yes

 *Site English Spoken:* Y
TDD: U

Min/Max Age: 18\None

American Sign Language (ASL): N

 *Accessibility:* CONTACT PROVIDER

 *Hours:* M-F
8:00AM-5:00PM

BECERRA, GABRIEL

Provider Gender: Male

License Number: LCS114743

NPI: 1205313319

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

D6. Directorio de salud mental

Cultural Competency: N

GABRIEL CELESTINO

BECERRA

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8300

Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 7:00AM-7:30PM
TU 7:00AM-4:30PM
W 7:00AM-7:30PM
TH-F 7:00AM-4:30PM

BELINSKY, MARIA

Provider Gender: Female

License Number: LCS69175

NPI: 1760867824

Provider English Spoken: Y

*Provider Language(s) Spoken:
Spanish*

Cultural Competency: N

MARIA T BELINSKY

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Phone: (760) 737-6900

Fax: (360) 462-2748

After Hours Phone: (760)
737-6900

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

Accessibility: CONTACT
PROVIDER

BELINSKY, MARIA

Provider Gender: Female

License Number: LCS69175

NPI: 1760867824

Provider English Spoken: Y

*Provider Language(s) Spoken:
Spanish*

Cultural Competency: N

MARIA T BELINSKY

460 N ELM ST
ESCONDIDO, CA 92025

Phone: (760) 520-8100

Fax: (360) 462-2745

After Hours Phone: (760)
520-8100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

BELINSKY, MARIA

Provider Gender: Female

License Number: LCS69175

NPI: 1760867824

Provider English Spoken: Y

*Provider Language(s) Spoken:
Spanish*

Cultural Competency: N

MARIA T BELINSKY

426 N DATE ST

ESCONDIDO, CA 92025

Phone: (760) 690-5900
Fax: (858) 633-4693

After Hours Phone: (760)
690-5900

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 9:00AM-4:00PM
W-F 9:00AM-4:00PM

BERNABE, NARAE

Provider Gender: Female

License Number: MFC95046

NPI: 1942633490

Provider English Spoken: Y

Cultural Competency: N

NARAE L BERNABE

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8300

Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 18\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

D6. Directorio de salud mental

8:00AM-5:00PM

BERNABE, NARAE

Provider Gender: Female
License Number: MFC95046
NPI: 1942633490
Provider English Spoken: Y
Cultural Competency: N

NARAE L BERNABE

425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760) 520-8300
Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken: Spanish

TDD: U

Min/Max Age: 18\None

American Sign Language (ASL): Spanish

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

CARLTON-PENN, CORNELIA

Provider Gender: Female
License Number: PSY14310
NPI: 1891720611
Provider English Spoken: Y
Provider Language(s) Spoken: German
Cultural Competency: N

CORNELIA J CARLTON-PENN

425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (858) 633-4698

After Hours Phone: (760) 520-8340

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken: Spanish

TDD: U

Min/Max Age: 18\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

CASTILLO, TIFFANY

Provider Gender: Female
License Number: A158480
NPI: 1114459252
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

TIFFANY A CASTILLO

425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (360) 462-2752

After Hours Phone: (760) 520-8340

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

CASTILLO, TIFFANY

Provider Gender: Female
License Number: A158480
NPI: 1114459252
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

TIFFANY A CASTILLO

425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (360) 462-2752

After Hours Phone: (760) 520-8340

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

CHRISTENSEN, PATTI


Provider Gender: Female
License Number: LCS24129
NPI: 1245434745
Provider English Spoken: Y
Cultural Competency: N

PATTI J CHRISTENSEN

1002 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (760) 741-2660

D6. Directorio de salud mental

 After Hours Phone: (760) 741-2660

 Website: N/A


Accepting New Patients: Yes


Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:30AM-5:00PM

DOCKERY, LEE

Provider Gender: Male

License Number: A178136


NPI: 1225526320

Provider English Spoken: Y

Cultural Competency: N


LEE M DOCKERY

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8300

Fax: (858) 633-4698

 After Hours Phone: (760) 520-8300

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

ESTRADA PATINO, ANGELA

Provider Gender: Female

License Number: PSY31789

NPI: 1629339015


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ANGELA J ESTRADA PATINO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

Fax: (360) 462-2745

 After Hours Phone: (760) 520-8100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 14\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

SA 8:00AM-0:00PM

FU, KATHERINE

Provider Gender: Female

License Number: A187562


NPI: 1356877807

Provider English Spoken: Y

Cultural Competency: N


KATHERINE FU

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

Fax: (619) 662-4196

 After Hours Phone: (619) 662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

GILL, MANPREET

Provider Gender: Male

License Number: A180790


NPI: 1144875535

Provider English Spoken: Y

Cultural Competency: N


MANPREET GILL

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8300

Fax: (858) 633-4698

 After Hours Phone: (760) 520-8300

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

GILL, MANPREET

Provider Gender: Male

License Number: A180790

D6. Directorio de salud mental

NPI: 1144875535

Provider English Spoken: Y

Cultural Competency: N

MANPREET GILL

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8300

Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

GUZZO, RICHARD

Provider Gender: Male

License Number: LCS8288

NPI: 1497898431

Provider English Spoken: Y

Cultural Competency: N

RICHARD L GUZZO

1002 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (760) 741-2660

After Hours Phone: (760)
741-2660

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

HARRIS, LAURA

Provider Gender: Female

License Number: LCS18214

NPI: 1255640280

Provider English Spoken: Y

Cultural Competency: N

LAURA S HARRIS

1002 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (760) 741-2660

Fax: (760) 741-2642

After Hours Phone: (760)
741-2660

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

KULKARNI, NISHAT

Provider Gender: Male

License Number: A187134

NPI: 1669034732

Provider English Spoken: Y

Cultural Competency: N

NISHAT KULKARNI

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8300

Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

MAGOS, DANIEL

Provider Gender: Male

License Number: LCS88270

NPI: 1578983664

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

DANIEL K MAGOS

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8300

Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

MARTINEZ, NORAYMA

D6. Directorio de salud mental

Provider Gender: Female
License Number: LCS100019
NPI: 1669808267

Provider English Spoken: Y
Cultural Competency: N
NORAYMA MARTINEZ

📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025

☎ Phone: (760) 737-6900

Fax: (360) 462-2748

📞 After Hours Phone: (760)
737-6900

🌐 Website: N/A

Accepting New Patients: Yes

📄 Site English Spoken: Y

📄 Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

MIRAMONTES, DIANA

Provider Gender: Female
License Number: MFC105241
NPI: 1598099962

Provider English Spoken: Y
Cultural Competency: N
DIANA A MIRAMONTES

📍 460 N ELM ST
ESCONDIDO, CA 92025

☎ Phone: (442) 286-7916

Fax: (760) 741-2782

📞 After Hours Phone: (442)
286-7916

🌐 Website: N/A

Accepting New Patients: Yes

📄 Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

MIRAMONTES, DIANA

Provider Gender: Female
License Number: MFC105241
NPI: 1598099962

Provider English Spoken: Y
Cultural Competency: N
DIANA A MIRAMONTES

📍 460 N ELM ST
ESCONDIDO, CA 92025

☎ Phone: (442) 286-7916

Fax: (760) 741-2782

📞 After Hours Phone: (442)
286-7916

🌐 Website: N/A

Accepting New Patients: Yes

📄 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

POSTLETHWAITE, ALEJANDRA

Provider Gender: Female
License Number: A88938
NPI: 1750566915

Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: N
ALEJANDRA POSTLETHWAITE

📍 425 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8300

Fax: (858) 633-4698

📞 After Hours Phone: (760)
520-8300

🌐 Website: N/A

Accepting New Patients: Yes

📄 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER

PRASAD, AMITHA

Provider Gender: Female
License Number: A158657
NPI: 1821436882

Provider English Spoken: Y
Cultural Competency: N
AMITHA, PRASAD

📍 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

☎ Phone: (760) 294-9270

Fax: (760) 294-9268

📞 After Hours Phone: (760)
294-9270

🌐 Website: N/A

Accepting New Patients: Yes

📄 Site English Spoken: Y
TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER




🕒 Hours: M-F

D6. Directorio de salud mental

8:00AM-5:00PM

PRATHER, ALLYSON

Provider Gender: Female
License Number: MFC45441
NPI: 1083725006
Provider English Spoken: Y
Cultural Competency: N
ALLYSON M PRATHER

 425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8300
Fax: (858) 633-4698
 After Hours Phone: (760)
520-8300
 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y
 Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None




American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

PRATHER, ALLYSON

Provider Gender: Female
License Number: MFC45441
NPI: 1083725006
Provider English Spoken: Y
Cultural Competency: N
ALLYSON M PRATHER

 425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8300
Fax: (858) 633-4698
 After Hours Phone: (760)
520-8300

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y
 Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM



RIOS, SIERRA

Provider Gender: Female
License Number: LCS91970
NPI: 1942746128

Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: N

SIERRA K RIOS

 425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8340
Fax: (360) 462-2752

 After Hours Phone: (760)
520-8340

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y
 Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

ROBLEDO, DAMIAN

Provider Gender: Male
License Number: LCS66152
NPI: 1376831289
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: N
DAMIAN ROBLEDO

 425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8340
Fax: (360) 462-2752

 After Hours Phone: (760)
520-8340

 Website: N/A


Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 7:00AM-7:30PM
TU 7:00AM-4:30PM
W 7:00AM-7:30PM
TH-F 7:00AM-4:30PM



RODARTE, GABRIEL


Provider Gender: Male
License Number: A87906
NPI: 1184649212
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish


Cultural Competency: N
GABRIEL RODARTE

 425 N DATE ST
ESCONDIDO, CA 92025


D6. Directorio de salud mental

 Phone: (760) 520-8340
 Fax: (858) 633-4698

 After Hours Phone: (760) 520-8340

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

STONE, CALVIN

Provider Gender: Male

License Number: 20A18127



NPI: 1275995870

Provider English Spoken: Y

Cultural Competency: N

CALVIN T STONE


 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8300
 Fax: (858) 633-4698

 After Hours Phone: (760) 520-8300


 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

STREET, KYLE

Provider Gender: Male

License Number: 20A21304



NPI: 1457912131

Provider English Spoken: Y

Cultural Competency: N

KYLE A STREET

 425 N DATE ST
ESCONDIDO, CA 92025


 Phone: (760) 520-8300
 Fax: (858) 633-4698

 After Hours Phone: (760) 520-8300

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

SUOZZO, JOSEPH

Provider Gender: Male

License Number: PSY18393



NPI: 1821013228

Provider English Spoken: Y

Cultural Competency: N

JOSEPH M SUOZZO


 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8340
 Fax: (858) 633-4698

 After Hours Phone: (760) 520-8340

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

TEETER-WITT, ALYSSA

Provider Gender: Female

License Number: PSY31075



NPI: 1932308442

Provider English Spoken: Y

Cultural Competency: N

ALYSSA TEETER-WITT


 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8300
 Fax: (858) 633-4698

 After Hours Phone: (760) 520-8300


 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

TEETER-WITT, ALYSSA

Provider Gender: Female

License Number: PSY31075



NPI: 1932308442

Provider English Spoken: Y

Cultural Competency: N




ALYSSA TEETER-WITT

 426 N DATE ST
ESCONDIDO, CA 92025






 Phone: (760) 690-5900
 Fax: (858) 633-4693

 After Hours Phone: (760) 690-5900

D6. Directorio de salud mental




 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

THOMAS, PAULA

Provider Gender: Female
License Number: LCS29517
NPI: 1821389966
Provider English Spoken: Y
Cultural Competency: N
PAULA M THOMAS
 425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8340
Fax: (360) 462-2752
 After Hours Phone: (760)
520-8340
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish, German, French,
Cappadocian Greek, Hindi
TDD: U
Min/Max Age: 18\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM



TIZNADO, MONICA

Provider Gender: Female
License Number: MFC81074
NPI: 1497895197







Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
MONICA M TIZNADO
 425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8300
Fax: (858) 633-4698
 After Hours Phone: (760)
520-8300
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

TIZNADO, MONICA

Provider Gender: Female
License Number: MFC81074
NPI: 1497895197
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
MONICA M TIZNADO
 425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8300
Fax: (858) 633-4698
 After Hours Phone: (760)
520-8300
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

VALLEZ-BARLAM, ANDREA

Provider Gender: Female
License Number: PSY9962
NPI: 1710902143
Provider English Spoken: Y
Provider Language(s) Spoken:
German, Spanish
Cultural Competency: N
ANDREA VALLEZ-BARLAM
 426 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 690-5900
Fax: (858) 633-4693
 After Hours Phone: (760)
690-5900
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

VALLEZ-BARLAM, ANDREA

Provider Gender: Female
License Number: PSY9962
NPI: 1710902143
Provider English Spoken: Y
Provider Language(s) Spoken:
German, Spanish
Cultural Competency: N

D6. Directorio de salud mental

ANDREA VALLEZ-BARLAM
488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Phone: (760) 466-9800
Fax: (858) 633-4693
After Hours Phone: (760)
466-9800
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
German, Spanish
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM

VAQUERO, JUANA

Provider Gender: Female
License Number: PSY28364
NPI: 1023459708
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish, Spanish
Cultural Competency: N

JUANA VAQUERO

425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760)
520-8300
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

VENNAM, VAMSI KRISHNA

Provider Gender: Male
License Number: 20A19415
NPI: 1679070569
Provider English Spoken: Y
Cultural Competency: N
VAMSI KRISHNA K VENNAM
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760)
520-8300
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM

WOODWORTH, JENNIFER

Provider Gender: Female
License Number: PSY26963
NPI: 1639362494
Provider English Spoken: Y
Cultural Competency: N
JENNIFER WOODWORTH
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (858) 633-4698

After Hours Phone: (760)
520-8340
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

FALLBROOK

GILROY, LAURA

Provider Gender: Female
License Number: LCS27123
NPI: 1437427978
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
LAURA L GILROY

1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4720
Fax: (760) 457-4700
After Hours Phone: (760)
451-4720
Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
TDD: U
Min/Max Age: 7\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

MAGEE, ANNA

Provider Gender: Female

D6. Directorio de salud mental

License Number: LCS107407

NPI: 1194234609

Provider English Spoken: Y

Cultural Competency: N

ANNA M MAGEE

1328 S MISSION RD
FALLBROOK, CA 92028

Phone: (760) 451-4720

Fax: (760) 457-4700

After Hours Phone: (760)
451-4720

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 5\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

MCAULEY, ROBERT

Provider Gender: Male

License Number: G23317

NPI: 1194881888

Provider English Spoken: Y

Cultural Competency: N

ROBERT A MCAULEY

1328 S MISSION RD
FALLBROOK, CA 92028

Phone: (760) 451-4730

Fax: (760) 457-4700

After Hours Phone: (760)
451-4730

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 12\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

MILES, RENEE

Provider Gender: Female

License Number: LCS70204

NPI: 1053763623

Provider English Spoken: Y

Cultural Competency: N

RENEE S MILES

1328 S MISSION RD
FALLBROOK, CA 92028

Phone: (760) 451-4720

Fax: (760) 457-4700

After Hours Phone: (760)
451-4720

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

RODARTE, GABRIEL

Provider Gender: Male

License Number: A87906

NPI: 1184649212

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

GABRIEL RODARTE

1328 S MISSION RD
FALLBROOK, CA 92028

Phone: (760) 541-4730

Fax: (760) 457-4700

After Hours Phone: (760)

541-4730

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

IMPERIAL BEACH

GONZALEZ, CLAUDIA

Provider Gender: Female

License Number: LCS100328

NPI: 1770055543

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

CLAUDIA GONZALEZ

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)
429-3733

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

LA JOLLA

BAILIS, JESSICA

Provider Gender: Female

D6. Directorio de salud mental

License Number: PSY27537

NPI: 1760739049

Provider English Spoken: Y

Cultural Competency: N

JESSICA R BAILIS

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

BOOTH, CHRISTOPHER

Provider Gender: Male

License Number: PSY26073

NPI: 1568893162

Provider English Spoken: Y

Cultural Competency: N

CHRISTOPHER R BOOTH

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM

BOOTH, CHRISTOPHER

Provider Gender: Male

License Number: PSY26073

NPI: 1568893162

Provider English Spoken: Y

Cultural Competency: N

CHRISTOPHER R BOOTH

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

BOUTELLE, KERRI

Provider Gender: Male

License Number: PSY21823

NPI: 1780620906

Provider English Spoken: Y

Cultural Competency: N

KERRI N BOUTELLE

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

BOUTELLE, KERRI

Provider Gender: Male

License Number: PSY21823

NPI: 1780620906

Provider English Spoken: Y

Cultural Competency: N

KERRI N BOUTELLE

3344 N TORREY PINES CT
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

BOUTELLE, KERRI

Provider Gender: Male

License Number: PSY21823

NPI: 1780620906

Provider English Spoken: Y


Cultural Competency: N


KERRI N BOUTELLE

D6. Directorio de salud mental

 8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037

 Phone: (858) 246-1654

 After Hours Phone: (858)
246-1654

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

CHESHER, NICHOLAS

Provider Gender: Male

License Number: PSY29290


NPI: 1124539697

Provider English Spoken: Y

Cultural Competency: N

NICHOLAS J CHESHER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

CRANDAL, BRENT

Provider Gender: Male

License Number: PSY26294

NPI: 1588739452


Provider English Spoken: Y

Cultural Competency: N

BRENT R CRANDAL

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8372

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

DUARTE, KRISTEN

Provider Gender: Female

License Number: PSY31227


NPI: 1093119364


Provider English Spoken: Y

Cultural Competency: N

KRISTEN L DUARTE

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

DUARTE, KRISTEN

Provider Gender: Female

License Number: PSY31227

NPI: 1093119364


Provider English Spoken: Y


Cultural Competency: N

KRISTEN L DUARTE

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

EICHEN, DAWN

Provider Gender: Female

License Number: PSY27823

NPI: 1861043366

Provider English Spoken: Y







Cultural Competency: N

DAWN M EICHEN

 8950 VILLA LA JOLLA DR
STE C212








LA JOLLA, CA 92037

D6. Directorio de salud mental






 Phone: (858) 246-1654
Fax: (858) 246-3181
 After Hours Phone: (858) 246-1654
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM


EICHEN, DAWN

Provider Gender: Female
License Number: PSY27823
NPI: 1861043366
Provider English Spoken: Y
Cultural Competency: N
DAWN M EICHEN

 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

EICHEN, DAWN


Provider Gender: Female
License Number: PSY27823
NPI: 1861043366
Provider English Spoken: Y
Cultural Competency: N
DAWN M EICHEN
 3344 N TORREY PINES CT
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER



ELLEGE, LINDSAY




Provider Gender: Female
License Number: LCS96136
NPI: 1619428828
Provider English Spoken: Y
Cultural Competency: N
LINDSAY E ELLEGE



 8950 VILLA LA JOLLA DR
STE 101
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FINN, DAPHNA



Provider Gender: Female
License Number: A152291
NPI: 1639522725
Provider English Spoken: Y
Cultural Competency: N
DAPHNA M FINN
 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

HUEGE, STEVEN

Provider Gender: Male
License Number: C141122
NPI: 1598716367
Provider English Spoken: Y
Cultural Competency: N
STEVEN F HUEGE

 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
 Phone: (800) 926-8273

D6. Directorio de salud mental

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

🌐 Website: N/A

Accepting New Patients: Yes

🗨 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

HUEGE, STEVEN

Provider Gender: Male

License Number: C141122

NPI: 1598716367

Provider English Spoken: Y

Cultural Competency: N

STEVEN F HUEGE

📍 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

🌐 Website: N/A

Accepting New Patients: Yes

🗨 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

KHAFAJA, MOHAMAD

Provider Gender: Male

License Number: A115892

NPI: 1780867119

Provider English Spoken: Y

Provider Language(s) Spoken:
Arabic

Cultural Competency: N

MOHAMAD H KHAFAJA

📍 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

🌐 Website: N/A

Accepting New Patients: Yes

🗨 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

LASSWELL, EVE

Provider Gender: Female

License Number: PSY30220

NPI: 1013483635

Provider English Spoken: Y

Cultural Competency: N

EVE N LASSWELL

📍 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

🌐 Website: N/A

Accepting New Patients: Yes

🗨 Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

LEDBETTER, ALEX

Provider Gender: Male

License Number: 20A20454

NPI: 1073017315

Provider English Spoken: Y

Cultural Competency: N

ALEX W LEDBETTER

📍 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

🌐 Website: N/A

Accepting New Patients: Yes

🗨 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

LEE, DAVID

Provider Gender: Male

License Number: A124329

NPI: 1871884130

Provider English Spoken: Y

Provider Language(s) Spoken:
Korean

Cultural Competency: N

DAVID J LEE

D6. Directorio de salud mental

9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

LI, XIA

Provider Gender: Female

License Number: A163344

NPI: 1336670413

Provider English Spoken: Y

Provider Language(s) Spoken:

Mandarin

Cultural Competency: N

XIA LI

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM

LINKE, SARAH

Provider Gender: Female

License Number: PSY27116

NPI: 1487026415

Provider English Spoken: Y

Cultural Competency: N

SARAH E LINKE

8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

MAGINOT-CHESHER, TAMARA

Provider Gender: Female

License Number: PSY28678

NPI: 1043441165

Provider English Spoken: Y

Cultural Competency: N

TAMARA R MAGINOT

CHESHER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 534-7792

Fax: (619) 471-9017

After Hours Phone: (858)

534-7792

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

MARTINEZ, STEPHANIE

Provider Gender: Female

License Number: A152787

NPI: 1699126367

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

STEPHANIE MARTINEZ

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

MAXWELL, BENJAMIN

Provider Gender: Male

D6. Directorio de salud mental

License Number: A108124

NPI: 1740415926

Provider English Spoken: Y

Cultural Competency: N

BENJAMIN K MAXWELL

8950 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (858) 534-8019

Fax: (858) 534-6727

After Hours Phone: (858)
534-8019

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

9:00AM-5:00PM

MENDEZ, ANDRES

Provider Gender: Male

License Number: PSY28907

NPI: 1841482692

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

ANDRES G MENDEZ

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

MOORE, SHAVON

Provider Gender: Female

License Number: A152789

NPI: 1053682773

Provider English Spoken: Y

Cultural Competency: N

SHAVON C MOORE

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

MOORE, SHAVON

Provider Gender: Female

License Number: A152789

NPI: 1053682773

Provider English Spoken: Y

Cultural Competency: N

SHAVON C MOORE

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 826-8273

Fax: (888) 539-8781

After Hours Phone: (800)
826-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

NGUYEN, HOANG

Provider Gender: Male

License Number: G83977

NPI: 1720011620

Provider English Spoken: Y

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: N

HOANG A NGUYEN

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (619) 497-6673

After Hours Phone: (619)
497-6673

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

D6. Directorio de salud mental

 Hours: M-F
8:00AM-5:00PM


NGUYEN, HOANG


Provider Gender: Male
License Number: G83977
NPI: 1720011620
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese

Cultural Competency: N

HOANG A NGUYEN


 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273


 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

PELHAM, WILLIAM

Provider Gender: Male
License Number: PSY33091
NPI: 1306629399
Provider English Spoken: Y
Cultural Competency: N

WILLIAM E PELHAM

 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800)

926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

QAYOUMI, WALI

Provider Gender: Male
License Number: A168429
NPI: 1093178220


Provider English Spoken: Y

Provider Language(s) Spoken:
French

Cultural Competency: N


WALI Z QAYOUMI

 9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037


 Phone: (619) 284-3746

Fax: (888) 579-8781

 After Hours Phone: (619)
284-3746

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

QAYOUMI, WALI

Provider Gender: Male
License Number: A168429

NPI: 1093178220


Provider English Spoken: Y

Provider Language(s) Spoken:
French


Cultural Competency: N

WALI Z QAYOUMI

 9500 GILMAN DR STE 2069
LA JOLLA, CA 92093


 Phone: (858) 822-5881

Fax: (888) 539-8781

 After Hours Phone: (858)
822-5881

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

REED, KRISTIE

Provider Gender: Female
License Number: PSY30934
NPI: 1679869556

Provider English Spoken: Y


Cultural Competency: N


KRISTIE L REED

 8950 VILLA LA JOLLA DR
STE C212
LA JOLLA, CA 92037


 Phone: (800) 926-8372

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

D6. Directorio de salud mental

Min/Max Age: 0\None

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER

REED, KRISTIE

Provider Gender: Female

License Number: PSY30934


NPI: 1679869556

Provider English Spoken: Y

Cultural Competency: N


KRISTIE L REED

 3344 N TORREY PINES CT
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

RICHARD, MARLA

Provider Gender: Female

License Number: G65188


NPI: 1578720934


Provider English Spoken: Y

Cultural Competency: N

MARLA G RICHARD

 9300 MEDIAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

RICHARD, MARLA

Provider Gender: Female

License Number: G65188

NPI: 1578720934


Provider English Spoken: Y


Cultural Competency: N

MARLA G RICHARD

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

SCHNEEBERGER, ANDRES

Provider Gender: Male

License Number: C175502

NPI: 1184867376


Provider English Spoken: Y

Cultural Competency: N

ANDRES R SCHNEEBERGER

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

TARLE, STEPHANIE

Provider Gender: Female

License Number: PSY32155

NPI: 1659920403


Provider English Spoken: Y

Cultural Competency: N

STEPHANIE J TARLE

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D6. Directorio de salud mental

TARVER, LESLIE

Provider Gender: Female

License Number: A169181

NPI: 1811300957

Provider English Spoken: Y

Cultural Competency: N

LESLIE B TARVER

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

WISHNEK, HANNAH

Provider Gender: Female

License Number: LCS105699

NPI: 1578012043

Provider English Spoken: Y

Cultural Competency: N

HANNAH K WISHNEK

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

ZLATAR, ZVINKA

Provider Gender: Female

License Number: PSY26230

NPI: 1497139059

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ZVINKA Z ZLATAR

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

LAKESIDE

BRUNETTO, HEIDI

Provider Gender: Female

License Number: PSY26809

NPI: 1023250453

Provider English Spoken: Y

Cultural Competency: N

HEIDI M BRUNETTO

10039 VINE ST
LAKESIDE, CA 92040

Phone: (619) 390-9975

Fax: (360) 462-2744

After Hours Phone: (619)
390-9975

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-5:00PM

NATIONAL CITY

FLANIGAN, MARILYN

Provider Gender: Female

License Number: MFC97326

NPI: 1588996912

Provider English Spoken: Y

Cultural Competency: N

MARILYN Y FLANIGAN

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (858) 578-4417

After Hours Phone: (844)
200-2426

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

D6. Directorio de salud mental

PROVIDER
Hours: M-F
8:00AM-6:00PM

KUGEL, SAMUEL

Provider Gender: Male
License Number: A54412
NPI: 1497813968
Provider English Spoken: Y
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency: N

SAMUEL KUGEL

502 EUCLID AVE STE 305
NATIONAL CITY, CA 91950

Phone: (619) 472-2600

Fax: (619) 472-5721

After Hours Phone: (619)
472-2600

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Portuguese

TDD: U

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

LAD, NIKISHA

Provider Gender: Female
License Number: LCS120676
NPI: 1942857107
Provider English Spoken: Y
Cultural Competency: N

NIKISHA J LAD

2400 E 8TH ST
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 8:00AM-5:00PM
M-F 8:00AM-5:00PM

SACHS, MELISSA

Provider Gender: Female
License Number: LCS76968
NPI: 1649760356

Provider English Spoken: Y

Cultural Competency: N

MELISSA R SACHS

2400 E 8TH ST
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM

SILVEY, CHRISTOPHER

Provider Gender: Male
License Number: LCS85942
NPI: 1932793502

Provider English Spoken: Y

Cultural Competency: N

CHRISTOPHER J SILVEY

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 474-4008

After Hours Phone: (844)
200-2426

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

OCEANSIDE

ACOSTA, AZUCENA

Provider Gender: Female
License Number: LCS98304
NPI: 1255937496

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

AZUCENA ACOSTA





4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000








Fax: (760) 414-3892

After Hours Phone: (760)

D6. Directorio de salud mental



631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

ACOSTA, AZUCENA


Provider Gender: Female
License Number: LCS98304
NPI: 1255937496
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
AZUCENA ACOSTA
 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU
8:00AM-5:00PM
W 8:00AM-7:00PM
TH-F 8:00AM-5:00PM


SA 9:00AM-4:00PM

ACOSTA, AZUCENA

Provider Gender: Female
License Number: LCS98304
NPI: 1255937496
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
AZUCENA ACOSTA
 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892


 After Hours Phone: (760)
631-5000

 Website: N/A
Accepting New Patients: Yes




 Site English Spoken: Y
TDD: U






Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER









 Hours: M-F
8:00AM-5:00PM

BELL, JENNIFER

Provider Gender: Female
License Number: 20A20702
NPI: 1154614956
Provider English Spoken: Y
Cultural Competency: N
JENNIFER L BELL
 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)









631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 5\80
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM



BELL, JENNIFER

Provider Gender: Female
License Number: 20A20702
NPI: 1154614956
Provider English Spoken: Y
Cultural Competency: N
JENNIFER L BELL
 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 5\80
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM







D6. Directorio de salud mental



SA 9:00AM-4:00PM
BELL, JENNIFER
Provider Gender: Female
License Number: 20A20702
NPI: 1154614956
Provider English Spoken: Y
Cultural Competency: N
JENNIFER L BELL








 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish, Chinese, Farsi
TDD: U
Min/Max Age: 5\80
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM



CHALMERS, VIRGINIA
Provider Gender: Female
License Number: LCS28053
NPI: 1265613715
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
VIRGINIA C CHALMERS
 619 CROUCH ST
OCEANSIDE, CA 92054
 Phone: (760) 736-6767

Fax: (760) 736-6744
 After Hours Phone: (760)
736-6767
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CHRISTIANSON, WARREN
Provider Gender: Male
License Number: 20A9664
NPI: 1932359445
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
WARREN R CHRISTIANSON II
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN
Provider Gender: Male
License Number: 20A9664
NPI: 1932359445
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
WARREN R CHRISTIANSON II
 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000

CHRISTIANSON, WARREN
Provider Gender: Male
License Number: 20A9664
NPI: 1932359445
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
WARREN R CHRISTIANSON II
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN
Provider Gender: Male
License Number: 20A9664
NPI: 1932359445
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
WARREN R CHRISTIANSON II
 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000


D6. Directorio de salud mental

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

 517 N HORNE ST
OCEANSIDE, CA 92054


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000


 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH

8:00AM-7:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

 818 PIER VIEW WAY
OCEANSIDE, CA 92054


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

 517 N HORNE ST
OCEANSIDE, CA 92054


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

COOK, SHERYL

Provider Gender: Female

License Number: PSY15449


NPI: 1750420816

Provider English Spoken: Y

Cultural Competency: N

SHERYL G COOK

 619 CROUCH ST STE 100
OCEANSIDE, CA 92054


 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760) 736-6767

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT

D6. Directorio de salud mental

PROVIDER
Hours: M 9:00AM-6:15PM
W 9:00AM-6:00PM

CRUZ, VANESSA

Provider Gender: Female
License Number: LCS87166
NPI: 1285170662
Provider English Spoken: Y
Cultural Competency: N
VANESSA Y CRUZ

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 4\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-TH
9:00AM-7:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

CRUZ, VANESSA

Provider Gender: Female
License Number: LCS87166
NPI: 1285170662
Provider English Spoken: Y
Cultural Competency: N
VANESSA Y CRUZ

517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

CRUZ, VANESSA

Provider Gender: Female
License Number: LCS87166
NPI: 1285170662
Provider English Spoken: Y
Cultural Competency: N
VANESSA Y CRUZ

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-TH
9:00AM-7:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

CRUZ, VANESSA

Provider Gender: Female
License Number: LCS87166

NPI: 1285170662
Provider English Spoken: Y
Cultural Competency: N
VANESSA Y CRUZ
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

DOUGHERTY, CHRISTINE

Provider Gender: Female
License Number: LCS26686
NPI: 1003194960
Provider English Spoken: Y
Cultural Competency: N
CHRISTINE A DOUGHERTY

4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

D6. Directorio de salud mental

DOUGHERTY, CHRISTINE

Provider Gender: Female
License Number: LCS26686
NPI: 1003194960
Provider English Spoken: Y
Cultural Competency: N
CHRISTINE A DOUGHERTY

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 8:00AM-4:00PM

DOUGHERTY, CHRISTINE

Provider Gender: Female
License Number: LCS26686
NPI: 1003194960
Provider English Spoken: Y
Cultural Competency: N
CHRISTINE A DOUGHERTY

517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

JENSEN, BRIAN

Provider Gender: Male
License Number: PSY26041
NPI: 1518138049
Provider English Spoken: Y
Cultural Competency: N
BRIAN M JENSEN

619 CROUCH ST
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

KRAPES, MICHAEL

Provider Gender: Male
License Number: PSY25077
NPI: 1215233028
Provider English Spoken: Y
Cultural Competency: N
MICHAEL B KRAPES

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

MENDEZ, ADRIANA

Provider Gender: Female
License Number: LCS86435
NPI: 1356777361
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
ADRIANA J MENDEZ

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

MENDEZ, ADRIANA

Provider Gender: Female

D6. Directorio de salud mental

License Number: LCS86435

NPI: 1356777361

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ADRIANA J MENDEZ

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MENDEZ, ADRIANA

Provider Gender: Female

License Number: LCS86435

NPI: 1356777361

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ADRIANA J MENDEZ

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

MEYERHOF, GRETA

Provider Gender: Female

License Number: MFC32299

NPI: 1487196333

Provider English Spoken: Y

Cultural Competency: N

GRETA R MEYERHOF

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MEYERHOF, GRETA

Provider Gender: Female

License Number: MFC32299

NPI: 1487196333

Provider English Spoken: Y

Cultural Competency: N

GRETA R MEYERHOF

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MEYERHOF, GRETA

Provider Gender: Female

License Number: MFC32299

NPI: 1487196333

Provider English Spoken: Y

Cultural Competency: N

GRETA R MEYERHOF

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MONTEZ, REBECCA

Provider Gender: Female

License Number: LCS26869

NPI: 1396047809

Provider English Spoken: Y

Provider Language(s) Spoken:

D6. Directorio de salud mental

Spanish

Cultural Competency: N

REBECCA MONTEZ

2210 MESA DR STE 5
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

NEVILLE, MARGARET

Provider Gender: Female

License Number: LCS82407

NPI: 1073682407

Provider English Spoken: Y

Cultural Competency: N

MARGARET R NEVILLE

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

NEVILLE, MARGARET

Provider Gender: Female

License Number: LCS82407

NPI: 1073682407

Provider English Spoken: Y

Cultural Competency: N

MARGARET R NEVILLE

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

NEVILLE, MARGARET

Provider Gender: Female

License Number: LCS82407

NPI: 1073682407

Provider English Spoken: Y

Cultural Competency: N

MARGARET R NEVILLE

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

ORTIZ, BEVERLY

Provider Gender: Female

License Number: MFC121355

NPI: 1760826572

Provider English Spoken: Y

Cultural Competency: N

BEVERLY L ORTIZ

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PATEL, MITESH

Provider Gender: Male

License Number: A181164

NPI: 1568880292

Provider English Spoken: Y

Cultural Competency: N

MITESH K PATEL





517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892




After Hours Phone: (760)
631-5000



D6. Directorio de salud mental



 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

PATEL, MITESH

Provider Gender: Male
License Number: A181164
NPI: 1568880292
Provider English Spoken: Y
Cultural Competency: N
MITESH K PATEL



 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000




 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM



PATEL, MITESH

Provider Gender: Male
License Number: A181164
NPI: 1568880292
Provider English Spoken: Y
Cultural Competency: N
MITESH K PATEL

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U



Min/Max Age: 18\None
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
 Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM



SANCHEZ, ADRIANA

Provider Gender: Female
License Number: LCS97093
NPI: 1609450451
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: N
ADRIANA SANCHEZ

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892




 After Hours Phone: (760)
631-5000
 Website: N/A



Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER



SANCHEZ, ADRIANA

Provider Gender: Female
License Number: LCS97093
NPI: 1609450451
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: N
ADRIANA SANCHEZ

 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000


 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-4:00PM

SANCHEZ, ADRIANA

Provider Gender: Female
License Number: LCS97093
NPI: 1609450451
Provider English Spoken: Y


D6. Directorio de salud mental

Provider Language(s) Spoken:  Spanish

Cultural Competency: N

ADRIANA SANCHEZ

 818 PIER VIEW WAY
OCEANSIDE, CA 92054


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

SLOAN, CRISTINA

Provider Gender: Female

License Number: MFC137279


NPI: 1912456377

Provider English Spoken: Y

Cultural Competency: N

CRISTINA I SLOAN

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish


TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

SLOAN, CRISTINA

Provider Gender: Female

License Number: MFC137279


NPI: 1912456377

Provider English Spoken: Y

Cultural Competency: N


CRISTINA I SLOAN

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish


TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

SLOAN, CRISTINA

Provider Gender: Female

License Number: MFC137279


NPI: 1912456377

Provider English Spoken: Y

Cultural Competency: N

CRISTINA I SLOAN

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish


TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

SMITH, SONYA

Provider Gender: Female

License Number: LCS82598

NPI: 1902070857


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

SONYA L SMITH

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N







 Accessibility: CONTACT
PROVIDER

D6. Directorio de salud mental

SMITH, SONYA

Provider Gender: Female
License Number: LCS82598
NPI: 1902070857
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N





SONYA L SMITH

 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


SMITH, SONYA

Provider Gender: Female
License Number: LCS82598
NPI: 1902070857
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N

SONYA L SMITH

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N





 Accessibility: CONTACT
PROVIDER


WILSON, CARLENE

Provider Gender: Female
License Number: LCS74685
NPI: 1508327081

Provider English Spoken: Y
Cultural Competency: N

CARLENE WILSON

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


WILSON, CARLENE

Provider Gender: Female
License Number: LCS74685
NPI: 1508327081

Provider English Spoken: Y
Cultural Competency: N

CARLENE WILSON


 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

WILSON, CARLENE

Provider Gender: Female
License Number: LCS74685
NPI: 1508327081


Provider English Spoken: Y
Cultural Competency: N

CARLENE WILSON

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000


 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

POWAY

GILL, MANPREET

Provider Gender: Male
License Number: A180790

D6. Directorio de salud mental

NPI: 1144875535

Provider English Spoken: Y

Cultural Competency: N

MANPREET GILL

13010 POWAY RD
POWAY, CA 92064

Phone: (858) 218-3000

Fax: (360) 462-2742

After Hours Phone: (858)
218-3000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

GILL, MANPREET

Provider Gender: Male

License Number: A180790

NPI: 1144875535

Provider English Spoken: Y

Cultural Competency: N

MANPREET GILL

13010 POWAY RD
POWAY, CA 92064

Phone: (858) 218-3000

Fax: (360) 462-2742

After Hours Phone: (858)
218-3000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

KULKARNI, NISHAT

Provider Gender: Male

License Number: A187134

NPI: 1669034732

Provider English Spoken: Y

Cultural Competency: N

NISHAT KULKARNI

13010 POWAY RD
POWAY, CA 92064

Phone: (858) 218-3000

Fax: (360) 462-2742

After Hours Phone: (858)
218-3000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

MODHWADIA, MAMTA

Provider Gender: Female

License Number: A113990

NPI: 1043353667

Provider English Spoken: Y

Provider Language(s) Spoken:

German, Gujarati

Cultural Competency: N

MAMTA D MODHWADIA

13010 POWAY RD
POWAY, CA 92064

Phone: (858) 218-3000

Fax: (360) 462-2742

After Hours Phone: (858)
218-3000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

9:00AM-5:00PM

POSTLETHWAITE, ALEJANDRA

Provider Gender: Female

License Number: A88938

NPI: 1750566915

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

ALEJANDRA POSTLETHWAITE

13010 POWAY RD
POWAY, CA 92064

Phone: (858) 218-3000

Fax: (360) 462-2742

After Hours Phone: (858)
218-3000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

D6. Directorio de salud mental

Min/Max Age: 0\None

American Sign Language (ASL):  13010 POWAY RD

N

 Accessibility: CONTACT PROVIDER

STREET, KYLE

Provider Gender: Male


License Number: 20A21304


NPI: 1457912131

Provider English Spoken: Y

Cultural Competency: N


KYLE A STREET

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000


Fax: (360) 462-2742

 After Hours Phone: (858)
218-3000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

VALLEZ-BARLAM, ANDREA

Provider Gender: Female

License Number: PSY9962

NPI: 1710902143


Provider English Spoken: Y


Provider Language(s) Spoken:

German, Spanish

Cultural Competency: N

ANDREA VALLEZ-BARLAM

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000


Fax: (858) 633-4688

 After Hours Phone: (858)
218-3000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

9:00AM-5:00PM

SAN DIEGO

ABERCROMBIE, SHERI

Provider Gender: Female

License Number: PSY18536


NPI: 1932292422

Provider English Spoken: Y


Cultural Competency: N


SHERI ABERCROMBIE

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925


Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:30AM-5:30PM

SA 8:30AM-4:00PM

ABERCROMBIE, SHERI

Provider Gender: Female

License Number: PSY18536


NPI: 1932292422

Provider English Spoken: Y

Cultural Competency: N

SHERI ABERCROMBIE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700


Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

ARONLEE, TRACY

Provider Gender: Female

License Number: LCS83778

NPI: 1619304748






Provider English Spoken: Y

Cultural Competency: N

TRACY S ARONLEE

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111







D6. Directorio de salud mental

 Phone: (858) 279-0925
Fax: (858) 633-4680
 After Hours Phone: (858) 279-0925
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 2\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

ARONLEE, TRACY








Provider Gender: Female
License Number: LCS83778
NPI: 1619304748
Provider English Spoken: Y

Cultural Competency: N
TRACY S ARONLEE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858) 810-8700
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 2\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER







BANKS, SARAH

Provider Gender: Female
License Number: PSY30296
NPI: 1164701132

Provider English Spoken: Y
Cultural Competency: N
SARAH J BANKS
 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM








BANKS, SARAH

Provider Gender: Female
License Number: PSY30296
NPI: 1164701132
Provider English Spoken: Y
Cultural Competency: N
SARAH J BANKS






 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

BANKS, SARAH

Provider Gender: Female
License Number: PSY30296
NPI: 1164701132
Provider English Spoken: Y
Cultural Competency: N
SARAH J BANKS

 4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

BARRON, KAVITA


Provider Gender: Female
License Number: A155596
NPI: 1821418542
Provider English Spoken: Y
Cultural Competency: N
KAVITA BARRON
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U

D6. Directorio de salud mental

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


BASS, GURGIANA


Provider Gender: Female
License Number: PSY24750
NPI: 1639325277

Provider English Spoken: Y
Cultural Competency: N

GURGIANA BASS


 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:00AM-4:30PM
TU 8:00AM-0:00PM
W 8:00AM-4:30PM
TH 8:00AM-0:00PM

BASS, GURGIANA


Provider Gender: Female
License Number: PSY24750
NPI: 1639325277

Provider English Spoken: Y
Cultural Competency: N


GURGIANA BASS

 7011 LINDA VISTA RD


SAN DIEGO, CA 92111

 Phone: (858) 810-8700
Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


BREEDLOVE, AMANDA

Provider Gender: Female
License Number: MFC139230
NPI: 1316487119


Provider English Spoken: Y
Cultural Competency: N

AMANDA A BREEDLOVE

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

 Phone: (619) 662-4100


Fax: (619) 785-3384

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


BROWN, DARCIE

Provider Gender: Female
License Number: MFC119851
NPI: 1639796071

Provider English Spoken: Y
Cultural Competency: N

DARCIE D BROWN


 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


CALLAGHAN, KATHRYN


Provider Gender: Female
License Number: MFC106901
NPI: 1558768812

Provider English Spoken: Y
Cultural Competency: N

KATHRYN R CALLAGHAN

 2630 1ST AVE
SAN DIEGO, CA 92103


 Phone: (619) 234-2158
Fax: (619) 234-0206

 After Hours Phone: (619)
234-2158

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Language(s) Spoken:

D6. Directorio de salud mental


Spanish


TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

CEBALLOS, JACQUELINE

Provider Gender: Female

License Number: LCS110194


NPI: 1093350258

Provider English Spoken: Y

Cultural Competency: N

JACQUELINE CEBALLOS

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-9025


Fax: (858) 633-4680

 After Hours Phone: (858)
279-9025

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Languages(s) Spoken:
Spanish


TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

CEBALLOS, JACQUELINE

Provider Gender: Female

License Number: LCS110194


NPI: 1093350258

Provider English Spoken: Y

Cultural Competency: N

JACQUELINE CEBALLOS

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700


Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish


TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

CHESHER, NICHOLAS

Provider Gender: Male

License Number: PSY29290

NPI: 1124539697

Provider English Spoken: Y

Cultural Competency: N

NICHOLAS J CHESHER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

CIOBANU, COSMINA

Provider Gender: Female

License Number: A137628


NPI: 1285049932

Provider English Spoken: Y

Cultural Competency: N

COSMINA S CIOBANU

 8001 FROST ST
SAN DIEGO, CA 92123

 Phone: (858) 576-1700

Fax: (858) 966-8164

 After Hours Phone: (858)
576-1700

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

CIOBANU, COSMINA

Provider Gender: Female

License Number: A137628


NPI: 1285049932

Provider English Spoken: Y

Cultural Competency: N

COSMINA S CIOBANU





 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 576-1700

Fax: (858) 966-8164








 After Hours Phone: (858)

D6. Directorio de salud mental

576-1700
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM








CIOBANU, COSMINA

Provider Gender: Female
License Number: A137628
NPI: 1285049932
Provider English Spoken: Y
Cultural Competency: N
COSMINA S CIOBANU







 3010 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 576-1700
Fax: (858) 966-8164
 After Hours Phone: (858)
576-1700
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

CIOBANU, COSMINA

Provider Gender: Female
License Number: A137628
NPI: 1285049932








Provider English Spoken: Y
Cultural Competency: N
COSMINA S CIOBANU
 4510 EXECUTIVE DR STE
315
SAN DIEGO, CA 92121
 Phone: (858) 534-8019
 After Hours Phone: (858)
534-8019
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

CLEMENT, LUIS

Provider Gender: Male
License Number: PSY28534
NPI: 1235364712
Provider English Spoken: Y
Cultural Competency: N
LUIS F CLEMENT
 2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
Fax: (619) 234-0206
 After Hours Phone: (619)
234-2158
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER

CRISOL, CAROLINE

Provider Gender: Female
License Number: MFC88616
NPI: 1962663617
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
CAROLINE M CRISOL LMFT
INC
 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
Fax: (619) 662-4158
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

DEACON, CASSIE

Provider Gender: Female
License Number: LCS94105
NPI: 1720452998
Provider English Spoken: Y
Cultural Competency: N
CASSIE C DEACON
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680

D6. Directorio de salud mental

📞 After Hours Phone: (858) 810-8700

🌐 Website: N/A

Accepting New Patients: Yes

🗒 Site English Spoken: Y

🗒 Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8:30AM-5:30PM
TU 5:30PM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

DEACON, CASSIE

Provider Gender: Female

License Number: LCS94105

NPI: 1720452998

Provider English Spoken: Y

Cultural Competency: N

CASSIE C DEACON

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

📞 Phone: (858) 279-0925

Fax: (858) 633-4680

📞 After Hours Phone: (858) 279-0925

🌐 Website: N/A

Accepting New Patients: Yes

🗒 Site English Spoken: Y

🗒 Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8:30AM-5:30PM
TU 5:30PM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

DIAZ, JAENAI

Provider Gender: Female

License Number: LCS80689

NPI: 1508241811

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

JAENAI DIAZ

📍 350 DICKINSON ST
SAN DIEGO, CA 92103

📞 Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273

🌐 Website: N/A

Accepting New Patients: Yes

🗒 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

DIOKNO, RHODA

Provider Gender: Female

License Number: PSY28073

NPI: 1629109483

Provider English Spoken: Y

Cultural Competency: N

ROHDA CARINO DIOKNO

📍 2630 1ST AVE
SAN DIEGO, CA 92103

📞 Phone: (619) 234-2158

Fax: (619) 234-0206

📞 After Hours Phone: (619) 234-2158

🌐 Website: N/A

Accepting New Patients: Yes

🗒 Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

DOLNAK, DOUGLAS

Provider Gender: Male

License Number: 20A6059

NPI: 1316147085

Provider English Spoken: Y

Cultural Competency: N

DOUGLAS R DOLNAK

📍 10737 CAMINO RUIZ
SAN DIEGO, CA 92126

📞 Phone: (844) 200-2426

Fax: (619) 474-4008

📞 After Hours Phone: (844) 200-2426

🌐 Website: N/A

Accepting New Patients: Yes

🗒 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-6:00PM

DOSS, KATIE

Provider Gender: Female

License Number: LCS112693

NPI: 1134825979


Provider English Spoken: Y

D6. Directorio de salud mental

Cultural Competency: N

KATIE L DOSS

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700


Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

DOSS, KATIE

Provider Gender: Female

License Number: LCS112693


NPI: 1134825979

Provider English Spoken: Y


Cultural Competency: N

KATIE L DOSS

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925


Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):  After Hours Phone: (619)
543-3500

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

DSOUZA, NICOLE

Provider Gender: Male

License Number: LCS101958


NPI: 1225462799

Provider English Spoken: Y

Cultural Competency: N

NICOLE A DSOUZA

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

DUNN-PIRIO, ANASTASIE

Provider Gender: Female

License Number: A157861


NPI: 1700177136

Provider English Spoken: Y


Cultural Competency: N

ANASTASIE M DUNN-PIRIO

 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

 Phone: (619) 543-3500

Fax: (888) 539-8781

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

ESTAVILLO, SAUL

Provider Gender: Male

License Number: MFC102610

NPI: 1528330073


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

SAUL J ESTAVILLO

 286 EUCLID AVE STE 309
SAN DIEGO, CA 92114

 Phone: (619) 527-7390


Fax: (619) 527-7394

 After Hours Phone: (619)
527-7390

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish


TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

D6. Directorio de salud mental

ESTAVILLO, SAUL

Provider Gender: Male

License Number: MFC102610

NPI: 1528330073

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

SAUL J ESTAVILLO

3045 BEYER BLVD STE D101
SAN DIEGO, CA 92154

Phone: (619) 662-4161

Fax: (619) 662-4109

After Hours Phone: (619)
662-4161

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

FIRESTONE, MICHELLE

Provider Gender: Female

License Number: PSY33081

NPI: 1114687803

Provider English Spoken: Y

Cultural Competency: N

MICHELLE E FIRESTONE

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FIRESTONE, MICHELLE

Provider Gender: Female

License Number: PSY33081

NPI: 1114687803

Provider English Spoken: Y

Cultural Competency: N

MICHELLE E FIRESTONE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FITZGERALD, MICHAEL

Provider Gender: Male

License Number: A73710

NPI: 1336393578

Provider English Spoken: Y

Cultural Competency: N

MICHAEL W FITZGERALD

16918 DOVE CANYON RD
STE 100

SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

FLANIGAN, MARILYN

Provider Gender: Female

License Number: MFC97326

NPI: 1588996912

Provider English Spoken: Y

Cultural Competency: N

MARILYN Y FLANIGAN

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (858) 578-4417

After Hours Phone: (844)
200-2426

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

D6. Directorio de salud mental

PROVIDER
Hours: M-F
8:00AM-6:00PM

FORZANI, CHRISTINA

Provider Gender: Female
License Number: PSY25710
NPI: 1902939630

Provider English Spoken: Y
Cultural Competency: N
CHRISTINA A FORZANI

4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619)
563-0250
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

FRANK, GUIDO

Provider Gender: Male
License Number: A86429
NPI: 1578608733
Provider English Spoken: Y
Cultural Competency: N

GUIDO K FRANK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8145
Fax: (858) 966-8154
After Hours Phone: (858)
966-8145
Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
TDD: U
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM

FRY, LIANE

Provider Gender: Female
License Number: MFC42570
NPI: 1003110917
Provider English Spoken: Y
Cultural Competency: N
LIANE M FRY

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
Fax: (619) 595-0258
After Hours Phone: (619)
662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 12\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM

GARCIA, RICHARD

Provider Gender: Male
License Number: LCS28742
NPI: 1881198554
Provider English Spoken: Y
Cultural Competency: N

RICHARD R GARCIA
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0206
After Hours Phone: (619)
234-2158
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-4:30PM

GARCIA, JENNI


Provider Gender: Female
License Number: LPCC10346
NPI: 1437775863
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N

JENNI GARCIA
3025 BEYER BLVD
SAN DIEGO, CA 92154
Phone: (619) 662-4100
Fax: (619) 662-4119
After Hours Phone: (619)
662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):

D6. Directorio de salud mental

N

 Accessibility: CONTACT PROVIDER


 Hours: M-F
8:00AM-5:00PM

GIAMONA, KRISTEN


Provider Gender: Female
License Number: PSY28419
NPI: 1376824383

Provider English Spoken: Y
Cultural Competency: N
KRISTEN M GIAMONA


 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700
Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


GIAMONA, KRISTEN


Provider Gender: Female
License Number: PSY28419
NPI: 1376824383

Provider English Spoken: Y
Cultural Competency: N

KRISTEN M GIAMONA


 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925
Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

GOMEZ, JUANITA


Provider Gender: Female
License Number: PSY27439
NPI: 1790915759

Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish


Cultural Competency: N

JUANITA GOMEZ


 6030 VILLAGE WAY
SAN DIEGO, CA 92130

 Phone: (800) 926-8372
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER



GULOTTA, SAMANTHA

Provider Gender: Female
License Number: MFC134199
NPI: 1790407732

Provider English Spoken: Y
Cultural Competency: N


SAMANTHA L GULOTTA

 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131

 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

HERNANDEZ, SILVIA


Provider Gender: Female
License Number: MFC51787
NPI: 1982821179


Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: N

SILVIA E HERNANDEZ


 3025 BEYER BLVD
SAN DIEGO, CA 92154

 Phone: (619) 662-4100
Fax: (619) 662-4119

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D6. Directorio de salud mental

JOSHI, YASH

Provider Gender: Male

License Number: A147156

NPI: 1598151433

Provider English Spoken: Y

Cultural Competency: N

YASH B JOSHI

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

KAYE, WALTER

Provider Gender: Male

License Number: A24819

NPI: 1922076223

Provider English Spoken: Y

Cultural Competency: N

WALTER H KAYE

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (858) 534-8019

After Hours Phone: (858)
534-8019

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

KHAFAJA, MOHAMAD

Provider Gender: Male

License Number: A115892

NPI: 1780867119

Provider English Spoken: Y

Provider Language(s) Spoken:
Arabic

Cultural Competency: N

MOHAMAD H KHAFAJA

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

KHAMISA, SORAIYA

Provider Gender: Female

License Number: LCS81951

NPI: 1811254386

Provider English Spoken: Y

Cultural Competency: N

SORAIYA N KHAMISA

4520 EXECUTIVE DR STE A

SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

KLUEMPER, NICOLE

Provider Gender: Female

License Number: PSY27064

NPI: 1902125818

Provider English Spoken: Y

Cultural Competency: N

NICOLE S KLUEMPER

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 2\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

KLUEMPER, NICOLE

Provider Gender: Female

License Number: PSY27064

NPI: 1902125818

Provider English Spoken: Y

D6. Directorio de salud mental

Cultural Competency: N

NICOLE S KLUEMPER

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 2\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

LABIB, MICHAEL

Provider Gender: Male

License Number: PSY34180

NPI: 1609055797

Provider English Spoken: Y

Provider Language(s) Spoken:

Arabic

Cultural Competency: N

MICHAEL LABIB

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

Phone: (619) 662-4100

Fax: (619) 785-3384

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

LAIDLAW, JOHN

Provider Gender: Male

License Number: MFC44560

NPI: 1689790073

Provider English Spoken: Y

Cultural Competency: N

JOHN K LAIDLAW

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

LEBENSOHN CHIALVO, FLORENCIA

Provider Gender: Female

License Number: PSY30776

NPI: 1134788730

Provider English Spoken: Y

Cultural Competency: N

FLORENCIA LEBENSOHN
CHIALVO

7910 FROST ST STE 350
SAN DIEGO, CA 92123

Phone: (858) 496-4800

After Hours Phone: (858)
496-4800

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

LEBENSOHN CHIALVO, FLORENCIA

Provider Gender: Female

License Number: PSY30776

NPI: 1134788730

Provider English Spoken: Y

Cultural Competency: N

FLORENCIA LEBENSOHN
CHIALVO

9333 GENESEE AVE STE
200

SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

LEDBETTER, ALEX

Provider Gender: Male

License Number: 20A20454

D6. Directorio de salud mental

NPI: 1073017315

Provider English Spoken: Y

Cultural Competency: N

ALEX W LEDBETTER

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

LEE, DAVID

Provider Gender: Male

License Number: A124329

NPI: 1871884130

Provider English Spoken: Y

Provider Language(s) Spoken:

Korean

Cultural Competency: N

DAVID J LEE

200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

LI, XIA

Provider Gender: Female

License Number: A163344

NPI: 1336670413

Provider English Spoken: Y

Provider Language(s) Spoken:

Mandarin

Cultural Competency: N

XIA LI

16918 DOVE CANYON RD
STE 100

SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

LINKE, SARAH

Provider Gender: Female

License Number: PSY27116

NPI: 1487026415

Provider English Spoken: Y

Cultural Competency: N

SARAH E LINKE

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

LINKE, SARAH

Provider Gender: Female

License Number: PSY27116

NPI: 1487026415

Provider English Spoken: Y

Cultural Competency: N

SARAH E LINKE

4910 DIRECTORS PL STE
250

SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

LIU, TIMOTHY

D6. Directorio de salud mental




Provider Gender: Male
License Number: A105535
NPI: 1720262801
Provider English Spoken: Y
Provider Language(s) Spoken:
Chinese, Mandarin, Yue
Chinese
Cultural Competency: N
TIMOTHY C LIU

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
Fax: (858) 633-4680
 *After Hours Phone: (858)*
279-0925
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 5\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER








LIU, TIMOTHY

Provider Gender: Male
License Number: A105535
NPI: 1720262801
Provider English Spoken: Y
Provider Language(s) Spoken:
Chinese, Mandarin, Yue
Chinese
Cultural Competency: N
TIMOTHY C LIU

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 810-8700*
Fax: (858) 633-4680
 *After Hours Phone: (858)*
810-8700



 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 5\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

LONGARDNER, KATHERINE




Provider Gender: Female
License Number: A137963
NPI: 1801215926
Provider English Spoken: Y
Cultural Competency: N
KATHERINE M LONGARDNER
 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM

MAGINOT-CHESHER, TAMARA


Provider Gender: Female
License Number: PSY28678
NPI: 1043441165
Provider English Spoken: Y
Cultural Competency: N

TAMARA R MAGINOT
CHESHER
 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
 *Phone: (858) 534-8019*
Fax: (858) 534-6727
 *After Hours Phone: (858)*
534-8019
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM

MALAK, LAWRENCE

Provider Gender: Male
License Number: A115345
NPI: 1467773028
Provider English Spoken: Y
Cultural Competency: N
LAWRENCE T MALAK
 4290 POLK AVE
SAN DIEGO, CA 92105
 *Phone: (619) 563-0250*
Fax: (858) 633-4681
 *After Hours Phone: (619)*
563-0250
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 14\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

D6. Directorio de salud mental

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

MARTINEZ, STEPHANIE

Provider Gender: Female
License Number: A152787
NPI: 1699126367
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N








STEPHANIE MARTINEZ

 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
Fax: (858) 633-4681
 After Hours Phone: (619)
563-0250
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

MARTINEZ, STEPHANIE

Provider Gender: Female
License Number: A152787
NPI: 1699126367
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N







STEPHANIE MARTINEZ

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

MARTINEZ, STEPHANIE

Provider Gender: Female
License Number: A152787
NPI: 1699126367
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N

STEPHANIE MARTINEZ

 350 DICKINSON ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

MCCULLUM, TIFFANY

Provider Gender: Female
License Number: PSY29329
NPI: 1528306206
Provider English Spoken: Y
Cultural Competency: N

TIFFANY MCCULLUM

 286 EUCLID AVE STE 302
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
Fax: (619) 428-7952
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 13\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM




MILLS, BRAD

Provider Gender: Male
License Number: LCS87409
NPI: 1598542813
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N



BRAD A MILLS

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
Fax: (619) 687-1067
 After Hours Phone: (619)
233-8500

D6. Directorio de salud mental

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U

Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

MIRON, JEAN-PHILIPPE

Provider Gender: Male
License Number: A186033
NPI: 1952178196
Provider English Spoken: Y

Cultural Competency: N
JEAN-PHILIPPE MIRON

 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U



Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

MONTOYA, JESSICA

Provider Gender: Female
License Number: PSY31647
NPI: 1003421256
Provider English Spoken: Y



Cultural Competency: N
JESSICA L MONTOYA

 4168 FRONT ST FL 3
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM



MOORE, SHAVON

Provider Gender: Female
License Number: A152789
NPI: 1053682773
Provider English Spoken: Y
Cultural Competency: N
SHAVON C MOORE

 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
 Hours: M-F

8:00AM-5:00PM

MUHAMMAD, LAMA

Provider Gender: Female
License Number: A156500
NPI: 1558701623
Provider English Spoken: Y
Provider Language(s) Spoken:
Arabic



Cultural Competency: N
LAMA MUHAMMAD

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U



Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

MUHAMMAD, LAMA

Provider Gender: Female
License Number: A156500
NPI: 1558701623
Provider English Spoken: Y
Provider Language(s) Spoken:
Arabic

Cultural Competency: N
LAMA MUHAMMAD

 350 DICKINSON ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273

D6. Directorio de salud mental

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

🌐 Website: N/A

Accepting New Patients: Yes

🗨 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

NAKAMURA, TIFFANY

Provider Gender: Female

License Number: LPCC4383

NPI: 1356846349

Provider English Spoken: Y

Cultural Competency: N

TIFFANY NAKAMURA

📍 4510 EXECUTIVE DR STE 315
SAN DIEGO, CA 92121

☎ Phone: (858) 534-8019

☎ After Hours Phone: (858) 534-8019

🌐 Website: N/A

Accepting New Patients: Yes

🗨 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

NGUYEN, HOANG

Provider Gender: Male

License Number: G83977

NPI: 1720011620

Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: N

HOANG A NGUYEN

📍 410 DICKINSON ST STE 100
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

🌐 Website: N/A

Accepting New Patients: Yes

🗨 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

NGUYEN, HOANG

Provider Gender: Male

License Number: G83977

NPI: 1720011620

Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: N

HOANG A NGUYEN

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

🌐 Website: N/A

Accepting New Patients: Yes

🗨 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

NING, GRACE

Provider Gender: Female

License Number: PSY27293

NPI: 1598911315

Provider English Spoken: Y

Provider Language(s) Spoken:
Chinese, Mandarin

Cultural Competency: N

GRACE J NING

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700

Fax: (858) 633-4680

☎ After Hours Phone: (858) 810-8700

🌐 Website: N/A

Accepting New Patients: Yes

🗨 Site English Spoken: Y
TDD: U

Min/Max Age: 18\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

NING, GRACE

Provider Gender: Female

License Number: PSY27293

NPI: 1598911315

Provider English Spoken: Y

Provider Language(s) Spoken:
Chinese, Mandarin

Cultural Competency: N

D6. Directorio de salud mental

GRACE J NING

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

NORMAN, MARC

Provider Gender: Male

License Number: PSY16278

NPI: 1922169101

Provider English Spoken: Y

Cultural Competency: N

MARC A NORMAN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-2827

After Hours Phone: (619)
543-2827

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

NORMAN, MARC

Provider Gender: Male

License Number: PSY16278

NPI: 1922169101

Provider English Spoken: Y

Cultural Competency: N

MARC A NORMAN

350 DICKINSON ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

ORFF, HENRY

Provider Gender: Male

License Number: PSY27099

NPI: 1144685215

Provider English Spoken: Y

Cultural Competency: N

HENRY J ORFF

4520 EXECUTIVE DR STE
P2

SAN DIEGO, CA 92121

Phone: (844) 757-5337

After Hours Phone: (844)
757-5337

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

ORTIZ, MARIA

Provider Gender: Female

License Number: PSY30953

NPI: 1497980775

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

MARIA E ORTIZ

950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

Fax: (619) 662-4158

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PATTERSON-HYATT, KIMBERLY

Provider Gender: Female

License Number: PSY31903

NPI: 1780997742

Provider English Spoken: Y




Cultural Competency: N

KIMBERLY G

PATTERSON-HYATT






D6. Directorio de salud mental

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100
 Website: N/A

Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM








PATTON, MICHAEL

Provider Gender: Male
License Number: LCS18244
NPI: 1184756702
Provider English Spoken: Y
Cultural Competency: N
MICHAEL A PATTON

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
Fax: (619) 687-1067
 After Hours Phone: (619)
233-8500
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER





PRINCE, RENEE




Provider Gender: Female
License Number: PSY32206
NPI: 1467737908
Provider English Spoken: Y
Cultural Competency: N
RENEE K PRINCE

 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
 Phone: (844) 200-2426
Fax: (619) 474-4008
 After Hours Phone: (844)
200-2426
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-6:00PM

QAYOUMI, WALI

Provider Gender: Male
License Number: A168429
NPI: 1093178220
Provider English Spoken: Y
Provider Language(s) Spoken:
French
Cultural Competency: N
WALI Z QAYOUMI




 4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
 Phone: (619) 294-3746
Fax: (888) 539-8781
 After Hours Phone: (619)
294-3746
 Website: N/A

Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

RADOJEVIC, NATASHA

Provider Gender: Female
License Number: PSY28495
NPI: 1821365008
Provider English Spoken: Y
Cultural Competency: N
NATASHA RADOJEVIC

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700
 Website: N/A

Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TU
8:30AM-5:30PM
TH-F 8:30AM-5:30PM

RADOJEVIC, NATASHA


Provider Gender: Female
License Number: PSY28495
NPI: 1821365008
Provider English Spoken: Y

D6. Directorio de salud mental


Cultural Competency: N

NATASHA RADOJEVIC

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU

8:30AM-5:30PM

TH-F 8:30AM-5:30PM

RIBEIRO CALDAS DOMINGUES, ISABEL

Provider Gender: Female

License Number: A132160

NPI: 1023367216

Provider English Spoken: Y


Provider Language(s) Spoken:

French, Portuguese, Spanish

Cultural Competency: N

**ISABEL A RIBEIRO CALDAS
DOMINGUES**

 350 DICKINSON ST
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

RICHARD, MARLA

Provider Gender: Female

License Number: G65188


NPI: 1578720934


Provider English Spoken: Y

Cultural Competency: N

MARLA G RICHARD


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

RICHARD, MARLA

Provider Gender: Female

License Number: G65188


NPI: 1578720934

Provider English Spoken: Y

Cultural Competency: N

MARLA G RICHARD


 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273


 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

SACHS, MELISSA

Provider Gender: Female

License Number: LCS76968


NPI: 1649760356

Provider English Spoken: Y

Cultural Competency: N

MELISSA R SACHS

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115


 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100


 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:30AM-5:30PM

SA 8:00AM-2:30PM

SALO, STEPHANIE

Provider Gender: Female

D6. Directorio de salud mental

License Number: PSY26290

NPI: 1477967784

Provider English Spoken: Y

Cultural Competency: N

STEPHANIE P SALO

4290 POLK AVE

SAN DIEGO, CA 92105

Phone: (619) 563-0250

Fax: (858) 633-4681

After Hours Phone: (619)
563-0250

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 17\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

SAWYER, CAROLYN

Provider Gender: Female

License Number: A149116

NPI: 1043653249

Provider English Spoken: Y

Cultural Competency: N

CAROLYN M SAWYER

3030 CHILDRENS WAY FL

4

SAN DIEGO, CA 92123

Phone: (858) 966-4032

Fax: (858) 966-6227

After Hours Phone: (858)
966-4032

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

SAWYER, CAROLYN

Provider Gender: Female

License Number: A149116

NPI: 1043653249

Provider English Spoken: Y

Cultural Competency: N

CAROLYN M SAWYER

7920 FROST ST STE 200

SAN DIEGO, CA 92123

Phone: (858) 246-0794

Fax: (858) 496-9257

After Hours Phone: (858)
246-0794

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

SAWYER, CAROLYN

Provider Gender: Female

License Number: A149116

NPI: 1043653249

Provider English Spoken: Y

Cultural Competency: N

CAROLYN M SAWYER

3665 KEARNY VILLA RD

STE 400

SAN DIEGO, CA 92123

Phone: (858) 966-5990

Fax: (858) 966-7508

After Hours Phone: (858)
966-5990

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

SHELLINGER, KRISTON

Provider Gender: Female

License Number: PSY26313

NPI: 1710234273

Provider English Spoken: Y

Cultural Competency: N

KRISTON B SHELLINGER

330 LEWIS ST

SAN DIEGO, CA 92103

Phone: (858) 246-1979

After Hours Phone: (858)
246-1979

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

SHELLINGER, KRISTON

Provider Gender: Female

D6. Directorio de salud mental

License Number: PSY26313

NPI: 1710234273

Provider English Spoken: Y

Cultural Competency: N

KRISTON B SCHELLINGER

9333 GENESEE AVE STE 200

SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

SCHELLINGER, KRISTON

Provider Gender: Female

License Number: PSY26313

NPI: 1710234273

Provider English Spoken: Y

Cultural Competency: N

KRISTON B SCHELLINGER

9909 MIRA MESA BLVD STE 200

SAN DIEGO, CA 92131

Phone: (858) 246-1979

After Hours Phone: (858) 246-1979

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

SCHLOSSER, TARA

Provider Gender: Female

License Number: MFC107868

NPI: 1407220437

Provider English Spoken: Y

Cultural Competency: N

TARA S SCHLOSSER

330 LEWIS ST

SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

SERIO, TAYLOR

Provider Gender: Female

License Number: LCS107050

NPI: 1093217382

Provider English Spoken: Y

Cultural Competency: N

TAYLOR L SERIO

7011 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858) 810-8700

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

SERIO, TAYLOR

Provider Gender: Female

License Number: LCS107050

NPI: 1093217382

Provider English Spoken: Y

Cultural Competency: N

TAYLOR L SERIO

6973 LINDA VISTA RD SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858) 279-0925

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

SHU, I WEI

Provider Gender: Male

License Number: A103813

NPI: 1992840144

Provider English Spoken: Y

D6. Directorio de salud mental

Cultural Competency: N

I WEI SHU

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (858) 534-6200

Fax: (858) 534-6205

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

SILVEY, CHRISTOPHER

Provider Gender: Male

License Number: LCS85942

NPI: 1932793502

Provider English Spoken: Y

Cultural Competency: N

CHRISTOPHER J SILVEY

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (858) 578-4220

Fax: (858) 578-4417

After Hours Phone: (858)
578-4220

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM

SOLORIO JR, ROBERTO

Provider Gender: Male

License Number: LCS102729

NPI: 1972088185

Provider English Spoken: Y

Cultural Competency: N

ROBERTO SOLORIO JR

4690 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

SUAREZ, ROBERTO

Provider Gender: Male

License Number: MFC25098

NPI: 1386785160

Provider English Spoken: Y

*Provider Language(s) Spoken:
Spanish*

Cultural Competency: N

ROBERTO SUAREZ

3025 BEYER BLVD
SAN DIEGO, CA 92154

Phone: (619) 662-4100

Fax: (619) 662-4119

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

SWEIGERT, JAMIE

Provider Gender: Female

License Number: LCS112304

NPI: 1396353595

Provider English Spoken: Y

Cultural Competency: N

JAMIE L SWEIGERT

2630 1ST AVE
SAN DIEGO, CA 92103

Phone: (619) 234-2158

Fax: (619) 234-0206

After Hours Phone: (619)
234-2158

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

TARLE, STEPHANIE

Provider Gender: Female

License Number: PSY32155

NPI: 1659920403

Provider English Spoken: Y

D6. Directorio de salud mental

Cultural Competency: N

STEPHANIE J TARLE

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

TILTON, PETER

Provider Gender: Male

License Number: G27781

NPI: 1538258694

Provider English Spoken: Y

Cultural Competency: N

PETER A TILTON

2630 1ST AVE
SAN DIEGO, CA 92103

Phone: (619) 234-2158

Fax: (619) 234-0206

After Hours Phone: (619)
234-2158

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

TO, TUAN

Provider Gender: Male

License Number: PSY30204

NPI: 1255696183

Provider English Spoken: Y

*Provider Language(s) Spoken:
Vietnamese*

Cultural Competency: N

TUAN TO

4290 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 563-0250

Fax: (858) 633-4681

After Hours Phone: (619)
563-0250

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 5\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

TO, TUAN

Provider Gender: Male

License Number: PSY30204

NPI: 1255696183

Provider English Spoken: Y

*Provider Language(s) Spoken:
Vietnamese*

Cultural Competency: N

TUAN TO

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 5\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

TO, TUAN

Provider Gender: Male

License Number: PSY30204

NPI: 1255696183

Provider English Spoken: Y

*Provider Language(s) Spoken:
Vietnamese*

Cultural Competency: N

TUAN TO

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 5\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

TROYER, EMILY

Provider Gender: Female

License Number: A149101

NPI: 1326484437

Provider English Spoken: Y

Cultural Competency: N

EMILY A TROYER

4305 UNIVERSITY AVE STE

D6. Directorio de salud mental

150
SAN DIEGO, CA 92105
 Phone: (619) 280-2058
Fax: (858) 633-4682
 After Hours Phone: (619)
280-2058
 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish


TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

TROYER, EMILY

Provider Gender: Female

License Number: A149101

NPI: 1326484437

Provider English Spoken: Y

Cultural Competency: N

EMILY A TROYER

 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
Fax: (858) 633-4681

 After Hours Phone: (619)
563-0250

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish


TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

TWAMLEY, ELIZABETH

Provider Gender: Female



License Number: PSY19150

NPI: 1700089141

Provider English Spoken: Y

Cultural Competency: N

ELIZABETH W TWAMLEY

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
Fax: (619) 687-1067

 After Hours Phone: (619)
233-8500

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-W
8:30AM-5:00PM
TH 8:30AM-9:00PM
F 8:30AM-5:00PM

WEISSMAN, CORY

Provider Gender: Male

License Number: A174625

NPI: 1528720661

Provider English Spoken: Y

Cultural Competency: N

CORY R WEISSMAN

 16918 DOVE CANYON RD

STE 100

SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

WU, MICHELLE

Provider Gender: Female

License Number: A125139


NPI: 1043650088


Provider English Spoken: Y

Cultural Competency: N

MICHELLE L WU

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8145
Fax: (858) 966-8164

 After Hours Phone: (858)
966-8145

 Website: N/A


Accepting New Patients: Yes


Site English Spoken: Y
TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

D6. Directorio de salud mental

YAGUDAYEVA, RAISA

Provider Gender: Female
License Number: 20A14848
NPI: 1942555990
Provider English Spoken: Y
Provider Language(s) Spoken:
Russian
Cultural Competency: N

RAISA YAGUDAYEVA

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

YIDI, DIANA

Provider Gender: Female
License Number: LCS110300
NPI: 1194438663
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N

DIANA L YIDI

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM

ZAYAS, MARIO

Provider Gender: Male
License Number: MFC111273
NPI: 1275943557
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: N

MARIO E ZAYAS

3025 BEYER BLVD STE
E-101

SAN DIEGO, CA 92154

Phone: (619) 662-4100

Fax: (619) 662-4119

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
9:00AM-7:00PM
W-F 9:00AM-6:00PM

ZIMMERMAN, JENNIFER

Provider Gender: Female
License Number: LCS28729
NPI: 1811449077

Provider English Spoken: Y

Cultural Competency: N

JENNIFER A ZIMMERMAN

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-9676

Fax: (858) 633-4680

After Hours Phone: (858)
279-9676

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

ZIMMERMAN, JENNIFER

Provider Gender: Female
License Number: LCS28729
NPI: 1811449077

Provider English Spoken: Y

Cultural Competency: N

JENNIFER A ZIMMERMAN

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Website: N/A

D6. Directorio de salud mental

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

SAN MARCOS

ALTAMIRANO, LEON

Provider Gender: Male

License Number: PSY23734

NPI: 1619271517


Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N


LEON ALTAMIRANO

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

ARIELLA, LYNDA

Provider Gender: Female

License Number: PSY19450


NPI: 1073518965

Provider English Spoken: Y

Cultural Competency: N

LYNDA R ARIELLA

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 5\50

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

CABREJOS, CLAUDIO

Provider Gender: Male

License Number: A71653

NPI: 1033133483


Provider English Spoken: Y

Provider Language(s) Spoken: Portuguese, Spanish

Cultural Competency: N

CLAUDIO O CABREJOS

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

FLYNN, DANIELLE

Provider Gender: Female

License Number: PSY26184


NPI: 1477785137

Provider English Spoken: Y

Cultural Competency: N

DANIELLE I FLYNN

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

GEORGIEV, MARY-JO

Provider Gender: Female

License Number: PSY17954

NPI: 1518996875


Provider English Spoken: Y

Cultural Competency: N

D6. Directorio de salud mental

MARY-JO GEORGIEV

 150 VALPRED A RD
SAN MARCOS, CA 92069


 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

IMAM, SYED

Provider Gender: Male

License Number: PSY27695

NPI: 1447428271

Provider English Spoken: Y


Provider Language(s) Spoken:

Hindi, Urdu

Cultural Competency: N


SYED IMAM

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767


Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish


TDD: U

Min/Max Age: 15\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

REEG, JESSICA

Provider Gender: Female

License Number: MFC124306

NPI: 1144382987


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

JESSICA REEG

 150 VALPRED A RD
SAN MARCOS, CA 92069


 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-5:00PM

SIMPSON, ERIC

Provider Gender: Male

License Number: PSY28885


NPI: 1710110416

Provider English Spoken: Y

Cultural Competency: N

ERIC SIMPSON

 150 VALPRED A RD
SAN MARCOS, CA 92069


 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

SOLORIO JR, ROBERTO

Provider Gender: Male

License Number: LCS102729


NPI: 1972088185

Provider English Spoken: Y

Cultural Competency: N


ROBERTO SOLORIO JR

 150 VALPRED A RD
SAN MARCOS, CA 92069


 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

TONG, GARRICK

Provider Gender: Male

License Number: A102192

NPI: 1831361278

Provider English Spoken: Y

D6. Directorio de salud mental

Provider Language(s) Spoken: Cantonese

Cultural Competency: N

GARRICK G TONG

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 4\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 8:00AM-5:00PM

TORRES, HECTOR

Provider Gender: Male

License Number: PSY13309

NPI: 1720265614

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

HECTOR M TORRES

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

SAN YSIDRO

BALTRUS, JUSTINE ANN

Provider Gender: Female

License Number: MFC132018

NPI: 1285040709

Provider English Spoken: Y

Provider Language(s) Spoken:
Tagalog

Cultural Competency: N

JUSTINE ANN A BALTRUS

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 600-4870

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

CRAWFORD-DAY, ANN

Provider Gender: Female

License Number: A166646

NPI: 1386149706

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ANN E CRAWFORD-DAY

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM

DEPAOLO, AMANDA

Provider Gender: Female

License Number: LCS99056

NPI: 1215420138

Provider English Spoken: Y

Cultural Competency: N

AMANDA L DEPAOLO

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100





Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

D6. Directorio de salud mental



 Site English Spoken: Y
 Site Language(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM






FONTANA, LOUIS

Provider Gender: Male
License Number: G49072
NPI: 1780734343
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Spanish
Cultural Competency: N
LOUIS A FONTANA

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM




GONZALEZ-GARCIA, CAROLINA

Provider Gender: Female
License Number: MFC41111
NPI: 1215321955
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
CAROLINA GONZALES GARCIA
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 600-4870








 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

IBANEZ, BERENICE

Provider Gender: Female
License Number: PSY22080
NPI: 1740394386
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
BERENICE B IBANEZ
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619) 662-4100

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

JAMES, CHRISTINE

Provider Gender: Female
License Number: 20A13931
NPI: 1679834022
Provider English Spoken: Y
Cultural Competency: N
CHRISTINE E JAMES
 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 785-3384
 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

JENNINGS, AMY

Provider Gender: Female
License Number: LCS100075
NPI: 1609549161
Provider English Spoken: Y
Cultural Competency: N

D6. Directorio de salud mental

AMY E JENNINGS

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100
 Website: N/A

Accepting New Patients: Yes



Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL): Spanish





N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM

JIMENEZ, NANCY

Provider Gender: Female
License Number: MFC141209
NPI: 1568023596
Provider English Spoken: Y
Cultural Competency: N

NANCY JIMENEZ

 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 785-3384
 After Hours Phone: (619)
662-4100
 Website: N/A



Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL): Cultural Competency: N
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

LOPEZ, MARIBEL

Provider Gender: Female
License Number: LCS86171
NPI: 1669180600
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: N

MARIBEL, LOPEZ

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100
 Website: N/A

Accepting New Patients: Yes



Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):


N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM

PETERSEN, KATE

Provider Gender: Female
License Number: MFC130200
NPI: 1598237281
Provider English Spoken: Y

KATE PETERSEN

 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 785-3384
 After Hours Phone: (619)
662-4100
 Website: N/A

Accepting New Patients: Yes



Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

SANTEE





MEAGHER, RAISHELLE

Provider Gender: Female
License Number: LCS109804
NPI: 1851821904

Provider English Spoken: Y

Cultural Competency: N

RAISHELLE L MEAGHER

 120 TOWN CENTER PKWY
SANTEE, CA 92071
 Phone: (619) 662-4100
Fax: (619) 662-4196
 After Hours Phone: (619)
662-4100
 Website: N/A


Accepting New Patients: Yes


Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

D6. Directorio de salud mental

American Sign Language (ASL): *Provider Language(s) Spoken:* N
Spanish

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

VALLEY CENTER

PLASCENCIA, CINDY

Provider Gender: Female

License Number: MFC113536

NPI: 1952723736


Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

CINDY PLASCENCIA

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 *Phone: (760) 742-9919*

Fax: (360) 462-2750

 *After Hours Phone: (760)
742-9919*

 *Website: N/A*

Accepting New Patients: Yes

 *Site English Spoken: Y*

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL): N

N

 *Accessibility: CONTACT PROVIDER*

VISTA

ACOSTA, AZUCENA

Provider Gender: Female

License Number: LCS98304


NPI: 1255937496

Provider English Spoken: Y

Cultural Competency: N

AZUCENA ACOSTA

 134 GRAPEVINE RD
VISTA, CA 92083

 *Phone: (760) 631-5000*

Fax: (760) 414-3892

 *After Hours Phone: (760)
631-5000*

 *Website: N/A*

Accepting New Patients: Yes


 *Site English Spoken: Y*

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM*

ACOSTA, AZUCENA

Provider Gender: Female

License Number: LCS98304


NPI: 1255937496

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish


Cultural Competency: N


AZUCENA ACOSTA

 1000 VALE TERRACE DR
VISTA, CA 92084

 *Phone: (760) 631-5000*

Fax: (760) 414-3892

 *After Hours Phone: (760)
631-5000*

 *Website: N/A*

Accepting New Patients: Yes


 *Site English Spoken: Y*

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH
8:00AM-2:00PM
F 8:00AM-5:00PM
SA 9:00AM-6:00PM*

BELL, JENNIFER

Provider Gender: Female

License Number: 20A20702


NPI: 1154614956

Provider English Spoken: Y

Cultural Competency: N

JENNIFER L BELL

 134 GRAPEVINE RD
VISTA, CA 92083

 *Phone: (760) 631-5000*


Fax: (760) 414-3892

 *After Hours Phone: (760)
631-5000*

 *Website: N/A*

Accepting New Patients: Yes

 *Site English Spoken: Y*


 *Site Language(s) Spoken:* Lithuanian, Urdu, Chinese, Vietnamese, Farsi, Tagalog, Arabic, Spanish

TDD: U

Min/Max Age: 5\80

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM*

BELL, JENNIFER

Provider Gender: Female

D6. Directorio de salud mental

License Number: 20A20702

NPI: 1154614956

Provider English Spoken: Y

Cultural Competency: N

JENNIFER L BELL

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Chinese, Farsi, Estonian,
Vietnamese, Hindi, Tagalog,
French, Korean, Marathi,
Spanish, Telugu

TDD: U

Min/Max Age: 5\80

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

BELL, JENNIFER

Provider Gender: Female

License Number: 20A20702

NPI: 1154614956

Provider English Spoken: Y

Cultural Competency: N

JENNIFER L BELL

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Chinese, Farsi, Estonian,
Vietnamese, Hindi, Tagalog,
French, Korean, Marathi,
Spanish, Telugu

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Chinese, Korean, Marathi,
French, Estonian, Telugu,
Farsi, Vietnamese, Hindi,
Spanish, Tagalog

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Chinese, Korean, Marathi,
French, Estonian, Telugu,
Farsi, Vietnamese, Hindi,
Spanish, Tagalog

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

D6. Directorio de salud mental

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166

NPI: 1285170662

Provider English Spoken: Y

Cultural Competency: N
VANESSA Y CRUZ

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Vietnamese, Chinese,
Estonian, Farsi, French,
Hindi, Korean, Marathi,
Spanish, Tagalog, Telugu
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:00AM-8:00PM
W 9:00AM-7:00PM
TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166

NPI: 1285170662

Provider English Spoken: Y

Cultural Competency: N
VANESSA Y CRUZ

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
9:00AM-7:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166

NPI: 1285170662

Provider English Spoken: Y

Cultural Competency: N

D6. Directorio de salud mental

VANESSA Y CRUZ

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Vietnamese, Chinese,
Estonian, Farsi, French,
Hindi, Korean, Marathi,
Spanish, Tagalog, Telugu

TDD: U

Min/Max Age: 4\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:00AM-8:00PM
W 9:00AM-7:00PM
TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166

NPI: 1285170662

Provider English Spoken: Y

Cultural Competency: N

VANESSA Y CRUZ

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 4\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
9:00AM-7:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

DOUGHERTY, CHRISTINE

Provider Gender: Female

License Number: LCS26686

NPI: 1003194960

Provider English Spoken: Y
Cultural Competency: N

CHRISTINE A DOUGHERTY

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

DOUGHERTY, CHRISTINE

Provider Gender: Female

License Number: LCS26686

NPI: 1003194960

Provider English Spoken: Y

Cultural Competency: N

CHRISTINE A DOUGHERTY

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Chinese, Estonian, Farsi,
French, Hindi, Korean,
Marathi, Spanish, Telugu,
Vietnamese, Tagalog

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
9:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

MENDEZ, ADRIANA

Provider Gender: Female

License Number: LCS86435

NPI: 1356777361

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ADRIANA J MENDEZ

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


D6. Directorio de salud mental


TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-8:00PM
SA 9:00AM-4:00PM

MENDEZ, ADRIANA

Provider Gender: Female

License Number: LCS86435

NPI: 1356777361


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ADRIANA J MENDEZ

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

MEYERHOF, GRETA

Provider Gender: Female

License Number: MFC32299


NPI: 1487196333

Provider English Spoken: Y

Cultural Competency: N

GRETA R MEYERHOF

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

MEYERHOF, GRETA

Provider Gender: Female


License Number: MFC32299


NPI: 1487196333

Provider English Spoken: Y

Cultural Competency: N

GRETA R MEYERHOF

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

NEVILLE, MARGARET

Provider Gender: Female

License Number: LCS82407


NPI: 1073682407

Provider English Spoken: Y

Cultural Competency: N

MARGARET R NEVILLE

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Language(s) Spoken:
Arabic, Chinese, Lithuanian,
Farsi, Spanish, Tagalog,
Urdu, Vietnamese


TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:00PM

NEVILLE, MARGARET

Provider Gender: Female

License Number: LCS82407


NPI: 1073682407

Provider English Spoken: Y


Cultural Competency: N

MARGARET R NEVILLE

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A


D6. Directorio de salud mental

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PATEL, MITESH

Provider Gender: Male

License Number: A181164


NPI: 1568880292

Provider English Spoken: Y

Cultural Competency: N

MITESH K PATEL


 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

PATEL, MITESH

Provider Gender: Male

License Number: A181164


NPI: 1568880292

Provider English Spoken: Y


Cultural Competency: N

MITESH K PATEL


 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

SANCHEZ, ADRIANA

Provider Gender: Female

License Number: LCS97093

NPI: 1609450451


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ADRIANA SANCHEZ


 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

SANCHEZ, ADRIANA

Provider Gender: Female

License Number: LCS97093

NPI: 1609450451


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ADRIANA SANCHEZ


 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

SLOAN, CRISTINA

Provider Gender: Female

License Number: MFC137279


NPI: 1912456377

Provider English Spoken: Y

Cultural Competency: N


CRISTINA I SLOAN

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

D6. Directorio de salud mental

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y


Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

SLOAN, CRISTINA

Provider Gender: Female

License Number: MFC137279


NPI: 1912456377

Provider English Spoken: Y

Cultural Competency: N

CRISTINA I SLOAN

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y


Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

SLOAN, CRISTINA

Provider Gender: Female

License Number: MFC137279


NPI: 1912456377

Provider English Spoken: Y

Cultural Competency: N

CRISTINA I SLOAN

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

SMITH, SONYA

Provider Gender: Female

License Number: LCS82598

NPI: 1902070857


Provider English Spoken: Y


Provider Language(s) Spoken:
Spanish

Cultural Competency: N

SONYA L SMITH

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: N/A


Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

SMITH, SONYA

Provider Gender: Female

License Number: LCS82598

NPI: 1902070857


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N


SONYA L SMITH

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

WILSON, CARLENE

Provider Gender: Female

License Number: LCS74685

NPI: 1508327081

Provider English Spoken: Y


Cultural Competency: N

D6. Directorio de salud mental

CARLENE WILSON

SA 9:00AM-4:00PM

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

WILSON, CARLENE

Provider Gender: Female

License Number: LCS74685


NPI: 1508327081

Provider English Spoken: Y

Cultural Competency: N

CARLENE WILSON

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH

8:00AM-8:00PM

F 8:00AM-5:00PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

ALPINE

AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish, Vietnamese

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

BINDER, NICHOLAS, MD

Provider Gender: Male

License Number: A124698

NPI: 1306076716

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

DEAN, MOENA, OD

Provider Gender: Female

License Number: 33955

NPI: 1265927578

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

KALBAKJI, NATALY, OD
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken:
Arabic
Cultural Competency: Y
WEST COAST EYE CARE
 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
 Phone: (619) 445-2687
Fax: (619) 445-0801
 After Hours Phone: (619)
445-2687

Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

KATZMAN, BARRY, MD
Provider Gender: Male
License Number: A34834
NPI: 1760473797
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
WEST COAST EYE CARE
 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
 Phone: (619) 445-2687
Fax: (619) 445-0801
 After Hours Phone: (619)
445-2687
Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Provider Language(s) Spoken:
Arabic
Cultural Competency: Y
WEST COAST EYE CARE
 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
 Phone: (619) 445-2687

Fax: (619) 445-0801
 After Hours Phone: (619)
445-2687
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

KHIEU, TINA, OD
Provider Gender: Female
License Number: 34777
NPI: 1962031617
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
 Phone: (619) 445-2687
Fax: (619) 445-0801
 After Hours Phone: (619)
445-2687

Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM

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F 9:00AM-4:00PM

MARR, RYAN, OD
Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

MCGRAW, JOSEPH, MD
Provider Gender: Male
License Number: A155228
NPI: 1588624852
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687

Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

MORRISON REYES, JOSHUA, MD
Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
Provider Language(s) Spoken: Indonesian, Spanish
Cultural Competency: Y
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687

Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM

F 9:00AM-4:00PM

PATEL, SARJAN, MD
Provider Gender: Male
License Number: A114976
NPI: 1316199326
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: Y
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

PATEL, GITANE, MD
Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

☎ After Hours Phone: (619) 445-2687

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

WEST COAST EYE CARE

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

☎ Phone: (619) 445-2687

Fax: (619) 445-0801

☎ After Hours Phone: (619) 445-2687

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM

TH 8:00AM-5:00PM

F 9:00AM-4:00PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

☎ Phone: (619) 445-2687

Fax: (619) 445-0801

☎ After Hours Phone: (619) 445-2687

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

WEST COAST EYE CARE

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

☎ Phone: (619) 445-2687

Fax: (619) 445-0801

☎ After Hours Phone: (619) 445-2687

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

ZAIDI, NOORINA, OD

Provider Gender: Female

License Number: 35615

NPI: 1023477262

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

☎ Phone: (619) 445-2687

Fax: (619) 445-0801

☎ After Hours Phone: (619) 445-2687

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

F 9:00AM-4:00PM

BONITA

CHA, DANIEL, OD

Provider Gender: Male

License Number: 14779

NPI: 1386078020

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

EYECARE OF BONITA

4502 BONITA RD
BONITA, CA 91902

Phone: (619) 479-7334

Fax: (619) 475-3456

After Hours Phone: (619)
479-7334

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 8:00AM-6:30PM
W 8:00AM-6:00PM
TH 12:30AM-6:00PM
F 8:00AM-6:00PM
SA 9:00AM-2:00PM

CARLSBAD

HO, TRAM, OD

Provider Gender: Female

License Number: 13485

NPI: 1245464460

Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

EYE STYLE OPTOMETRY

5814 VAN ALLEN WAY STE
146

CARLSBAD, CA 92008

Phone: (760) 606-2020

After Hours Phone: (760)
606-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: TU 9:00AM-5:00PM
W 10:00AM-6:00PM
TH 9:00AM-5:00PM
F 8:00AM-4:00PM
SA 9:00AM-3:00PM

CHULA VISTA

CASTILLEJOS, DAVID, MD

Provider Gender: Male

License Number: A44482

NPI: 1558446401

Provider English Spoken: Y

Provider Language(s) Spoken:
French, Portuguese, Spanish,
Tagalog

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE
MED GROUP

342 F ST

CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 271-7044

After Hours Phone: (619)
422-1471

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
French, Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 8:00AM-5:00PM
TU 7:00AM-5:00PM
W-F 8:00AM-5:00PM

CASTILLEJOS, MARIA, MD

Provider Gender: Female

License Number: A37652

NPI: 1043395098

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE
MED GROUP

342 F ST

CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 271-7044

After Hours Phone: (619)
422-1471

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
French, Spanish, Tagalog


American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

1/2 mile from Site): 1T

 Hours: M 8:00AM-5:00PM
TU 7:00AM-5:00PM
W-F 8:00AM-5:00PM

CHAN, KWOK FUNG, OD

Provider Gender: Male


License Number: 35087


NPI: 1407508385

Provider English Spoken: Y


Cultural Competency: Y

VILLA OPTOMETRY INC

 523 TELEGRAPH CANYON
RD
CHULA VISTA, CA 91910

 Phone: (619) 482-2020

Fax: (619) 482-2671

 After Hours Phone: (619)
482-2020


Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-TU
9:00AM-6:00PM
W 11:00AM-6:00PM
TH-F 9:00AM-6:00PM

CHISHOLM, KAREN, OD

License Number: 35450

NPI: 1568155190


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish


Cultural Competency: Y

OTAY RANCH EYEWORKS

OPTOMETRY

 1741 EASTLAKE PKWY STE
101

CHULA VISTA, CA 91915

 Phone: (619) 421-6600

Fax: (619) 421-6006

 After Hours Phone: (619)
421-6600

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: SU 10:00AM-4:00PM
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM

HUANG, PETER, OD

Provider Gender: Male

License Number: 11659

NPI: 1639100522


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

PETER D HUANG OD INC

 557 H ST
CHULA VISTA, CA 91910

 Phone: (619) 422-0139

Fax: (619) 422-0066

 After Hours Phone: (619)
422-0139

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M 9:00AM-5:00PM
TU 9:00AM-6:00PM
W 9:00AM-5:00PM
TH 9:00AM-6:00PM
F 8:00AM-4:00PM
SA 9:00AM-2:00PM

KALRA, ANKUR, OD

Provider Gender: Male

License Number: 11898

NPI: 1124195789

Provider English Spoken: Y


Provider Language(s) Spoken:
Hindi

Cultural Competency: Y

OTAY RANCH EYEWORKS
OPTOMETRY

 1741 EASTLAKE PKWY STE
101

CHULA VISTA, CA 91915

 Phone: (619) 421-6600

Fax: (619) 421-6006

 After Hours Phone: (619)
421-6600

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U




 Hours: SU 10:00AM-4:00PM
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista



KEDDINGTON, JOAN, OD

Provider Gender: Female
License Number: 6263
NPI: 1992872691
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y


OTAY RANCH EYEWORKS OPTOMETRY

 1741 EASTLAKE PKWY STE
101
CHULA VISTA, CA 91915
 *Phone: (619) 421-6600*
Fax: (619) 421-6006
 *After Hours Phone: (619)*
421-6600


Accepting New Patients: Yes

 *Site English Spoken: Y*
 *Site Language(s) Spoken:*
Arabic, Hindi, Spanish

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*




*Public transportation (within
1/2 mile from Site): 1U*

 *Hours: SU 10:00AM-4:00PM*
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM



KING, MARY, OD

Provider Gender: Female
License Number: 13711
NPI: 1578792107
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
OTAY RANCH EYEWORKS

OPTOMETRY

 1741 EASTLAKE PKWY STE
101
CHULA VISTA, CA 91915
 *Phone: (619) 421-6600*
Fax: (619) 421-6006
 *After Hours Phone: (619)*
421-6600


Accepting New Patients: Yes

 *Site English Spoken: Y*
 *Site Language(s) Spoken:*
Arabic, Hindi, Spanish

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

*Public transportation (within
1/2 mile from Site): 1U*



 *Hours: SU 10:00AM-4:00PM*
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM


MASCARENO, EFRAIN, OD

Provider Gender: Male
License Number: 10906
NPI: 1457507279



Provider English Spoken: Y
Cultural Competency: Y

CLEAR VISION OPTOMETRY

DR MASCARENO
 440 4TH AVE
CHULA VISTA, CA 91910
 *Phone: (619) 427-2020*
Fax: (866) 254-5707

 *After Hours Phone: (619)*
427-2020


Accepting New Patients: Yes

 *Site English Spoken: Y*
 *Site Language(s) Spoken:*
Spanish

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

*Public transportation (within
1/2 mile from Site): 1T*


 *Hours: M-TH*
9:00AM-6:00PM
F 9:00AM-5:00PM

MASCARENO, EFRAIN, OD

Provider Gender: Male
License Number: 10906
NPI: 1457507279



Provider English Spoken: Y
Cultural Competency: Y

EASTLAKE VISION CENTER DR MASCARENO


 2260 OTAY LAKES RD STE
111
CHULA VISTA, CA 91915
 *Phone: (619) 421-5550*
Fax: (619) 421-6022

 *After Hours Phone: (619)*
421-5550


Accepting New Patients: Yes

 *Site English Spoken: Y*
 *Site Language(s) Spoken:*
Spanish

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

*Public transportation (within
1/2 mile from Site): 1U*

 *Hours: M-F*
9:00AM-6:00PM
SA 9:00AM-3:00PM

NGUYEN, TRACY, OD

Provider Gender: Female
License Number: 10859
NPI: 1265596621

Provider English Spoken: Y

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

ESSENTIAL EYECARE

OPTOMETRY

345 F ST STE 240
CHULA VISTA, CA 91910

Phone: (858) 467-0655

Fax: (619) 425-9797

After Hours Phone: (858)
467-0655

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TH
10:00AM-3:00PM

NGUYEN, THERESA, OD

Provider Gender: Female

License Number: 35530TLG

NPI: 1609555713

Provider English Spoken: Y

Cultural Competency: Y

OTAY RANCH EYEWORKS

OPTOMETRY

1741 EASTLAKE PKWY STE
101

CHULA VISTA, CA 91915

Phone: (619) 421-6600

Fax: (619) 421-6006

After Hours Phone: (619)
421-6600

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:

Arabic, Hindi, Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: SU 10:00AM-4:00PM
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM

PHAM, NINA, OD

Provider Gender: Female

License Number: 35360

NPI: 1598403867

Provider English Spoken: Y

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE
MED GROUP

342 F ST
CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 271-7044

After Hours Phone: (619)
422-1471

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
French, Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 8:00AM-5:00PM
TU 7:00AM-5:00PM
W-F 8:00AM-5:00PM

PLUCINIK, STANLEY, OD

Provider Gender: Male

License Number: 35255

NPI: 1124751417

Provider English Spoken: Y

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE
MED GROUP

342 F ST
CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 271-7044

After Hours Phone: (619)
422-1471

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
French, Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 8:00AM-5:00PM
TU 7:00AM-5:00PM
W-F 8:00AM-5:00PM

SCOVILL, ALEXANDRA, OD

Provider Gender: Female

License Number: 33711

NPI: 1184146094

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE
MED GROUP

342 F ST
CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 271-7044

After Hours Phone: (619)
422-1471

Accepting New Patients: Yes

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Site English Spoken: Y
 Site Languages(s) Spoken: French, Spanish, Tagalog
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M 8:00AM-5:00PM
 TU 7:00AM-5:00PM
 W-F 8:00AM-5:00PM

SOLIS, KEVIN, OD

Provider Gender: Male
 License Number: 10420
 NPI: 1538362116
 Provider English Spoken: Y
 Cultural Competency: Y
 OTAY RANCH EYEWORKS OPTOMETRY
 1741 EASTLAKE PKWY STE 101
 CHULA VISTA, CA 91915
 Phone: (619) 421-6600
 Fax: (619) 421-6006
 After Hours Phone: (619) 421-6600
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Arabic, Hindi, Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: SU 10:00AM-4:00PM
 M-F 9:00AM-7:00PM
 SA 9:00AM-5:00PM

TOUBIA, ELIAS, OD

Provider Gender: Male
 License Number: 33758
 NPI: 1740701481
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic
 Cultural Competency: Y
 OTAY RANCH EYEWORKS OPTOMETRY
 1741 EASTLAKE PKWY STE 101
 CHULA VISTA, CA 91915
 Phone: (619) 421-6600
 Fax: (619) 421-6006
 After Hours Phone: (619) 421-6600
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Arabic, Hindi, Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: SU 10:00AM-4:00PM
 M-F 9:00AM-7:00PM
 SA 9:00AM-5:00PM

VILLA, ANGELICA, OD

Provider Gender: Female
 License Number: 10561
 NPI: 1962544965
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: Y
 VILLA OPTOMETRY INC
 523 TELEGRAPH CANYON

RD

CHULA VISTA, CA 91910
 Phone: (619) 482-2020
 Fax: (619) 482-2671
 After Hours Phone: (619) 482-2020
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TU 9:00AM-6:00PM
 W 11:00AM-6:00PM
 TH-F 9:00AM-6:00PM

CORONADO

COCKERHAM, KIMBERLY, MD

Provider Gender: Female
 License Number: G86885
 NPI: 1366493629
 Provider English Spoken: Y
 Cultural Competency: Y
 ALVARADO EYE ASSOCIATES MED CLINIC INC
 801 ORANGE AVE STE 204
 CORONADO, CA 92118
 Phone: (619) 437-4406
 Fax: (619) 522-7983
 After Hours Phone: (619) 437-4406
 Accepting New Patients: Yes
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

PROVIDER
Public transportation (within
1/2 mile from Site): 1U
⌚ Hours: M 9:00AM-4:30PM
TU 9:00AM-3:00PM
W-TH 9:00AM-4:30PM

GRAY, IGA, MD

Provider Gender: Female
License Number: A174875
NPI: 1033538350
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC

📍 801 ORANGE AVE STE 204
CORONADO, CA 92118
☎ Phone: (619) 437-4406
Fax: (619) 522-7983
⌚ After Hours Phone: (619)
437-4406
Accepting New Patients: Yes
📄 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
⌚ Hours: M 9:00AM-4:30PM
TU 9:00AM-3:00PM
W-TH 9:00AM-4:30PM

KATZMAN, LEE, MD

Provider Gender: Male
License Number: A135673
NPI: 1912297284
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC

📍 801 ORANGE AVE STE 204
CORONADO, CA 92118
☎ Phone: (619) 437-4406
Fax: (619) 522-7983
⌚ After Hours Phone: (619)
437-4406
Accepting New Patients: Yes
📄 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
⌚ Hours: M 9:00AM-4:30PM
TU 9:00AM-3:00PM
W-TH 9:00AM-4:30PM

MANNEN, JOSEPH, OD

Provider Gender: Male
License Number: 33650
NPI: 1851827034
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC
📍 801 ORANGE AVE STE 204
CORONADO, CA 92118
☎ Phone: (619) 437-4406
Fax: (619) 522-7983
⌚ After Hours Phone: (619)
437-4406
Accepting New Patients: Yes

📄 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
⌚ Hours: M 9:00AM-4:30PM
TU 9:00AM-3:00PM

W-TH 9:00AM-4:30PM

OU, JOCELYN, OD

Provider Gender: Female
License Number: 34063
NPI: 1225518996
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC
📍 801 ORANGE AVE STE 204
CORONADO, CA 92118
☎ Phone: (619) 437-4406
Fax: (619) 522-7983
⌚ After Hours Phone: (619)
437-4406
Accepting New Patients: Yes

📄 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
⌚ Hours: M 9:00AM-4:30PM
TU 9:00AM-3:00PM
W-TH 9:00AM-4:30PM

YOUNG, ALLA, OD

Provider Gender: Female
License Number: 34191
NPI: 1285085142
Provider English Spoken: Y
Provider Language(s) Spoken:
Russian
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC
📍 801 ORANGE AVE STE 204
CORONADO, CA 92118
☎ Phone: (619) 437-4406

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Fax: (619) 522-7983

☏ After Hours Phone: (619)
437-4406

Accepting New Patients: Yes

☐ Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 9:00AM-4:30PM
TU 9:00AM-3:00PM
W-TH 9:00AM-4:30PM

EL CAJON

AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish, Vietnamese

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400
Fax: (619) 440-0239

☏ After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

☐ Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F

8:30AM-6:00PM

ASIS, STEPHANIE, OD

Provider Gender: Female

License Number: 34013

NPI: 1902383540

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400
Fax: (619) 440-0239

☏ After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

☐ Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400
Fax: (619) 440-0239

☏ After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

☐ Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

BINDER, NICHOLAS, MD

Provider Gender: Male

License Number: A124698

NPI: 1306076716

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400
Fax: (619) 440-0239

☏ After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

☐ Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

BUTLER, KIM, OD

Provider Gender: Male

License Number: 6405

NPI: 1467444844

Provider English Spoken: Y

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Cultural Competency: Y

KIM J BUTLER OD

1273 BROADWAY
EL CAJON, CA 92021

Phone: (619) 579-2345

Fax: (619) 579-0876

After Hours Phone: (619)
579-2345

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-12:00AM

CHAN, KWOK FUNG, OD

Provider Gender: Male

License Number: 35087

NPI: 1407508385

Provider English Spoken: Y

Cultural Competency: Y

WERNER OPTOMETRY

2650 JAMACHA RD STE 155
EL CAJON, CA 92019

Phone: (619) 670-6296

Fax: (619) 670-8852

After Hours Phone: (619)
670-6296

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Italian, Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1T

Hours: M 9:00AM-5:00PM

TU 10:00AM-5:00PM

W-TH 9:00AM-5:00PM

F 8:00AM-2:00PM

DEAN, MOENA, OD

Provider Gender: Female

License Number: 33955

NPI: 1265927578

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400

Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1T

Hours: M-F
8:30AM-6:00PM

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400

Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-6:00PM

HAMOUIE, JUDY, OD

Provider Gender: Female

License Number: 34984

NPI: 1518638287

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400

Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-6:00PM

HAN, SULKI, OD

Provider Gender: Female

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

License Number: 34171

NPI: 1750802195

Provider English Spoken: Y

Provider Language(s) Spoken:
Korean

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400

Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-6:00PM

HSU, CHRISTOPHER, MD

Provider Gender: Male

License Number: A65973

NPI: 1336167618

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400

Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-6:00PM

KATZMAN, BARRY, MD

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400

Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-6:00PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Arabic

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400

Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-6:00PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400

Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Public transportation (within 1/2 mile from Site): IT

🕒 Hours: M-F
8:30AM-6:00PM

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

🗒 Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): IT

🕒 Hours: M-F
8:30AM-6:00PM

MCMURREN, BRITTANY, OD

Provider Gender: Female

License Number: 14824

NPI: 1104243815

Provider English Spoken: Y

Cultural Competency: Y

WERNER OPTOMETRY

📍 2650 JAMACHA RD STE 155
EL CAJON, CA 92019

☎ Phone: (619) 670-6296

Fax: (619) 670-8852

🕒 After Hours Phone: (619)
670-6296

Accepting New Patients: Yes

🗒 Site English Spoken: Y

🗒 Site Languages(s) Spoken:
Italian, Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): IT

🕒 Hours: M 9:00AM-5:00PM
TU 10:00AM-5:00PM
W-TH 9:00AM-5:00PM
F 8:00AM-2:00PM

PANDYA, BHUMIKA, OD

Provider Gender: Female

License Number: 35025

NPI: 1063182822

Provider English Spoken: Y

Provider Language(s) Spoken:
Hindi

Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

🗒 Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): IT

🕒 Hours: M-F

8:30AM-6:00PM

PATEL, GITANE, MD

Provider Gender: Male

License Number: A108603

NPI: 1710171434

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

🗒 Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): IT

🕒 Hours: M-F
8:30AM-6:00PM

PATEL, SARJAN, MD

Provider Gender: Male

License Number: A114976

NPI: 1316199326

Provider English Spoken: Y

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish

Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

☉ After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F

8:30AM-6:00PM

SCOTT, JEFFREY, OD

Provider Gender: Male

License Number: 34978

NPI: 1568813434

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

☉ After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F

8:30AM-6:00PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

☉ After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F

8:30AM-6:00PM

TONNU, ANH, OD

Provider Gender: Female

License Number: 11318

NPI: 1679521280

Provider English Spoken: Y

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

☉ After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F

8:30AM-6:00PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177

NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

☉ After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F

8:30AM-6:00PM

WERNER, REX, OD

Provider Gender: Male

License Number: 9378

NPI: 1891760716

Provider English Spoken: Y

Provider Language(s) Spoken:

Italian, Spanish

Cultural Competency: Y

WERNER OPTOMETRY

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

2650 JAMACHA RD STE 155
EL CAJON, CA 92019

Phone: (619) 670-6296

Fax: (619) 670-8852

After Hours Phone: (619)
670-6296

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Italian, Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 9:00AM-5:00PM
TU 10:00AM-5:00PM
W-TH 9:00AM-5:00PM
F 8:00AM-2:00PM

WERNER, R AARON, OD

Provider Gender: Male

License Number: 13478

NPI: 1821259458

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

WERNER OPTOMETRY

2650 JAMACHA RD STE 155
EL CAJON, CA 92019

Phone: (619) 670-6296

Fax: (619) 670-8852

After Hours Phone: (619)
670-6296

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Italian, Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 9:00AM-5:00PM
TU 10:00AM-5:00PM
W-TH 9:00AM-5:00PM
F 8:00AM-2:00PM

ZAIDI, NOORINA, OD

Provider Gender: Female

License Number: 35615

NPI: 1023477262

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400

Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-6:00PM

ZHAO, TAILUN, MD

Provider Gender: Male

License Number: C186414

NPI: 1952659203

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400

Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-6:00PM

ZVANUT, DONALD, OD

Provider Gender: Male

License Number: 8642

NPI: 1336211804

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400

Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-6:00PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

ENCINITAS

ADAMS, MONA, OD

Provider Gender: Female
License Number: 14457
NPI: 1942564521
Provider English Spoken: Y
Cultural Competency: Y

RADY CHILDRENS HOSPITAL
ENCINITAS

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (858) 309-7702
Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

AOTO, KIM, OD

Provider Gender: Female
License Number: 14524
NPI: 1780935650
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish, Vietnamese
Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

BANSAL, PREETI, MD

Provider Gender: Female
License Number: A90890
NPI: 1871664631
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y

RADY CHILDRENS HOSPITAL
ENCINITAS

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (858) 309-7702
Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F

8:00AM-5:00PM

BAUMANN, DANIELA, OD

Provider Gender: Female
License Number: 34530
NPI: 1982232146
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

BHATIA, SHAGUN, MD

Provider Gender: Female
License Number: A154902
NPI: 1104237353
Provider English Spoken: Y
Cultural Competency: Y

RADY CHILDRENS HOSPITAL
ENCINITAS

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (858) 309-7702
Fax: (858) 966-7403

After Hours Phone: (858)

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

309-7702
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M-F
8:00AM-5:00PM

CHANG, TOM, MD

Provider Gender: Male
License Number: A69909
NPI: 1609848969
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
 Phone: (760) 943-7141
Fax: (760) 943-0371
 After Hours Phone: (760)
943-7141
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

CHIU, STEPHAN, MD

Provider Gender: Male
License Number: A172634
NPI: 1053846956

Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
 Phone: (760) 943-7141
Fax: (760) 943-0371
 After Hours Phone: (760)
943-7141
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

DEAN, MOENA, OD

Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
 Phone: (760) 943-7141
Fax: (760) 943-0371
 After Hours Phone: (760)
943-7141
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Public transportation (within
1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

DYER, SHARON, OD

Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
 Phone: (760) 943-7141
Fax: (760) 943-0371
 After Hours Phone: (760)
943-7141
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

FISH, STEVEN, MD

Provider Gender: Male
License Number: A164497
NPI: 1760877120
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
 Phone: (760) 943-7141

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Fax: (760) 943-0371

☎ After Hours Phone: (760) 943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:00AM-5:00PM

HAMOUIE, JUDY, OD

Provider Gender: Female

License Number: 34984

NPI: 1518638287

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104 ENCINITAS, CA 92024

☎ Phone: (760) 943-7141

Fax: (760) 943-0371

☎ After Hours Phone: (760) 943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:00AM-5:00PM

HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091

NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104 ENCINITAS, CA 92024

☎ Phone: (760) 943-7141

Fax: (760) 943-0371

☎ After Hours Phone: (760) 943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:00AM-5:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic

Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104 ENCINITAS, CA 92024

☎ Phone: (760) 943-7141

Fax: (760) 943-0371

☎ After Hours Phone: (760) 943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:00AM-5:00PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic

Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104 ENCINITAS, CA 92024

☎ Phone: (760) 943-7141

Fax: (760) 943-0371

☎ After Hours Phone: (760) 943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:00AM-5:00PM

KHIEU, TINA, OD

Provider Gender: Female

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

LEE, JASON, OD

Provider Gender: Male

License Number: 14881

NPI: 1679985584

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

RADY CHILDRENS HOSPITAL
ENCINITAS

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

MOLL, ANGELA, MD

Provider Gender: Female

License Number: A105472

NPI: 1861648602

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS HOSPITAL
ENCINITAS

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
Provider Language(s) Spoken:
Indonesian, Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

📞 Phone: (760) 943-7141
Fax: (760) 943-0371

🕒 After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

O HALLORAN, HENRY, MD

Provider Gender: Male
License Number: A73282
NPI: 1235287947
Provider English Spoken: Y
Provider Language(s) Spoken:
German, Spanish
Cultural Competency: Y

RADY CHILDRENS HOSPITAL
ENCINITAS

📍 477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

📞 Phone: (858) 309-7702
Fax: (858) 966-7403

🕒 After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

SAMUEL, MICHAEL, MD

Provider Gender: Male
License Number: A83237
NPI: 1730175670
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

📞 Phone: (760) 943-7141
Fax: (760) 943-0371

🕒 After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

TON-NU, MY LINH, OD

Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

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Fax: (760) 943-0371

🕒 After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

VINH, JOHN, OD

Provider Gender: Male
License Number: 14177
NPI: 1003102724
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

📞 Phone: (760) 943-7141
Fax: (760) 943-0371

🕒 After Hours Phone: (760)

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

943-7141
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

VIVIRITO, MARY, OD

Provider Gender: Female
License Number: 33798
NPI: 1477968667
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
ACUITY EYE GROUP
 320 SANTA FE DR STE 104 ENCINITAS, CA 92024
 Phone: (760) 943-7141
Fax: (760) 943-0371
 After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

ZHAO, TAILUN, MD

Provider Gender: Male
License Number: C186414
NPI: 1952659203
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 320 SANTA FE DR STE 104 ENCINITAS, CA 92024
 Phone: (760) 943-7141
Fax: (760) 943-0371
 After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

ZVANUT, DONALD, OD

Provider Gender: Male
License Number: 8642
NPI: 1336211804
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 320 SANTA FE DR STE 104 ENCINITAS, CA 92024
 Phone: (760) 943-7141
Fax: (760) 943-0371
 After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:

Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

ESCONDIDO

ADAMS, MONA, OD

Provider Gender: Female
License Number: 14457
NPI: 1942564521
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
 2125 CITRACADO PKWY STE 200 ESCONDIDO, CA 92029
 Phone: (760) 755-7600
Fax: (760) 755-7699
 After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:30AM-4:30PM

ASIS, STEPHANIE, OD

Provider Gender: Female
License Number: 34013
NPI: 1902383540

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

BANSAL, PREETI, MD

Provider Gender: Female

License Number: A90890

NPI: 1871664631

Provider English Spoken: Y

*Provider Language(s) Spoken:
Spanish*

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL): RADY CHILDRENS

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-4:30PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

BEAUDRY, AMANDA, OD

Provider Gender: Female

License Number: 33385

NPI: 1477903516

Provider English Spoken: Y

Cultural Competency: Y

2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-4:30PM

BERGMARK, JAMIE, OD

Provider Gender: Female

License Number: 33657

NPI: 1669920757

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-4:30PM

BHATIA, SHAGUN, MD

Provider Gender: Female
License Number: A154902
NPI: 1104237353
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS
SPECIALISTS

📍 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
📞 Phone: (760) 755-7600
Fax: (760) 755-7699
🕒 After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

🗒 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-4:30PM

BINDER, NICHOLAS, MD

Provider Gender: Male
License Number: A124698
NPI: 1306076716
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
📞 Phone: (760) 743-5872
Fax: (760) 743-5879

🕒 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

🗒 Site English Spoken: Y
🗒 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

CHANG, TOM, MD

Provider Gender: Male
License Number: A69909
NPI: 1609848969
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
📞 Phone: (760) 743-5872
Fax: (760) 743-5879

🕒 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

🗒 Site English Spoken: Y
🗒 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

CHAU, VIVIAN, OD

Provider Gender: Female
License Number: 35427
NPI: 1558052951
Provider English Spoken: Y
Provider Language(s) Spoken:
Chinese

Cultural Competency: Y

ACUITY EYE GROUP

📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
📞 Phone: (760) 743-5872
Fax: (760) 743-5879

🕒 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

🗒 Site English Spoken: Y
🗒 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

DUONG, KIM, OD

Provider Gender: Female
License Number: 34222
NPI: 1114448651
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

RADY CHILDRENS
SPECIALISTS

📍 2125 CITRACADO PKWY
STE 200

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

ESCONDIDO, CA 92029
☎ Phone: (760) 755-7600
Fax: (760) 755-7699
🕒 After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
☐ Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
🕒 Hours: M-F
8:30AM-4:30PM

FISH, STEVEN, MD

Provider Gender: Male
License Number: A164497
NPI: 1760877120
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
☎ Phone: (760) 743-5872
Fax: (760) 743-5879
🕒 After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
☐ Site English Spoken: Y
☐ Site Languages(s) Spoken: Spanish
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
🕒 Hours: M-F
8:00AM-5:00PM

GOLDSTONE, ADAM, OD

Provider Gender: Male
License Number: 11051
NPI: 1316972995
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
☎ Phone: (760) 743-5872
Fax: (760) 743-5879
🕒 After Hours Phone: (760) 743-5872

Accepting New Patients: Yes
☐ Site English Spoken: Y
☐ Site Languages(s) Spoken: Spanish
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
🕒 Hours: M-F
8:00AM-5:00PM

HAMOUIE, JUDY, OD

Provider Gender: Female
License Number: 34984
NPI: 1518638287
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
☎ Phone: (760) 743-5872
Fax: (760) 743-5879
🕒 After Hours Phone: (760) 743-5872

Accepting New Patients: Yes
☐ Site English Spoken: Y
☐ Site Languages(s) Spoken: Spanish
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
🕒 Hours: M-F
8:00AM-5:00PM

HSU, CHRISTOPHER, MD

Provider Gender: Male
License Number: A65973
NPI: 1336167618
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
☎ Phone: (760) 743-5872
Fax: (760) 743-5879
🕒 After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
☐ Site English Spoken: Y
☐ Site Languages(s) Spoken: Spanish
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
🕒 Hours: M-F
8:00AM-5:00PM

HUDSON, HENRY, MD

Provider Gender: Male

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

License Number: G76091

NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Provider Language(s) Spoken:
Arabic

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KARAPETIAN, ELENA, OD

Provider Gender: Female

License Number: 34514

NPI: 1184250417

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Provider Language(s) Spoken:
Arabic

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

- Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM
- KIM, PHILIP, OD**
Provider Gender: Male
License Number: 33893
NPI: 1376929034
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 700 W EL NORTE PKWY STE 200 ESCONDIDO, CA 92026
 Phone: (760) 743-5872
Fax: (760) 743-5879
 After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM
- KLAREN, AMANDA, OD**
Provider Gender: Female
License Number: 12617
NPI: 1396876611
- Site English Spoken: Y
Cultural Competency: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM
- Site English Spoken: Y
Cultural Competency: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TH 9:00AM-5:30PM F 9:00AM-1:00PM
- LEE, JASON, OD**
Provider Gender: Male
License Number: 14881
NPI: 1679985584
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
 2125 CITRACADO PKWY STE 200 ESCONDIDO, CA 92029
 Phone: (760) 755-7600
Fax: (760) 755-7699
 After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:30AM-4:30PM
- LE, TAM, OD**
Provider Gender: Female
License Number: 12951
NPI: 1235268707
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: Y
TAM T LE OD INC
 1711 E VALLEY PKWY STE 109 ESCONDIDO, CA 92027
 Phone: (760) 737-6064
Fax: (760) 737-6064
 After Hours Phone: (760) 737-6064
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Vietnamese
- 2125 CITRACADO PKWY STE 200 ESCONDIDO, CA 92029
 Phone: (760) 755-7600
Fax: (760) 755-7699
 After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:30AM-4:30PM
- MARR, RYAN, OD**
Provider Gender: Male
License Number: 35302

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL): Provider Language(s) Spoken:
N
Indonesian, Spanish

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

MOLL, ANGELA, MD

Provider Gender: Female

License Number: A105472

NPI: 1861648602

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-4:30PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

MOVAGHAR, MANSOOR, MD

Provider Gender: Male

License Number: A100897

NPI: 1497792220

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699




























After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

- N**
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F 8:30AM-4:30PM*
- O HALLORAN, HENRY, MD**
Provider Gender: Male
License Number: A73282
NPI: 1235287947
Provider English Spoken: Y
Provider Language(s) Spoken: German, Spanish
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
 2125 CITRACADO PKWY STE 200 ESCONDIDO, CA 92029
 *Phone: (760) 755-7600*
Fax: (760) 755-7699
 *After Hours Phone: (760) 755-7600*
Accepting New Patients: Yes
 *Site English Spoken: Y*
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F 8:30AM-4:30PM*
- PANSARA, MEGHA, MD**
Provider Gender: Female
License Number: A143429
NPI: 1184983728
Provider English Spoken: Y
- Provider Language(s) Spoken: Gujarati*
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
 2125 CITRACADO PKWY STE 200 ESCONDIDO, CA 92029
 *Phone: (760) 755-7600*
Fax: (760) 755-7699
 *After Hours Phone: (760) 755-7600*
Accepting New Patients: Yes
 *Site English Spoken: Y*
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F 8:30AM-4:30PM*
- PATEL, GITANE, MD**
Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 700 W EL NORTE PKWY STE 200 ESCONDIDO, CA 92026
 *Phone: (760) 743-5872*
Fax: (760) 743-5879
 *After Hours Phone: (760) 743-5872*
Accepting New Patients: Yes
 *Site English Spoken: Y*
 *Site Languages(s) Spoken: Spanish*
American Sign Language (ASL):
- Provider Language(s) Spoken: N*
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F 8:00AM-5:00PM*
- PATEL, SARJAN, MD**
Provider Gender: Male
License Number: A114976
NPI: 1316199326
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: Y
ACUITY EYE GROUP
 700 W EL NORTE PKWY STE 200 ESCONDIDO, CA 92026
 *Phone: (760) 743-5872*
Fax: (760) 743-5879
 *After Hours Phone: (760) 743-5872*
Accepting New Patients: Yes
 *Site English Spoken: Y*
 *Site Languages(s) Spoken: Spanish*
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F 8:00AM-5:00PM*
- PRABHU, SUJATA, MD**
Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y

D7. Directorio de proveedores de la vista: servicios oculares y de la vista


Provider Language(s) Spoken:
Spanish

Cultural Competency: Y


ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 *Accessibility:* CONTACT
PROVIDER

*Public transportation (within
1/2 mile from Site):* 1T

 *Hours:* M-F
8:00AM-5:00PM

SAMUEL, MICHAEL, MD

Provider Gender: Male

License Number: A83237

NPI: 1730175670


Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Spanish

American Sign Language (ASL): NPI: 1245733476

N

 *Accessibility:* CONTACT
PROVIDER

*Public transportation (within
1/2 mile from Site):* 1T

 *Hours:* M-F
8:00AM-5:00PM

THACH, TERILYN, OD

Provider Gender: Female

License Number: 11456

NPI: 1710030861


Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

INSIGHT VISION OPTOMETRY

 2419 E VALLEY PKWY
ESCONDIDO, CA 92027

 Phone: (760) 738-9931

Fax: (760) 888-2181

 After Hours Phone: (760)
738-9931

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

 *Accessibility:* CONTACT
PROVIDER

*Public transportation (within
1/2 mile from Site):* 1T

 *Hours:* M-TU
9:30AM-5:00PM
TH 10:00AM-6:00PM
F 9:30AM-5:00PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990


Provider English Spoken: Y

Cultural Competency: Y


ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 *Accessibility:* CONTACT
PROVIDER

*Public transportation (within
1/2 mile from Site):* 1T

 *Hours:* M-F
8:00AM-5:00PM

TRAN, ALEXANDER, OD

Provider Gender: Male

License Number: 14136

NPI: 1902414790

Provider English Spoken: Y


Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699























 After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

- N**
 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: M-F**
8:30AM-4:30PM
- VERRET, ERIC, OD**
Provider Gender: Male
License Number: 11401
NPI: 1194891853
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: Y
ESCONDIDO EYECARE
 613 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (760) 747-7979
Fax: (760) 747-7799
 After Hours Phone: (760) 747-7979
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Arabic, French, Spanish
American Sign Language (ASL): N
 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: M-TU**
9:00AM-6:00PM
W-TH 9:00AM-8:00PM
- VIVIRITO, MARY, OD**
Provider Gender: Female
License Number: 33798
NPI: 1477968667
Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
Cultural Competency: Y
- ACUITY EYE GROUP**
 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
 Phone: (760) 743-5872
Fax: (760) 743-5879
 After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: M-F**
8:00AM-5:00PM
- ZAIDI, NOORINA, OD**
Provider Gender: Female
License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
 Phone: (760) 743-5872
Fax: (760) 743-5879
 After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
- American Sign Language (ASL): N
 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: M-F**
8:00AM-5:00PM
- ZHAO, TAILUN, MD**
Provider Gender: Male
License Number: C186414
NPI: 1952659203
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
 Phone: (760) 743-5872
Fax: (760) 743-5879
 After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: M-F**
8:00AM-5:00PM
- ZVANUT, DONALD, OD**
Provider Gender: Male
License Number: 8642
NPI: 1336211804
Provider English Spoken: Y
Cultural Competency: Y

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

FALLBROOK

ARCHIBALD, JOHN, OD

Provider Gender: Male
License Number: 11813
NPI: 1902893357

Provider English Spoken: Y
Cultural Competency: Y

INLAND EYE SPECIALISTS

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

COLEMAN, BROOKE, OD

Provider Gender: Female
License Number: 13551
NPI: 1700040748

Provider English Spoken: Y
Cultural Competency: Y

INLAND EYE SPECIALISTS

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

CONNOR, JEFFREY, OD

Provider Gender: Male
License Number: 33683
NPI: 1063968980

Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

INLAND EYE SPECIALISTS

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Phone: (760) 728-5728
Fax: (760) 728-5934

After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

COOPER, MICHAEL, OD

Provider Gender: Male
License Number: 10476
NPI: 1164586244

Provider English Spoken: Y
Cultural Competency: Y

INLAND EYE SPECIALISTS

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

DUONG, CHERYL, OD

Provider Gender: Female
License Number: 34070
NPI: 1366935678
Provider English Spoken: Y
Cultural Competency: Y
INLAND EYE SPECIALISTS

📍 521 E ELDER ST STE 102
FALLBROOK, CA 92028
📞 Phone: (760) 728-5728
Fax: (760) 728-5934

🕒 After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

GEORGE, BRUCE, OD

Provider Gender: Male
License Number: 7696
NPI: 1356414551
Provider English Spoken: Y
Provider Language(s) Spoken:
Korean, Spanish
Cultural Competency: Y

BRUCE D GEORGE OD

📍 1102 S MAIN AVE
FALLBROOK, CA 92028

📞 Phone: (760) 723-8417
Fax: (760) 758-2063

🕒 After Hours Phone: (760)
723-8417

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M 1:00PM-5:00PM
TU-W 9:00AM-6:00PM
TH-F 9:00AM-5:00PM
SA 9:00AM-1:00PM

GEORGE, KENDALL, OD

Provider Gender: Male
License Number: 34270
NPI: 1619529948
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

BRUCE D GEORGE OD

📍 1102 S MAIN AVE
FALLBROOK, CA 92028

📞 Phone: (760) 723-8417
Fax: (760) 758-2063

🕒 After Hours Phone: (760)
723-8417

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M 1:00PM-5:00PM
TU-W 9:00AM-6:00PM
TH-F 9:00AM-5:00PM
SA 9:00AM-1:00PM

KHINDA, SUNEHA, OD

Provider Gender: Female
License Number: 35494
NPI: 1750066726
Provider English Spoken: Y
Cultural Competency: Y
INLAND EYE SPECIALISTS

📍 521 E ELDER ST STE 102
FALLBROOK, CA 92028

📞 Phone: (760) 728-5728
Fax: (760) 728-5934

🕒 After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

TEW, JOHN, MD

Provider Gender: Male
License Number: A83206
NPI: 1174593354
Provider English Spoken: Y
Provider Language(s) Spoken:
Portuguese
Cultural Competency: Y

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

INLAND EYE SPECIALISTS

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

IMPERIAL BEACH

HANONO, HELFON, OD

Provider Gender: Male

License Number: 6681

NPI: 1619942034

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

IMPERIAL BEACH

OPTOMETRY INC APC

894 PALM AVE STE B
IMPERIAL BEACH, CA 91932
Phone: (619) 424-9333
Fax: (619) 424-3356
After Hours Phone: (619)
424-9333

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL): License Number: 34530
NPI: 1982232146

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-6:00PM

HANONO, ABRAHAM, OD

Provider Gender: Male

License Number: 14900

NPI: 1356754741

Provider English Spoken: Y

Provider Language(s) Spoken:
Hebrew, Spanish

Cultural Competency: Y

IMPERIAL BEACH

OPTOMETRY INC APC

894 PALM AVE STE B
IMPERIAL BEACH, CA 91932
Phone: (619) 424-9333
Fax: (619) 424-3356

After Hours Phone: (619)
424-9333

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-6:00PM

LA JOLLA

BAUMANN, DANIELA, OD

Provider Gender: Female

Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

CHIU, STEPHAN, MD

Provider Gender: Male

License Number: A172634

NPI: 1053846956

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010



Fax: (858) 457-0028

After Hours Phone: (858)
457-3010





Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Spanish, Tagalog
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM

CODEN, DANIEL, MD

Provider Gender: Male
License Number: G57587
NPI: 1942317508
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
 Phone: (858) 457-3010
Fax: (858) 457-0028
 After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM



DEAN, MOENA, OD

Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y

Cultural Competency: Y
ACUITY EYE GROUP
 9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
 Phone: (858) 457-3010
Fax: (858) 457-0028
 After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM

DYER, SHARON, OD


Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
 Phone: (858) 457-3010
Fax: (858) 457-0028
 After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM

HO, AMIEE, OD

Provider Gender: Female
License Number: 14527
NPI: 1396009478
Provider English Spoken: Y
Cultural Competency: Y
UCSD SHILEY EYE CENTER
 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (858) 534-6290
Fax: (858) 732-0921
 After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

HO, AMIEE, OD

Provider Gender: Female
License Number: 14527
NPI: 1396009478
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN
OPHTHALMOLOGY-UCSD
 9350 CAMPUS POINT DR

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

STE 1B
LA JOLLA, CA 92037
☎ Phone: (858) 534-6290
Fax: (858) 732-0921
🕒 After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
📄 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
🕒 Hours: M-F
8:00AM-4:30PM

HOO, PAMELA, OD
Provider Gender: Female
License Number: 11033
NPI: 1275566010
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
PERLMAN

OPHTHALMOLOGY-UCSD
📍 9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
☎ Phone: (858) 534-6290
Fax: (858) 732-0921
🕒 After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
📄 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-4:30PM

HOO, PAMELA, OD
Provider Gender: Female
License Number: 11033
NPI: 1275566010
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y

UCSD SHILEY EYE CENTER
📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
☎ Phone: (858) 534-6290
Fax: (858) 732-0921

🕒 After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
📄 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

HUDSON, HENRY, MD
Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

📍 9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
☎ Phone: (858) 457-3010
Fax: (858) 457-0028

🕒 After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
📄 Site English Spoken: Y
📄 Site Language(s) Spoken:
Spanish, Tagalog
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M-F
8:00AM-4:30PM

HUSTANA, LARA, OD
Provider Gender: Female
License Number: 11472
NPI: 1235161597
Provider English Spoken: Y
Provider Language(s) Spoken:
French
Cultural Competency: Y
UCSD SHILEY EYE CENTER
📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
☎ Phone: (858) 534-6290
Fax: (858) 732-0921

🕒 After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
📄 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

HUSTANA, LARA, OD

Provider Gender: Female
License Number: 11472
NPI: 1235161597
Provider English Spoken: Y
Provider Language(s) Spoken:
French
Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B

LA JOLLA, CA 92037

Phone: (858) 534-6290
Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:30PM

JOMOC, CAITLIN, OD

Provider Gender: Female
License Number: 35009
NPI: 1861164642
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B

LA JOLLA, CA 92037

Phone: (858) 534-6290
Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:30PM

JOMOC, CAITLIN, OD

Provider Gender: Female
License Number: 35009
NPI: 1861164642

Provider English Spoken: Y
Cultural Competency: Y

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290
Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female
License Number: 34943
NPI: 1700556438

Provider English Spoken: Y
Provider Language(s) Spoken:
Arabic

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010
Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

KHALIL, VADY, OD

Provider Gender: Male
License Number: 35137
NPI: 1275263584

Provider English Spoken: Y
Provider Language(s) Spoken:
Arabic

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010
Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM

KHIEU, TINA, OD

Provider Gender: Female
License Number: 34777
NPI: 1962031617
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
 Phone: (858) 457-3010
Fax: (858) 457-0028
 After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM

KIM, PHILIP, OD

Provider Gender: Male
License Number: 33893

NPI: 1376929034
Provider English Spoken: Y
Cultural Competency: Y
UCSD SHILEY EYE CENTER
 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (858) 534-6290
Fax: (858) 732-0921
 After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

KIM, PHILIP, OD

Provider Gender: Male
License Number: 33893
NPI: 1376929034

Provider English Spoken: Y
Cultural Competency: Y
PERLMAN

OPHTHALMOLOGY-UCSD
 9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
 Phone: (858) 534-6290
Fax: (858) 732-0921
 After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-4:30PM

KULISCHAK, JOHN, OD

Provider Gender: Male
License Number: 9279
NPI: 1740205236

Provider English Spoken: Y
Cultural Competency: Y
UCSD SHILEY EYE CENTER
 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (858) 534-6290
Fax: (858) 732-0921
 After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

KULISCHAK, JOHN, OD

Provider Gender: Male
License Number: 9279
NPI: 1740205236

Provider English Spoken: Y
Cultural Competency: Y
PERLMAN
OPHTHALMOLOGY-UCSD
 9350 CAMPUS POINT DR
STE 1B

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

LA JOLLA, CA 92037
☎ Phone: (858) 534-6290
Fax: (858) 732-0921
🕒 After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
🗨 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
🕒 Hours: M-F
8:00AM-4:30PM

LAM, ANNE, OD

Provider Gender: Female
License Number: 12810
NPI: 1174550768
Provider English Spoken: Y
Cultural Competency: Y
UCSD SHILEY EYE CENTER
📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
☎ Phone: (858) 534-6290
Fax: (858) 732-0921
🕒 After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
🗨 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

LAM, ANNE, OD

Provider Gender: Female
License Number: 12810
NPI: 1174550768
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN
OPHTHALMOLOGY-UCSD
📍 9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
☎ Phone: (858) 534-6290
Fax: (858) 732-0921
🕒 After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
🗨 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
🕒 Hours: M-F
8:00AM-4:30PM

LUSBY, FRANKLIN, MD

Provider Gender: Male
License Number: G41830
NPI: 1265526180
Provider English Spoken: Y
Cultural Competency: Y
LUSBY VISION INSTITUTE
📍 9850 GENESEE AVE STE
220
LA JOLLA, CA 92037
☎ Phone: (858) 459-6200
Fax: (858) 459-2025
🕒 After Hours Phone: (858) 459-6200
Accepting New Patients: Yes
🗨 Site English Spoken: Y
American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
🕒 Hours: M-F
9:00AM-5:00PM

MARR, RYAN, OD

Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
📍 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
☎ Phone: (858) 457-3010
Fax: (858) 457-0028
🕒 After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
🗨 Site English Spoken: Y
🗨 Site Languages(s) Spoken:
Spanish, Tagalog
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M-F
8:00AM-4:30PM

MCCLEAN, ESMERALDA, OD

Provider Gender: Female
License Number: 15001
NPI: 1962817981
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B

LA JOLLA, CA 92037

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:30PM

MIZOGUCHI, LIANNE, OD

Provider Gender: Female

License Number: 10104

NPI: 1619900313

Provider English Spoken: Y

Cultural Competency: Y

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

MIZOGUCHI, LIANNE, OD

Provider Gender: Female

License Number: 10104

NPI: 1619900313

Provider English Spoken: Y

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B

LA JOLLA, CA 92037

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:30PM

MOOR, TRACY, OD

Provider Gender: Female

License Number: 35085

NPI: 1184283277

Provider English Spoken: Y

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B

LA JOLLA, CA 92037

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:30PM

MOOR, TRACY, OD

Provider Gender: Female

License Number: 35085

NPI: 1184283277

Provider English Spoken: Y

Cultural Competency: Y

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Provider Language(s) Spoken:
Indonesian, Spanish

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

PERRY, ARTHUR, MD

Provider Gender: Male

License Number: C37934

NPI: 1194832725

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)

457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

PRATT, STEVEN, MD

Provider Gender: Male

License Number: G32379

NPI: 1407963044

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

TONNU, ANH, OD

Provider Gender: Female

License Number: 11318

NPI: 1679521280

Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

☎ After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Tagalog

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177

NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

☎ Phone: (858) 457-3010

Fax: (858) 457-0028

☎ After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Tagalog

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

☎ Phone: (858) 457-3010

Fax: (858) 457-0028

☎ After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Tagalog

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

VO, ANDREW MINH, OD

Provider Gender: Male

License Number: 33869

NPI: 1790291565

Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

UCSD SHILEY EYE CENTER

📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (858) 534-6290

Fax: (858) 732-0921

☎ After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

VO, ANDREW MINH, OD

Provider Gender: Male

License Number: 33869

NPI: 1790291565

Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

📍 9350 CAMPUS POINT DR
STE 1B

LA JOLLA, CA 92037

☎ Phone: (858) 534-6290

Fax: (858) 732-0921

☎ After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-4:30PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

YU, CAROL, OD

Provider Gender: Female
License Number: 34047
NPI: 1639697451
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish, Chinese
Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:30PM

YU, CAROL, OD

Provider Gender: Female
License Number: 34047
NPI: 1639697451
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish, Chinese
Cultural Competency: Y

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

ZAIDI, NOORINA, OD

Provider Gender: Female

License Number: 35615

NPI: 1023477262

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

ZHAO, TAILUN, MD

Provider Gender: Male

License Number: C186414

NPI: 1952659203

Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

ZVANUT, DONALD, OD

Provider Gender: Male

License Number: 8642

NPI: 1336211804

Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8:00AM-4:30PM

LA MESA

AOTO, KIM, OD
 Provider Gender: Female
 License Number: 14524
 NPI: 1780935650
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Vietnamese
 Cultural Competency: Y
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J LA MESA, CA 91942
 Phone: (619) 722-8460
 Fax: (619) 722-8465
 After Hours Phone: (619) 722-8460
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

ASIS, STEPHANIE, OD
 Provider Gender: Female
 License Number: 34013
 NPI: 1902383540
 Provider English Spoken: Y
 Cultural Competency: Y
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J LA MESA, CA 91942
 Phone: (619) 722-8460
 Fax: (619) 722-8465

After Hours Phone: (619) 722-8460
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

AVALLONE, THOMAS, MD
 Provider Gender: Male
 License Number: A147199
 NPI: 1679865950
 Provider English Spoken: Y
 Cultural Competency: Y
 EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
 5565 GROSSMONT CENTER DR # 551 LA MESA, CA 91942
 Phone: (619) 465-2020
 Fax: (619) 698-1189
 After Hours Phone: (619) 465-2020
 Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8:00AM-5:00PM

BAGHOUMIAN, MARINEH, OD
 Provider Gender: Female
 License Number: 14842
 NPI: 1972929438
 Provider English Spoken: Y
 Provider Language(s) Spoken: Armenian
 Cultural Competency: Y
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J LA MESA, CA 91942
 Phone: (619) 722-8460
 Fax: (619) 722-8465
 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

BAUMANN, DANIELA, OD
 Provider Gender: Female

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:

Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

BINDER, NICHOLAS, MD

Provider Gender: Male

License Number: A124698

NPI: 1306076716

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

BUI, TINA, OD

Provider Gender: Female

License Number: 33435

NPI: 1497107312

Provider English Spoken: Y

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: Y

BUIIQUE OPTOMETRY

5020 BALTIMORE DR STE B
LA MESA, CA 91942

Phone: (619) 464-8303

Fax: (619) 464-4971

After Hours Phone: (619)
464-8303

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-2:00PM

CAUCHI, CAROLINE

GUERRERO, OD

Provider Gender: Female

License Number: 6882

NPI: 1831268903

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

VISION SOLUTIONS

OPTOMETRY

8235 UNIVERSITY AVE
LA MESA, CA 91942

Phone: (619) 461-4913

Fax: (888) 509-6483

After Hours Phone: (619)
461-4913

Accepting New Patients: Yes

Site English Spoken: Y

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

- Site Languages(s) Spoken:* **CHEW, WESLEY, OD**
Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TU
9:00AM-5:30PM
W 8:00AM-5:00PM
TH 9:00AM-6:00PM
F 8:00AM-1:00PM
- CHANG, TOM, MD**
Provider Gender: Male
License Number: A69909
NPI: 1609848969
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
 5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
 Phone: (619) 465-2020
Fax: (619) 698-1189
 After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-5:00PM
- Site English Spoken:* Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM
- Site English Spoken:* Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-5:00PM
- 7339 EL CAJON BLVD STE J
LA MESA, CA 91942
 Phone: (619) 722-8460
Fax: (619) 722-8465
 After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM
- CHIU, STEPHAN, MD**
Provider Gender: Male
License Number: A172634
NPI: 1053846956
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
 5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
 Phone: (619) 465-2020
Fax: (619) 698-1189
 After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
- Site English Spoken:* Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:30AM-4:30PM
- COCKERHAM, KIMBERLY, MD**
Provider Gender: Female
License Number: G86885
NPI: 1366493629
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES MED CLINIC INC
 7877 PARKWAY DR STE 100
LA MESA, CA 91942
 Phone: (619) 460-3711
Fax: (619) 460-2184
 After Hours Phone: (619) 460-3711
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-5:00PM
- CONRAD, RANDALL, OD**
Provider Gender: Male
License Number: 6423
NPI: 1962617464
Provider English Spoken: Y

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Provider Language(s) Spoken: N
Spanish
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC
7877 PARKWAY DR STE 100
LA MESA, CA 91942
Phone: (619) 460-3711
Fax: (619) 460-2184
After Hours Phone: (619)
460-3711
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
*Public transportation (within
1/2 mile from Site):* 1U
Hours: M-F
8:30AM-4:30PM

DEAN, MOENA, OD

Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP
5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619)
465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
*Public transportation (within
1/2 mile from Site):* 1U
Hours: M-F
8:00AM-5:00PM

DEAN, MOENA, OD

Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619)
722-8460

Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
*Public transportation (within
1/2 mile from Site):* 1T
Hours: M-F
8:00AM-5:00PM

DYER, SHARON, OD

Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619)
722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
*Public transportation (within
1/2 mile from Site):* 1T
Hours: M-F
8:00AM-5:00PM

DYER, SHARON, OD

Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP
5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619)
465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

GOLLOGLY, HEIDRUN, MD

Provider Gender: Female
License Number: A134761
NPI: 1477879823
Provider English Spoken: Y
Provider Language(s) Spoken: German, French, Spanish
Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
📞 Phone: (619) 465-2020
Fax: (619) 698-1189

🕒 After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

GOLLOGLY, HEIDRUN, MD

Provider Gender: Female
License Number: A134761
NPI: 1477879823
Provider English Spoken: Y
Provider Language(s) Spoken:

German, French, Spanish
Cultural Competency: Y

ACUITY EYE GROUP
📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

📞 Phone: (619) 722-8460
Fax: (619) 722-8465

🕒 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

GRAY, IGA, MD

Provider Gender: Female
License Number: A174875
NPI: 1033538350

Provider English Spoken: Y
Cultural Competency: Y

ALVARADO EYE ASSOCIATES MED CLINIC INC

📍 7877 PARKWAY DR STE 100
LA MESA, CA 91942

📞 Phone: (619) 460-3711
Fax: (619) 460-2184

🕒 After Hours Phone: (619) 460-3711

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:30AM-4:30PM

HAIGHT, BRUCE, MD

Provider Gender: Male
License Number: G41117
NPI: 1427029628
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942

📞 Phone: (619) 465-2020
Fax: (619) 698-1189

🕒 After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM


HAIGHT, BRUCE, MD

Provider Gender: Male
License Number: G41117
NPI: 1427029628

Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP
📍 7339 EL CAJON BLVD STE J

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

LA MESA, CA 91942
 Phone: (619) 722-8460
 Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL): Korean

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

HAMOUIE, JUDY, OD

Provider Gender: Female

License Number: 34984


NPI: 1518638287

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): Provider English Spoken: Y

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F

8:00AM-5:00PM

HAN, SULKI, OD

Provider Gender: Female

License Number: 34171

NPI: 1750802195


Provider English Spoken: Y


Provider Language(s) Spoken:

Korean

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

HIXSON, THOMAS, OD

Provider Gender: Male

License Number: 7490


NPI: 1528072683

Provider English Spoken: Y

Cultural Competency: Y

LA MESA VISION CARE

 8007 LA MESA BLVD
LA MESA, CA 91942

 Phone: (619) 466-5665


Fax: (619) 466-5688

 After Hours Phone: (619) 466-5665


Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 8:00AM-4:00PM
TU 9:00AM-6:00PM

W 8:00AM-4:00PM

TH 9:00AM-6:00PM

F 9:00AM-5:00PM

SA 8:00AM-1:00PM

HSU, CHRISTOPHER, MD

Provider Gender: Male

License Number: A65973


NPI: 1336167618

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465


 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091

NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091

NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

HUNG, JANICE, OD

Provider Gender: Female

License Number: 34296

NPI: 1750917936

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Provider Language(s) Spoken:
Arabic

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Provider Language(s) Spoken:
Arabic

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

KATZMAN, LEE, MD

Provider Gender: Male

License Number: A135673

NPI: 1912297284

Provider English Spoken: Y

Cultural Competency: Y

ALVARADO EYE ASSOCIATES
MED CLINIC INC

7877 PARKWAY DR STE 100
LA MESA, CA 91942

Phone: (619) 460-3711

Fax: (619) 460-2184

After Hours Phone: (619)
460-3711

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
8:30AM-4:30PM

KATZMAN, BARRY, MD

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:

Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

KHIEU, TINA, OD

Provider Gender: Female

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

License Number: 34777
 NPI: 1962031617
 Provider English Spoken: Y
 Cultural Competency: Y
 EYE ASSOCIATES OF SAN
 DIEGO/ACUITY EYE GROUP
 5565 GROSSMONT
 CENTER DR # 551
 LA MESA, CA 91942
 Phone: (619) 465-2020
 Fax: (619) 698-1189
 After Hours Phone: (619)
 465-2020
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-5:00PM

KHIEU, TINA, OD

Provider Gender: Female
 License Number: 34777
 NPI: 1962031617
 Provider English Spoken: Y
 Cultural Competency: Y
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942
 Phone: (619) 722-8460
 Fax: (619) 722-8465
 After Hours Phone: (619)
 722-8460
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:

Spanish
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-5:00PM

LEE, SALLY, DO

Provider Gender: Female
 License Number: 20A8088
 NPI: 1457468514
 Provider English Spoken: Y
 Provider Language(s) Spoken:
 Spanish, Chinese
 Cultural Competency: Y
 SAN DIEGO EYE
 PROFESSIONALS
 8291 LA MESA BLVD
 LA MESA, CA 91942
 Phone: (619) 583-4295
 Fax: (619) 393-1133
 After Hours Phone: (619)
 583-4295

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 German, Spanish, Chinese
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1T
 Hours: TU-F
 9:00AM-5:00PM
 SA 9:00AM-5:00PM

LEVY, PHILLIP, OD
















Provider Gender: Male

License Number: 4884
 NPI: 1528189115
 Provider English Spoken: Y
 Cultural Competency: Y
 BUI TIQUE OPTOMETRY
 5020 BALTIMORE DR STE B
 LA MESA, CA 91942
 Phone: (619) 464-8303
 Fax: (619) 464-4971
 After Hours Phone: (619)
 464-8303
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish, Vietnamese
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1T
 Hours: M-F
 9:00AM-5:00PM
 SA 9:00AM-2:00PM

MANNEN, JOSEPH, OD

Provider Gender: Male
 License Number: 33650
 NPI: 1851827034
 Provider English Spoken: Y
 Cultural Competency: Y
 ALVARADO EYE ASSOCIATES
 MED CLINIC INC
 7877 PARKWAY DR STE 100
 LA MESA, CA 91942
 Phone: (619) 460-3711
 Fax: (619) 460-2184
 After Hours Phone: (619)
 460-3711
 Accepting New Patients: Yes
 Site English Spoken: Y
 American Sign Language (ASL):

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

- N**
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M-F 8:30AM-4:30PM*
- MARR, RYAN, OD**
Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
 EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
 5565 GROSSMONT CENTER DR # 551 LA MESA, CA 91942
 *Phone: (619) 465-2020*
Fax: (619) 698-1189
 *After Hours Phone: (619) 465-2020*
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
-  *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M-F 8:00AM-5:00PM*
- MARR, RYAN, OD**
Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
- ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J LA MESA, CA 91942
 *Phone: (619) 722-8460*
Fax: (619) 722-8465
 *After Hours Phone: (619) 722-8460*
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
-  *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F 8:00AM-5:00PM*
- MCGRAW, JOSEPH, MD**
Provider Gender: Male
License Number: A155228
NPI: 1588624852
Provider English Spoken: Y
Cultural Competency: Y
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J LA MESA, CA 91942
 *Phone: (619) 722-8460*
Fax: (619) 722-8465
 *After Hours Phone: (619) 722-8460*
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
-  *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
- 1/2 mile from Site): 1T
 *Hours: M-F 8:00AM-5:00PM*
- MCGRAW, JOSEPH, MD**
Provider Gender: Male
License Number: A155228
NPI: 1588624852
Provider English Spoken: Y
Cultural Competency: Y
 EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
 5565 GROSSMONT CENTER DR # 551 LA MESA, CA 91942
 *Phone: (619) 465-2020*
Fax: (619) 698-1189
 *After Hours Phone: (619) 465-2020*
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
-  *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M-F 8:00AM-5:00PM*
- MERALI, MURTAZA, OD**
Provider Gender: Female
License Number: 14558
NPI: 1972944189
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
 ACUITY EYE GROUP

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License Number: A125435
NPI: 1235366782

Provider English Spoken: Y
Provider Language(s) Spoken:
Indonesian, Spanish
Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J N
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License Number: A125435
NPI: 1235366782

Provider English Spoken: Y
Provider Language(s) Spoken:
Indonesian, Spanish
Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

NGUYEN, THY, OD

Provider Gender: Female
License Number: 12746
NPI: 1750490413

Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish, Vietnamese
Cultural Competency: Y
ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

OU, JOCELYN, OD

Provider Gender: Female
License Number: 34063
NPI: 1225518996

Provider English Spoken: Y
Cultural Competency: Y

ALVARADO EYE ASSOCIATES
MED CLINIC INC



7877 PARKWAY DR STE 100
LA MESA, CA 91942
Phone: (619) 460-3711
Fax: (619) 460-2184

After Hours Phone: (619)
460-3711

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N






D7. Directorio de proveedores de la vista: servicios oculares y de la vista



 **Accessibility:** CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 **Hours:** M-F
8:30AM-4:30PM

PANDYA, BHUMIKA, OD

Provider Gender: Female
License Number: 35025
NPI: 1063182822
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942
 Phone: (619) 722-8460
Fax: (619) 722-8465
 After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Language(s) Spoken: Spanish
American Sign Language (ASL): N

 **Accessibility:** CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 **Hours:** M-F
8:00AM-5:00PM



PATEL, GITANE, MD

Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942
 Phone: (619) 722-8460
Fax: (619) 722-8465
 After Hours Phone: (619) 722-8460


Accepting New Patients: Yes

 Site English Spoken: Y
 Site Language(s) Spoken: Spanish

American Sign Language (ASL): N

 **Accessibility:** CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 **Hours:** M-F
8:00AM-5:00PM



PATEL, SARJAN, MD

Provider Gender: Male
License Number: A114976
NPI: 1316199326
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942
 Phone: (619) 722-8460
Fax: (619) 722-8465
 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes


 Site English Spoken: Y
 Site Language(s) Spoken: Spanish

American Sign Language (ASL): N

 **Accessibility:** CONTACT

PROVIDER



Public transportation (within 1/2 mile from Site): 1T

 **Hours:** M-F
8:00AM-5:00PM

PETERS, JAMIE, OD



Provider Gender: Female
License Number: 10724
NPI: 1073691077
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y

VISION SOLUTIONS OPTOMETRY

 8235 UNIVERSITY AVE
LA MESA, CA 91942
 Phone: (619) 461-4913
Fax: (888) 509-6483

 After Hours Phone: (619) 461-4913

Accepting New Patients: Yes

 Site English Spoken: Y
 Site Language(s) Spoken: Spanish

American Sign Language (ASL): N

 **Accessibility:** CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 **Hours:** M-TU
9:00AM-5:30PM
W 8:00AM-5:00PM
TH 9:00AM-6:00PM
F 8:00AM-1:00PM

PRABHU, SUJATA, MD

Provider Gender: Female
License Number: A115965
NPI: 1982872552

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP
5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

PRABHU, SUJATA, MD

Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

QUACH, PHUC, OD

Provider Gender: Male
License Number: 12891
NPI: 1770617805
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish, Vietnamese
Cultural Competency: Y
ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

SAMUEL, MICHAEL, MD

Provider Gender: Male

License Number: A83237
NPI: 1730175670
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP
5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

SCOTT, JEFFREY, OD

Provider Gender: Male
License Number: 34978
NPI: 1568813434
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465

After Hours Phone: (619)
722-8460


Accepting New Patients: Yes


Site English Spoken: Y
Site Languages(s) Spoken:

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

<p><i>Spanish</i> American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1T Hours: M-F 8:00AM-5:00PM</p>	<p>ACUITY EYE GROUP 7339 EL CAJON BLVD STE J LA MESA, CA 91942 Phone: (619) 722-8460 Fax: (619) 722-8465 After Hours Phone: (619) 722-8460 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1T Hours: M-F 8:00AM-5:00PM</p>	<p>PROVIDER Public transportation (within 1/2 mile from Site): 1U Hours: M-F 8:00AM-5:00PM</p>
<p>TILLMAN, SYLVIA, OD Provider Gender: Female License Number: 9726 NPI: 1174730824 Provider English Spoken: Y Cultural Competency: Y ACUITY EYE GROUP 7339 EL CAJON BLVD STE J LA MESA, CA 91942 Phone: (619) 722-8460 Fax: (619) 722-8465 After Hours Phone: (619) 722-8460 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1T Hours: M-F 8:00AM-5:00PM</p>	<p>TON-NU, MY LINH, OD Provider Gender: Female License Number: 34990 NPI: 1245733476 Provider English Spoken: Y Cultural Competency: Y EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP 5565 GROSSMONT CENTER DR # 551 LA MESA, CA 91942 Phone: (619) 465-2020 Fax: (619) 698-1189 After Hours Phone: (619) 465-2020 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1T Hours: M-F 8:00AM-5:00PM</p>	<p>TONNU, ANH, OD Provider Gender: Female License Number: 11318 NPI: 1679521280 Provider English Spoken: Y Provider Language(s) Spoken: Vietnamese Cultural Competency: Y ACUITY EYE GROUP 7339 EL CAJON BLVD STE J LA MESA, CA 91942 Phone: (619) 722-8460 Fax: (619) 722-8465 After Hours Phone: (619) 722-8460 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1T Hours: M-F 8:00AM-5:00PM</p>
<p>TON-NU, MY LINH, OD Provider Gender: Female License Number: 34990 NPI: 1245733476 Provider English Spoken: Y Cultural Competency: Y</p>	<p>TRAN, HENRY, OD Provider Gender: Male License Number: 15159 NPI: 1467846709 Provider English Spoken: Y Cultural Competency: Y ACUITY EYE GROUP</p>	<p>TRAN, HENRY, OD Provider Gender: Male License Number: 15159 NPI: 1467846709 Provider English Spoken: Y Cultural Competency: Y ACUITY EYE GROUP</p>

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Spanish

American Sign Language (ASL): Spanish, Vietnamese

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

TSUI, NANCY, OD

Provider Gender: Female


License Number: 33944


NPI: 1841785037

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460


Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Spanish

American Sign Language (ASL): Spanish, Vietnamese

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

TU, BEVERLY, OD

Provider Gender: Female

License Number: 34108


NPI: 1053892794


Provider English Spoken: Y

Provider Language(s) Spoken:

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

VINH, JOHN, OD

Provider Gender: Male


License Number: 14177


NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177


NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M-F
8:00AM-5:00PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

VIVIRITO, MARY, OD

Provider Gender: Female
 License Number: 33798
 NPI: 1477968667
 Provider English Spoken: Y
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: Y
 EYE ASSOCIATES OF SAN
 DIEGO/ACUITY EYE GROUP
 5565 GROSSMONT
 CENTER DR # 551
 LA MESA, CA 91942
 Phone: (619) 465-2020
 Fax: (619) 698-1189
 After Hours Phone: (619)
 465-2020

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-5:00PM

VIVIRITO, MARY, OD

Provider Gender: Female
 License Number: 33798
 NPI: 1477968667
 Provider English Spoken: Y
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: Y
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J

LA MESA, CA 91942
 Phone: (619) 722-8460
 Fax: (619) 722-8465
 After Hours Phone: (619)
 722-8460
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-5:00PM

WONG, SHARON, OD

Provider Gender: Female
 License Number: 15137
 NPI: 1497159552
 Provider English Spoken: Y
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: Y
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942
 Phone: (619) 722-8460
 Fax: (619) 722-8465
 After Hours Phone: (619)
 722-8460

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within

1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-5:00PM

YOUNG, ALLA, OD



Provider Gender: Female
 License Number: 34191
 NPI: 1285085142
 Provider English Spoken: Y
 Provider Language(s) Spoken:
 Russian
 Cultural Competency: Y
 ALVARADO EYE ASSOCIATES
 MED CLINIC INC
 7877 PARKWAY DR STE 100
 LA MESA, CA 91942
 Phone: (619) 460-3711
 Fax: (619) 460-2184
 After Hours Phone: (619)
 460-3711

Accepting New Patients: Yes
 Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: M-F
 8:30AM-4:30PM

ZAIDI, NOORINA, OD






Provider Gender: Female
 License Number: 35615
 NPI: 1023477262
 Provider English Spoken: Y
 Cultural Competency: Y
 EYE ASSOCIATES OF SAN
 DIEGO/ACUITY EYE GROUP
 5565 GROSSMONT
 CENTER DR # 551

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

LA MESA, CA 91942
 Phone: (619) 465-2020
 Fax: (619) 698-1189
 After Hours Phone: (619) 465-2020
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8:00AM-5:00PM

ZAI, NOORINA, OD

Provider Gender: Female
 License Number: 35615
 NPI: 1023477262
 Provider English Spoken: Y
 Cultural Competency: Y
 ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942
 Phone: (619) 722-8460
 Fax: (619) 722-8465
 After Hours Phone: (619) 722-8460
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F

8:00AM-5:00PM

ZVANUT, DONALD, OD

Provider Gender: Male
 License Number: 8642
 NPI: 1336211804
 Provider English Spoken: Y
 Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942
 Phone: (619) 722-8460
 Fax: (619) 722-8465
 After Hours Phone: (619) 722-8460


Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8:00AM-5:00PM



ZVANUT, DONALD, OD

Provider Gender: Male
 License Number: 8642
 NPI: 1336211804
 Provider English Spoken: Y
 Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT CENTER DR # 551
 LA MESA, CA 91942
 Phone: (619) 465-2020
 Fax: (619) 698-1189
 After Hours Phone: (619)

465-2020

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8:00AM-5:00PM


LAKESIDE

FLEMING, JOHN, OD

Provider Gender: Male
 License Number: 8461
 NPI: 1033192133
 Provider English Spoken: Y
 Cultural Competency: Y
 JOHN C FLEMING OD

 9710 WINTER GARDENS BLVD STE A

LAKESIDE, CA 92040

 Phone: (619) 443-1075

Fax: (619) 443-9382


 After Hours Phone: (619) 443-1075

Accepting New Patients: Yes

Site English Spoken: Y
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-TH 9:00AM-5:00PM F 9:00AM-4:00PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

HOANG, KENNY, OD

Provider Gender: Male

License Number: 35207

NPI: 1740868603

Provider English Spoken: Y

Cultural Competency: Y

JOHN C FLEMING OD

9710 WINTER GARDENS

BLVD STE A

LAKESIDE, CA 92040

Phone: (619) 443-1075

Fax: (619) 443-9382

After Hours Phone: (619)
443-1075

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM

JOHNSON, CHRISTOPHER, OD

Provider Gender: Male

License Number: 15100

NPI: 1568861425

Provider English Spoken: Y

Cultural Competency: Y

JOHN C FLEMING OD

9710 WINTER GARDENS

BLVD STE A

LAKESIDE, CA 92040

Phone: (619) 443-1075

Fax: (619) 443-9382

After Hours Phone: (619)
443-1075

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL): Provider English Spoken: Y
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM

NATIONAL CITY

AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish, Vietnamese

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

ACUITY EYE GROUP

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700



Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

D7. Directorio de proveedores de la vista: servicios oculares y de la vista


 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M-F 8:00AM-4:30PM*

BINDER, NICHOLAS, MD

Provider Gender: Male
License Number: A124698
NPI: 1306076716
Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

 *Phone: (619) 470-2700*

Fax: (619) 267-8221

 *After Hours Phone: (619) 470-2700*


Accepting New Patients: Yes

 *Site English Spoken: Y*
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1U


 *Hours: M-F 8:00AM-4:30PM*

DEAN, MOENA, OD

Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950


 *Phone: (619) 472-1010*

Fax: (619) 479-5233

 *After Hours Phone: (619) 472-1010*

Accepting New Patients: Yes

 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Spanish*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-TU 8:00AM-6:00PM*
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM


DEAN, MOENA, OD

Provider Gender: Female
License Number: 33955
NPI: 1265927578


Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

 *Phone: (619) 470-2700*

Fax: (619) 267-8221

 *After Hours Phone: (619) 470-2700*


Accepting New Patients: Yes

 *Site English Spoken: Y*
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1U

 *Hours: M-F 8:00AM-4:30PM*

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450


NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

 *Phone: (619) 470-2700*

Fax: (619) 267-8221

 *After Hours Phone: (619) 470-2700*


Accepting New Patients: Yes

 *Site English Spoken: Y*
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1U

 *Hours: M-F 8:00AM-4:30PM*

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450


NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

 *Phone: (619) 472-1010*

Fax: (619) 479-5233

 *After Hours Phone: (619) 472-1010*


Accepting New Patients: Yes

 *Site English Spoken: Y*
 *Site Languages(s) Spoken: Spanish*

American Sign Language (ASL):

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

N




 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-TU*
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

FISH, STEVEN, MD

Provider Gender: Male
License Number: A164497
NPI: 1760877120
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP


 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 *Phone: (619) 472-1010*
Fax: (619) 479-5233
 *After Hours Phone: (619) 472-1010*

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-TU*
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

GOLLOGLY, HEIDRUN, MD

Provider Gender: Female

License Number: A134761

NPI: 1477879823



Provider English Spoken: Y

Provider Language(s) Spoken:

German, French, Spanish

Cultural Competency: Y

ACUITY EYE GROUP

 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 *Phone: (619) 472-1010*
Fax: (619) 479-5233

 *After Hours Phone: (619) 472-1010*

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-TU*
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

HAIGHT, BRUCE, MD

Provider Gender: Male



License Number: G41117

NPI: 1427029628

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 *Phone: (619) 472-1010*
Fax: (619) 479-5233


 *After Hours Phone: (619) 472-1010*

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-TU*
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

HUDSON, HENRY, MD

Provider Gender: Male



License Number: G76091

NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 *Phone: (619) 472-1010*
Fax: (619) 479-5233


 *After Hours Phone: (619) 472-1010*

Accepting New Patients: Yes


Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-TU*
8:00AM-6:00PM
W 8:30AM-5:00PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

- TH 8:00AM-6:00PM
F 8:00AM-5:00PM
- HUNG, JANICE, OD**
Provider Gender: Female
License Number: 34296
NPI: 1750917936
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-4:30PM
- KALBAKJI, NATALY, OD**
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-4:30PM
- 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Language(s) Spoken: Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM
- KALBAKJI, NATALY, OD**
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-4:30PM
- KALRA, ANKUR, OD**
Provider Gender: Male
License Number: 11898
NPI: 1124195789
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: Y
LUSTRO EYEWORKS
OPTOMETRY
1481 E PLAZA BLVD
NATIONAL CITY, CA 91950
Phone: (619) 477-2159
Fax: (619) 477-2128
After Hours Phone: (619) 477-2159
Accepting New Patients: Yes
Site English Spoken: Y
Site Language(s) Spoken: Arabic, Hindi, Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: SU 10:00AM-4:00PM
M-F 9:00AM-6:00PM
SA 9:00AM-5:00PM
- KATZMAN, BARRY, MD**
Provider Gender: Male
License Number: A34834
NPI: 1760473797
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

KEDDINGTON, JOAN, OD

Provider Gender: Female

License Number: 6263

NPI: 1992872691

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: Y

LUSTRO EYEWORKS

OPTOMETRY

1481 E PLAZA BLVD
NATIONAL CITY, CA 91950

Phone: (619) 477-2159

Fax: (619) 477-2128

After Hours Phone: (619)
477-2159

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: SU 10:00AM-4:00PM

M-F 9:00AM-6:00PM

SA 9:00AM-5:00PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Provider Language(s) Spoken:

Arabic

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Provider Language(s) Spoken:

Arabic

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

1/2 mile from Site): 1T

🕒 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

KHIEU, TINA, OD

Provider Gender: Female
License Number: 34777
NPI: 1962031617
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

📞 Phone: (619) 470-2700
Fax: (619) 267-8221

📞 After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

📄 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

KING, MARY, OD

Provider Gender: Female
License Number: 13711
NPI: 1578792107
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

LUSTRO EYEWORKS
OPTOMETRY

📍 1481 E PLAZA BLVD
NATIONAL CITY, CA 91950

📞 Phone: (619) 477-2159
Fax: (619) 477-2128

📞 After Hours Phone: (619)
477-2159

Accepting New Patients: Yes

📄 Site English Spoken: Y
📄 Site Language(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1T

🕒 Hours: SU 10:00AM-4:00PM
M-F 9:00AM-6:00PM
SA 9:00AM-5:00PM

LEE, AUSTIN, OD

Provider Gender: Male

License Number: 14519

NPI: 1922356914

Provider English Spoken: Y

Cultural Competency: Y

VIVE OPTOMETRY

📍 1033 HIGHLAND AVE
NATIONAL CITY, CA 91950

📞 Phone: (619) 477-2771
Fax: (619) 477-1680

📞 After Hours Phone: (619)
477-2771

Accepting New Patients: Yes

📄 Site English Spoken: Y
📄 Site Language(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1T

🕒 Hours: TU 10:00AM-5:00PM
W-F 9:30AM-5:00PM

LEE, SALLY, DO

Provider Gender: Female

License Number: 20A8088

NPI: 1457468514

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish, Chinese

Cultural Competency: Y

SAN DIEGO EYE

PROFESSIONALS

📍 2345 E 8TH ST STE 111
NATIONAL CITY, CA 91950

📞 Phone: (619) 583-4295
Fax: (619) 825-7300

📞 After Hours Phone: (619)
583-4295

Accepting New Patients: Yes

📄 Site English Spoken: Y
📄 Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1T

🕒 Hours: TH-F
9:00AM-5:00PM

MARLAY, GREG, OD

Provider Gender: Male

License Number: 6998

NPI: 1306903083

Provider English Spoken: Y

Cultural Competency: Y

MARLAY ENTERPRISES

📍 1132 E PLAZA BLVD STE 201

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

NATIONAL CITY, CA 91950

☎ Phone: (619) 477-4166

☎ After Hours Phone: (619)
477-4166

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
W 10:00AM-6:00PM
F 10:00AM-6:00PM
SA 10:00AM-2:00PM

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700

Fax: (619) 267-8221

☎ After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

☎ Phone: (619) 472-1010

Fax: (619) 479-5233

☎ After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

☎ Phone: (619) 472-1010

Fax: (619) 479-5233

☎ After Hours Phone: (619)

472-1010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700

Fax: (619) 267-8221

☎ After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

MENDOZA, RAYMUNDO, OD

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Provider Gender: Male
License Number: 8150
NPI: 1306837760
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
NATIONAL CITY EYECARE
2403 E PLAZA BLVD
NATIONAL CITY, CA 91950
Phone: (619) 475-2184
Fax: (619) 475-3917
After Hours Phone: (619)
475-2184

Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish, Tagalog
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
Hours: M-TU
10:00AM-5:00PM
TH-F 10:00AM-5:00PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
Provider Language(s) Spoken:
Indonesian, Spanish
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700

Fax: (619) 267-8221
After Hours Phone: (619)
470-2700
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
Hours: M-F
8:00AM-4:30PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
Provider Language(s) Spoken:
Indonesian, Spanish
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233

After Hours Phone: (619)
472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-TU
8:00AM-6:00PM

W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

NGUYEN, THERESA, OD

Provider Gender: Female
License Number: 35530TLG
NPI: 1609555713
Provider English Spoken: Y
Cultural Competency: Y
LUSTRO EYEWORKS
OPTOMETRY

1481 E PLAZA BLVD
NATIONAL CITY, CA 91950
Phone: (619) 477-2159
Fax: (619) 477-2128

After Hours Phone: (619)
477-2159
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Arabic, Hindi, Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: SU 10:00AM-4:00PM
M-F 9:00AM-6:00PM
SA 9:00AM-5:00PM

PATEL, GITANE, MD

Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Fax: (619) 267-8221

☎ After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

☑ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

PATEL, SARJAN, MD

Provider Gender: Male

License Number: A114976

NPI: 1316199326

Provider English Spoken: Y

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700

Fax: (619) 267-8221

☎ After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

☑ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700

Fax: (619) 267-8221

☎ After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

☑ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

SCOTT, JEFFREY, OD

Provider Gender: Male

License Number: 34978

NPI: 1568813434

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700

Fax: (619) 267-8221

☎ After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

☑ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700

Fax: (619) 267-8221

☎ After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

☑ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

☎ Phone: (619) 472-1010

Fax: (619) 479-5233

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

 After Hours Phone: (619) 472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

TOUBIA, ELIAS, OD

Provider Gender: Male

License Number: 33758

NPI: 1740701481

Provider English Spoken: Y


Provider Language(s) Spoken: Arabic

Cultural Competency: Y

LUSTRO EYEWORKS

OPTOMETRY

 1481 E PLAZA BLVD
NATIONAL CITY, CA 91950

 Phone: (619) 477-2159

Fax: (619) 477-2128

 After Hours Phone: (619) 477-2159


Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Arabic, Hindi, Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: SU 10:00AM-4:00PM
M-F 9:00AM-6:00PM
SA 9:00AM-5:00PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177


NPI: 1003102724

Provider English Spoken: Y


Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

 After Hours Phone: (619) 470-2700


Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F
8:00AM-4:30PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177


NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

 Phone: (619) 472-1010

Fax: (619) 479-5233

 After Hours Phone: (619) 472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667


Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

ACUITY EYE GROUP

 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

 Phone: (619) 472-1010

Fax: (619) 479-5233

 After Hours Phone: (619) 472-1010


Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

1/2 mile from Site): 1T

🕒 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

VIVIRITO, MARY, OD

Provider Gender: Female
License Number: 33798
NPI: 1477968667
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

📞 Phone: (619) 470-2700
Fax: (619) 267-8221

🕒 After Hours Phone: (619)
470-2700
Accepting New Patients: Yes

📄 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

WU, EVA, OD

Provider Gender: Female
License Number: 14743
NPI: 1073954442
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish, Chinese
Cultural Competency: Y

VIVE OPTOMETRY

📍 1033 HIGHLAND AVE
NATIONAL CITY, CA 91950

📞 Phone: (619) 477-2771
Fax: (619) 477-1680

🕒 After Hours Phone: (619)
477-2771

Accepting New Patients: Yes

📄 Site English Spoken: Y
📄 Site Language(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: TU 10:00AM-5:00PM
W-F 9:30AM-5:00PM

ZAIDI, NOORINA, OD

Provider Gender: Female
License Number: 35615
NPI: 1023477262

Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

📞 Phone: (619) 470-2700
Fax: (619) 267-8221

🕒 After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

📄 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F

8:00AM-4:30PM

ZAIDI, NOORINA, OD

Provider Gender: Female
License Number: 35615
NPI: 1023477262

Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

📞 Phone: (619) 472-1010
Fax: (619) 479-5233

🕒 After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

📄 Site English Spoken: Y
📄 Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

ZVANUT, DONALD, OD

Provider Gender: Male
License Number: 8642
NPI: 1336211804

Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

📞 Phone: (619) 472-1010
Fax: (619) 479-5233

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

📞 After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

🗨️ Site English Spoken: Y

🗨️ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

OCEANSIDE

KASAI, SARAH, OD

Provider Gender: Female

License Number: 34226

NPI: 1023406238

Provider English Spoken: Y

Cultural Competency: Y

NORTH COAST OPTOMETRY

📍 3915 MISSION AVE STE 2
OCEANSIDE, CA 92058

📞 Phone: (760) 757-8771

📞 After Hours Phone: (760)
757-8771

Accepting New Patients: Yes

🗨️ Site English Spoken: Y

🗨️ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU

9:00AM-6:00PM
W 10:00AM-7:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM

NISKANEN, RACHEL, OD

Provider Gender: Female

License Number: 34663

NPI: 1467065797

Provider English Spoken: Y

Cultural Competency: Y

NORTH COAST OPTOMETRY

📍 3915 MISSION AVE STE 2
OCEANSIDE, CA 92058

📞 Phone: (760) 757-8771

📞 After Hours Phone: (760)
757-8771

Accepting New Patients: Yes

🗨️ Site English Spoken: Y

🗨️ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU
9:00AM-6:00PM
W 10:00AM-7:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM

ROSA, ADAM, OD

Provider Gender: Male

License Number: 34093

NPI: 1295250264

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

NORTH COAST OPTOMETRY

📍 3915 MISSION AVE STE 2
OCEANSIDE, CA 92058

📞 Phone: (760) 757-8771

📞 After Hours Phone: (760)
757-8771

Accepting New Patients: Yes

🗨️ Site English Spoken: Y

🗨️ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU
9:00AM-6:00PM
W 10:00AM-7:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM

RAMONA

HOMESLEY, SUSAN, OD

Provider Gender: Female

License Number: 6693

NPI: 1720068984

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

SUSAN D HOMESLEY OD

📍 1516 MAIN ST STE 102
RAMONA, CA 92065

📞 Phone: (760) 789-0950

Fax: (760) 789-6057

📞 After Hours Phone: (760)
789-0950

Accepting New Patients: Yes

🗨️ Site English Spoken: Y


American Sign Language (ASL):

N

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-11:00AM

SAN DIEGO

ACKROYD, ARCHIE, OD

Provider Gender: Male

License Number: 4774


NPI: 1629107172

Provider English Spoken: Y


Cultural Competency: Y

VAN HOOSE OPTOMETRIC CORPORATION

 7246 CLAIREMONT MESA BLVD
SAN DIEGO, CA 92111


 Phone: (858) 292-7193

Fax: (858) 292-8247

 After Hours Phone: (858) 292-7193


Accepting New Patients: Yes

 Site English Spoken: Y


 Site Language(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M 8:00AM-5:00PM
TU-TH 9:00AM-6:00PM
F 8:00AM-5:00PM

ADAMS, MONA, OD

Provider Gender: Female

License Number: 14457

NPI: 1942564521


Provider English Spoken: Y

Cultural Competency: Y


RADY CHILDRENS

SPECIALISTS

 7910 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 309-7702

Fax: (858) 966-8901

 After Hours Phone: (858) 309-7702


Accepting New Patients: Yes

 Site English Spoken: Y

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F
7:00AM-5:00PM

AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y


Provider Language(s) Spoken:

Spanish, Vietnamese

Cultural Competency: Y

WEST COAST EYE CARE

 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 697-4600

Fax: (619) 697-2410

 After Hours Phone: (619) 697-4600

Accepting New Patients: Yes


 Site English Spoken: Y

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y


Provider Language(s) Spoken:

Spanish, Vietnamese

Cultural Competency: Y

WEST COAST EYE CARE

 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

 Phone: (858) 565-8822

Fax: (858) 565-2449

 After Hours Phone: (858) 565-8822


Accepting New Patients: Yes

 Site English Spoken: Y

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

ARCHIBALD, JOHN, OD

Provider Gender: Male

License Number: 11813

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

NPI: 1902893357

Provider English Spoken: Y

Cultural Competency: Y

EYELUX OPTOMETRY

16615 DOVE CANYON RD
STE 105

SAN DIEGO, CA 92127

Phone: (858) 487-7900

Fax: (858) 487-1896

After Hours Phone: (858)
487-7900

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM
SA 8:30AM-2:00PM

BANSAL, PREETI, MD

Provider Gender: Female

License Number: A90890

NPI: 1871664631

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
7:00AM-5:00PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

BEAUDRY, AMANDA, OD

Provider Gender: Female

License Number: 33385

NPI: 1477903516

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes


Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U


D7. Directorio de proveedores de la vista: servicios oculares y de la vista

 Hours: M-F
7:00AM-5:00PM

BERGMARK, JAMIE, OD

Provider Gender: Female
License Number: 33657
NPI: 1669920757
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS
SPECIALISTS

 7910 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 309-7702
Fax: (858) 966-8901


 After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

 Site English Spoken: Y
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Public transportation (within
1/2 mile from Site): 1U

 Hours: M-F
7:00AM-5:00PM

BHATIA, SHAGUN, MD

Provider Gender: Female
License Number: A154902
NPI: 1104237353
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS
SPECIALISTS

 7910 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 309-7702
Fax: (858) 966-8901

 After Hours Phone: (858)


309-7702

Accepting New Patients: Yes

 Site English Spoken: Y
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U


 Hours: M-F
7:00AM-5:00PM

BINDER, NICHOLAS, MD

Provider Gender: Male
License Number: A124698
NPI: 1306076716

Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE
 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

 Phone: (858) 565-8822
Fax: (858) 565-2449


 After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

 Site English Spoken: Y
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM


BINDER, NICHOLAS, MD

Provider Gender: Male
License Number: A124698

NPI: 1306076716

Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE

 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 697-4600
Fax: (619) 697-2410


 After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

 Site English Spoken: Y
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM


BOECK, CARL, OD


Provider Gender: Male
License Number: 6620

NPI: 1588656151

Provider English Spoken: Y
Provider Language(s) Spoken:
German, Spanish

Cultural Competency: Y
VAN HOOSE OPTOMETRIC
CORPORATION

 7246 CLAIREMONT MESA
BLVD
SAN DIEGO, CA 92111

 Phone: (858) 292-7193
Fax: (858) 292-8247

 After Hours Phone: (858)
292-7193

Accepting New Patients: Yes

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M 8:00AM-5:00PM
TU-TH 9:00AM-6:00PM
F 8:00AM-5:00PM

CAO, STEPHANIE, OD

Provider Gender: Female
License Number: 35158
NPI: 1215660436
Provider English Spoken: Y
Cultural Competency: Y
OPTOM-EYES VISION CARE
OPTOMETRY
 5638 MISSION CENTER RD
STE 103
SAN DIEGO, CA 92108
 Phone: (619) 295-2900
Fax: (888) 210-5799
 After Hours Phone: (619) 295-2900

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

CAO, STEPHANIE, OD

Provider Gender: Female
License Number: 35158
NPI: 1215660436
Provider English Spoken: Y
Cultural Competency: Y
FASHION VALLEY EYE CARE
OPTOMETR
 7007 FRIARS RD STE 351
SAN DIEGO, CA 92108
 Phone: (619) 291-2020
Fax: (888) 210-5799

After Hours Phone: (619) 291-2020

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
10:00AM-7:00PM
SA 10:00AM-7:00PM

CAO, STEPHANIE, OD

Provider Gender: Female
License Number: 35158
NPI: 1215660436
Provider English Spoken: Y
Cultural Competency: Y
OPTOM-EYES VISION CARE
OPTOMETRY
 1555 PALM AVE STE A2
SAN DIEGO, CA 92154
 Phone: (619) 297-2020
Fax: (888) 210-5799
 After Hours Phone: (619) 297-2020

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
9:30AM-6:00PM
SA 9:00AM-3:00PM

CHAIN, PEI CHI, OD

Provider Gender: Female
License Number: 34439
NPI: 1730676727
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Chinese
Cultural Competency: Y
SPOTLIGHT OPTOMETRY

7835 HIGHLANDS VLG PL D
106
SAN DIEGO, CA 92129
 Phone: (858) 250-0052
Fax: (858) 788-0287
 After Hours Phone: (858) 250-0052

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TU
9:00AM-5:00PM
W 10:00AM-6:00PM
F 9:00AM-5:00PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

SA 9:00AM-1:00PM

CHEN, LESLIE, OD

Provider Gender: Female
License Number: 12792
NPI: 1508953332
Provider English Spoken: Y
Provider Language(s) Spoken:
Chinese

Cultural Competency: Y
EYE STUDIO OPTOMETRY

4475 UNIVERSITY AVE
SAN DIEGO, CA 92105

Phone: (619) 521-2020
Fax: (619) 521-2025

After Hours Phone: (619)
521-2020

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-W
9:00AM-5:00PM
TH 9:00AM-1:30PM
F 9:00AM-5:00PM
SA 9:00AM-1:00PM

COLEMAN, BROOKE, OD

Provider Gender: Female
License Number: 13551
NPI: 1700040748
Provider English Spoken: Y
Cultural Competency: Y

EYELUX OPTOMETRY

16615 DOVE CANYON RD
STE 105

SAN DIEGO, CA 92127

Phone: (858) 487-7900

Fax: (858) 487-1896

After Hours Phone: (858)
487-7900

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM
SA 8:30AM-2:00PM

COOPER, MICHAEL, OD

Provider Gender: Male

License Number: 10476

NPI: 1164586244

Provider English Spoken: Y

Cultural Competency: Y

EYELUX OPTOMETRY

16615 DOVE CANYON RD
STE 105

SAN DIEGO, CA 92127

Phone: (858) 487-7900

Fax: (858) 487-1896

After Hours Phone: (858)
487-7900

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM
SA 8:30AM-2:00PM

DAVIS, JADE, OD

Provider Gender: Female

License Number: 11765

NPI: 1457303398

Provider English Spoken: Y

Cultural Competency: Y

FASHION VALLEY EYE CARE
OPTOMETR

7007 FRIARS RD STE 351
SAN DIEGO, CA 92108

Phone: (619) 291-2020
Fax: (888) 210-5799

After Hours Phone: (619)
291-2020

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
10:00AM-7:00PM
SA 10:00AM-7:00PM

DAVIS, JADE, OD

Provider Gender: Female

License Number: 11765

NPI: 1457303398

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

5638 MISSION CENTER RD
STE 103

SAN DIEGO, CA 92108

Phone: (619) 295-2900
Fax: (888) 210-5799

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

📞 After Hours Phone: (619)
295-2900

Accepting New Patients: Yes

🗪 Site English Spoken: Y

🗪 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

DEAN, MOENA, OD

Provider Gender: Female

License Number: 33955

NPI: 1265927578

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

📞 Phone: (858) 565-8822

Fax: (858) 565-2449

📞 After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

🗪 Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

DUONG, KIM, OD

Provider Gender: Female

License Number: 34222

NPI: 1114448651

Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123

📞 Phone: (858) 309-7702

Fax: (858) 966-8901

📞 After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

🗪 Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
7:00AM-5:00PM

DUONG, CHERYL, OD

Provider Gender: Female

License Number: 34070

NPI: 1366935678

Provider English Spoken: Y

Cultural Competency: Y

EYELUX OPTOMETRY

📍 16615 DOVE CANYON RD
STE 105

SAN DIEGO, CA 92127

📞 Phone: (858) 487-7900

Fax: (858) 487-1896

📞 After Hours Phone: (858)

487-7900

Accepting New Patients: Yes

🗪 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM
SA 8:30AM-2:00PM

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

📞 Phone: (858) 565-8822

Fax: (858) 565-2449

📞 After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

🗪 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

DYER, SHARON, OD

Provider Gender: Female

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

GIANG, STEVEN, OD

Provider Gender: Male

License Number: 34489

NPI: 1730710104

Provider English Spoken: Y

Cultural Competency: Y

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300
SAN DIEGO, CA 92105

Phone: (619) 284-3937

Fax: (619) 284-3938

After Hours Phone: (619)
284-3937

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL): HEALTHY I CARE OPTOMETRY
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

HO, AMIEE, OD

Provider Gender: Female

License Number: 14527

NPI: 1396009478

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:00PM

HO, HOANG, OD

Provider Gender: Male

License Number: 12582

NPI: 1275684847

Provider English Spoken: Y

Cultural Competency: Y

10737 CAMINO RUIZ STE
220

SAN DIEGO, CA 92126

Phone: (619) 590-1994

After Hours Phone: (619)
590-1994

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: TH-F
9:00AM-5:00PM

HO, AMIEE, OD

Provider Gender: Female

License Number: 14527

NPI: 1396009478

Provider English Spoken: Y

Cultural Competency: Y

UC SAN DIEGO HEALTH

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

HOANG, KEVIN, OD

Provider Gender: Male

License Number: 34401

NPI: 1790339216

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300
SAN DIEGO, CA 92105

Phone: (619) 284-3937

Fax: (619) 284-3938

After Hours Phone: (619)
284-3937

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

HOFFMAN, STEVEN, OD

Provider Gender: Male

License Number: 34561

NPI: 1033736079

Provider English Spoken: Y

Cultural Competency: Y

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300
SAN DIEGO, CA 92105

Phone: (619) 284-3937

Fax: (619) 284-3938

After Hours Phone: (619)
284-3937

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

HOM, GREGORY, OD

Provider Gender: Male

License Number: 9694

NPI: 1154473916

Provider English Spoken: Y

Cultural Competency: Y

GREGORY G HOM OD

11230 SORRENTO VLY RD
STE 145

SAN DIEGO, CA 92121

Phone: (858) 535-9835

Fax: (858) 535-1266

After Hours Phone: (858)
535-9835

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM

HOO, PAMELA, OD

Provider Gender: Female

License Number: 11033

NPI: 1275566010

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:00PM

HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091

NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410



























After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

- N**
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM*
- HUSTANA, LARA, OD**
Provider Gender: Female
License Number: 11472
NPI: 1235161597
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: Y
HILLCREST EYE CENTER-UCSD
 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
 *Phone: (619) 543-6244*
Fax: (619) 295-5034
 *After Hours Phone: (619) 543-6244*
Accepting New Patients: Yes
 *Site English Spoken: Y*
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F
8:00AM-4:00PM*
- HUYNH, PAUL, MD**
Provider Gender: Male
License Number: A79141
NPI: 1871577056
- Provider English Spoken: Y*
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
ADVANCED EYE AND LASER CTR OF CA INC
 4844 UNIVERSITY AVE STE A
SAN DIEGO, CA 92105
 *Phone: (619) 283-1303*
Fax: (619) 283-1666
 *After Hours Phone: (619) 283-1303*
Accepting New Patients: Yes
 *Site English Spoken: Y*
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F
8:00AM-5:00PM*
- HUYNH, LOAN, OD**
Provider Gender: Female
License Number: 34472
NPI: 1003454604
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
NORTH COUNTY OPTOMETRY
 11835 CARMEL MTN RD STE 1313
SAN DIEGO, CA 92128
 *Phone: (858) 674-1276*
Fax: (858) 674-5863
 *After Hours Phone: (858) 674-1276*
Accepting New Patients: Yes
 *Site English Spoken: Y*
-  *Site Language(s) Spoken: Tagalog*
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M 9:00AM-4:00PM
TU 7:00AM-1:00PM
W-TH 10:00AM-6:00PM
F 10:00AM-3:00PM
SA 9:00AM-2:00PM*
- HUYNH, CHI, OD**
Provider Gender: Female
License Number: 12901
NPI: 1922187426
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
CRYSTAL EYESITE OPTOMETRY
 9225 MIRA MESA BLVD STE 108
SAN DIEGO, CA 92126
 *Phone: (858) 547-3988*
Fax: (844) 367-5161
 *After Hours Phone: (858) 547-3988*
Accepting New Patients: Yes
 *Site English Spoken: Y*
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M 9:30AM-6:00PM
W 9:30AM-6:00PM
TH-F 10:00AM-6:00PM*

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

- SA 9:00AM-3:00PM
- HUYNH, PAUL, MD**
Provider Gender: Male
License Number: A79141
NPI: 1871577056
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
ADVANCED EYE AND LASER CTR OF CA INC
10737 CAMINO RUIZ STE 100
SAN DIEGO, CA 92126
Phone: (858) 549-3200
Fax: (858) 549-3207
After Hours Phone: (858) 549-3200
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog, Vietnamese
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM
- JOMOC, CAITLIN, OD**
Provider Gender: Female
License Number: 35009
NPI: 1861164642
Provider English Spoken: Y
Cultural Competency: Y
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Phone: (619) 543-6244
Fax: (619) 295-5034
After Hours Phone: (619) 543-6244
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-4:00PM
- KALBAKJI, NATALY, OD**
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
WEST COAST EYE CARE
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Phone: (858) 565-8822
Fax: (858) 565-2449
- SAN DIEGO, CA 92127
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM
- Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM
- KALBAKJI, NATALY, OD**
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
WEST COAST EYE CARE
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Phone: (858) 565-8822
Fax: (858) 565-2449

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

☎ After Hours Phone: (858) 565-8822

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

KATZMAN, BARRY, MD

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

☎ Phone: (858) 565-8822

Fax: (858) 565-2449

☎ After Hours Phone: (858) 565-8822

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM

TH 9:30AM-5:00PM

F 8:00AM-4:00PM

KATZMAN, BARRY, MD

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

☎ Phone: (619) 697-4600

Fax: (619) 697-2410

☎ After Hours Phone: (619) 697-4600

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

KHALIGHI, PAYMAN, OD

Provider Gender: Male

License Number: 13014

NPI: 1396897880

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

JASMINE P NGUYEN OD INC

📍 4029 43RD ST STE 300
SAN DIEGO, CA 92105

☎ Phone: (619) 284-3937

Fax: (619) 284-3938

☎ After Hours Phone: (619) 284-3937

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Language(s) Spoken: Spanish, Vietnamese

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic

Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

☎ Phone: (619) 697-4600

Fax: (619) 697-2410

☎ After Hours Phone: (619) 697-4600

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Provider Language(s) Spoken:
Arabic

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

📞 Phone: (858) 565-8822

Fax: (858) 565-2449

🕒 After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

🗒 Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

KHAN, FAHAD, MD

Provider Gender: Male

License Number: A163142

NPI: 1548605843

Provider English Spoken: Y

Provider Language(s) Spoken:

Hindi

Cultural Competency: Y
VISION SPECIALISTS OF
CALIFORNIA

📍 233 LEWIS ST
SAN DIEGO, CA 92103

📞 Phone: (619) 501-9050

Fax: (619) 501-9054

🕒 After Hours Phone: (619)
501-9050

Accepting New Patients: Yes

🗒 Site English Spoken: Y

🗒 Site Language(s) Spoken:
Bengali, Hindi, Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TH
8:00AM-5:00PM
F 8:00AM-4:00PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

📞 Phone: (858) 565-8822

Fax: (858) 565-2449

🕒 After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

🗒 Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

📞 Phone: (619) 697-4600

Fax: (619) 697-2410

🕒 After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

🗒 Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

KHINDA, SUNEHA, OD

Provider Gender: Female

License Number: 35494

NPI: 1750066726

Provider English Spoken: Y

Cultural Competency: Y

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

EYELUX OPTOMETRY

16615 DOVE CANYON RD
STE 105

SAN DIEGO, CA 92127

Phone: (858) 487-7900

Fax: (858) 487-1896

After Hours Phone: (858)
487-7900

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM
SA 8:30AM-2:00PM

KIM, PHILIP, OD

Provider Gender: Male

License Number: 33893

NPI: 1376929034

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:00PM

KLAREN, AMANDA, OD

Provider Gender: Female

License Number: 12617

NPI: 1396876611

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
7:00AM-5:00PM

KULISCHAK, JOHN, OD

Provider Gender: Male

License Number: 9279

NPI: 1740205236

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)

543-6244

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:00PM

LAM, ANNE, OD

Provider Gender: Female

License Number: 12810

NPI: 1174550768

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:00PM

LARSEN, STEVEN, OD

Provider Gender: Male

License Number: 7687

NPI: 1629194782

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: Y
UPTOWN OPTOMETRY
 4096 PARK BLVD
 SAN DIEGO, CA 92103
 Phone: (619) 291-5505
 Fax: (619) 291-4404
 After Hours Phone: (619) 291-5505

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: TU-F
 9:00AM-3:00PM
 SA 10:00AM-2:00PM

LAU, KUEN CHINE, OD

Provider Gender: Male
 License Number: 11166
 NPI: 1821001645
 Provider English Spoken: Y
 Cultural Competency: Y
FASHION VALLEY EYE CARE OPTOMETR
 7007 FRIARS RD STE 351
 SAN DIEGO, CA 92108
 Phone: (619) 291-2020
 Fax: (888) 210-5799
 After Hours Phone: (619) 291-2020

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:

Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 10:00AM-7:00PM
 SA 10:00AM-7:00PM

LAU, KUEN CHINE, OD

Provider Gender: Male
 License Number: 11166
 NPI: 1821001645
 Provider English Spoken: Y
 Cultural Competency: Y
OPTOM-EYES VISION CARE OPTOMETRY

5638 MISSION CENTER RD STE 103
 SAN DIEGO, CA 92108
 Phone: (619) 295-2900
 Fax: (888) 210-5799

After Hours Phone: (619) 295-2900

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
 9:00AM-5:30PM
 SA 9:00AM-3:00PM

LAU, JANICE, OD

Provider Gender: Female

License Number: 13037
 NPI: 1952453300
 Provider English Spoken: Y
 Cultural Competency: Y
SABRE SPRINGS OPTOMETRY
 12650 SABRE SPGS PKWY STE 203
 SAN DIEGO, CA 92128
 Phone: (858) 748-1265
 Fax: (844) 269-9527
 After Hours Phone: (858) 748-1265

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Vietnamese

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-TU
 9:00AM-5:00PM
 W 10:00AM-6:00PM
 TH 9:00AM-5:00PM
 F 10:00AM-6:00PM

LAU, KUEN CHINE, OD

Provider Gender: Male
 License Number: 11166
 NPI: 1821001645
 Provider English Spoken: Y
 Cultural Competency: Y
OPTOM-EYES VISION CARE OPTOMETRY
 1555 PALM AVE STE A2
 SAN DIEGO, CA 92154
 Phone: (619) 297-2020
 Fax: (888) 210-5799
 After Hours Phone: (619) 297-2020

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL): Provider English Spoken: Y

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F
9:30AM-6:00PM
SA 9:00AM-3:00PM

LEE, JASON, OD

Provider Gender: Male

License Number: 14881

NPI: 1679985584

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
7:00AM-5:00PM

LIN, HENRY, OD

Provider Gender: Male

License Number: 11368

NPI: 1861405664

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Chinese

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

5638 MISSION CENTER RD
STE 103
SAN DIEGO, CA 92108

Phone: (619) 295-2900

Fax: (888) 210-5799

After Hours Phone: (619)
295-2900

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

LIN, HENRY, OD

Provider Gender: Male

License Number: 11368

NPI: 1861405664

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Chinese

Cultural Competency: Y

FASHION VALLEY EYE CARE
OPTOMETR

7007 FRIARS RD STE 351
SAN DIEGO, CA 92108

Phone: (619) 291-2020

Fax: (888) 210-5799

After Hours Phone: (619)
291-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F
10:00AM-7:00PM
SA 10:00AM-7:00PM

LIN, HENRY, OD

Provider Gender: Male

License Number: 11368

NPI: 1861405664

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Chinese

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

1555 PALM AVE STE A2
SAN DIEGO, CA 92154

Phone: (619) 297-2020

Fax: (888) 210-5799

After Hours Phone: (619)
297-2020

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

🕒 *Hours: M-F*
9:30AM-6:00PM
SA 9:00AM-3:00PM

LLANES, BENJAMIN, OD

Provider Gender: Male
License Number: 8782
NPI: 1053309005
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: Y
SEE KLEER EYECARE CENTER

📍 9580 BLACK MOUNTAIN
RD STE J
SAN DIEGO, CA 92126
☎ *Phone: (858) 536-8952*
Fax: (858) 536-8951

🕒 *After Hours Phone: (858)*
536-8952

Accepting New Patients: Yes

🗒 *Site English Spoken: Y*
🗒 *Site Languages(s) Spoken:*
Spanish, Tagalog

American Sign Language (ASL):
N

♿ *Accessibility: CONTACT*
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 *Hours: M-TH*
11:00AM-6:00PM
F 1:00PM-5:00PM
SA 9:00AM-1:00PM

MARR, RYAN, OD

Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

☎ *Phone: (858) 565-8822*
Fax: (858) 565-2449

🕒 *After Hours Phone: (858)*
565-8822

Accepting New Patients: Yes

🗒 *Site English Spoken: Y*
American Sign Language (ASL):
N

♿ *Accessibility: CONTACT*
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 *Hours: M 10:00AM-6:00PM*
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

MARR, RYAN, OD

Provider Gender: Male
License Number: 35302
NPI: 1235857525

Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
☎ *Phone: (619) 697-4600*
Fax: (619) 697-2410

🕒 *After Hours Phone: (619)*
697-4600

Accepting New Patients: Yes

🗒 *Site English Spoken: Y*
American Sign Language (ASL):
N

♿ *Accessibility: CONTACT*
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 *Hours: M 7:30AM-4:30PM*

TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

MCCLEAN, ESMERALDA, OD

Provider Gender: Female
License Number: 15001
NPI: 1962817981
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y

HILLCREST EYE
CENTER-UCSD

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
☎ *Phone: (619) 543-6244*
Fax: (619) 295-5034

🕒 *After Hours Phone: (619)*
543-6244

Accepting New Patients: Yes

🗒 *Site English Spoken: Y*
American Sign Language (ASL):
N

♿ *Accessibility: CONTACT*
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

























🕒 *Hours: M-F*
8:00AM-4:00PM

MCCLEAN, ESMERALDA, OD

Provider Gender: Female
License Number: 15001
NPI: 1962817981
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y

UC SAN DIEGO HEALTH

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

-  16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (858) 534-6290
Fax: (858) 732-0921
 After Hours Phone: (858)
534-6290
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM
- MCGRAW, JOSEPH, MD**
Provider Gender: Male
License Number: A155228
NPI: 1588624852
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
 Phone: (619) 697-4600
Fax: (619) 697-2410
 After Hours Phone: (619)
697-4600
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM
- MIZOGUCHI, LIANNE, OD**
Provider Gender: Female
License Number: 10104
NPI: 1619900313
Provider English Spoken: Y
Cultural Competency: Y
HILLCREST EYE
CENTER-UCSD
 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
 Phone: (619) 543-6244
Fax: (619) 295-5034
 After Hours Phone: (619)
543-6244
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
 Hours: M-F
8:00AM-4:00PM
- MOLL, ANGELA, MD**
Provider Gender: Female
License Number: A105472
NPI: 1861648602
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS
SPECIALISTS
 7910 FROST ST STE 200
SAN DIEGO, CA 92123
 Phone: (858) 309-7702
Fax: (858) 966-8901
 After Hours Phone: (858)
309-7702
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M-F
7:00AM-5:00PM
- MOOR, TRACY, OD**
Provider Gender: Female
License Number: 35085
NPI: 1184283277

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

☎ Phone: (619) 543-6244

Fax: (619) 295-5034

🕒 After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

🗪 Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-4:00PM

MOOR, TRACY, OD

Provider Gender: Female

License Number: 35085

NPI: 1184283277

Provider English Spoken: Y

Cultural Competency: Y

UC SAN DIEGO HEALTH

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (858) 534-6290

Fax: (858) 732-0921

🕒 After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

🗪 Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Provider Language(s) Spoken:

Indonesian, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

☎ Phone: (858) 565-8822

Fax: (858) 565-2449

🕒 After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

🗪 Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Provider Language(s) Spoken:

Indonesian, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

☎ Phone: (619) 697-4600

Fax: (619) 697-2410

🕒 After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

🗪 Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

NGUYEN, BRUCE, OD

Provider Gender: Male

License Number: 14156

NPI: 1376839019

Provider English Spoken: Y

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: Y

CLAIREMONT OPTOMETRY

📍 10715 TIERRASANTA BLVD
STE F

SAN DIEGO, CA 92124

☎ Phone: (858) 279-6500

Fax: (858) 225-7174

🕒 After Hours Phone: (858)
279-6500

Accepting New Patients: Yes

🗪 Site English Spoken: Y

🗪 Site Languages(s) Spoken:

Spanish, Vietnamese

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

- American Sign Language (ASL):* Provider Language(s) Spoken: **PROVIDER**
N
Public transportation (within 1/2 mile from Site): 1T
Hours: M-W 9:00AM-6:00PM
TH-F 9:00AM-5:00PM
SA 8:00AM-3:00PM
- NGUYEN, BRUCE, OD**
Provider Gender: Male
License Number: 14156
NPI: 1376839019
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
SD VISION CARE OPTOMETRY
3807 FAIRMOUNT AVE STE 200
SAN DIEGO, CA 92105
Phone: (619) 508-5678
Fax: (619) 501-0686
After Hours Phone: (619) 508-5678
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
- NGUYEN, JASMINE, OD**
Provider Gender: Female
License Number: 11189
NPI: 1497896922
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
Phone: (619) 284-3937
Fax: (619) 284-3938
After Hours Phone: (619) 284-3937
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9:00AM-5:00PM
SA 9:00AM-1:00PM
- NGUYEN, KELVIN, OD**
Provider Gender: Male
License Number: 11085
NPI: 1518923572
Provider English Spoken: Y
- NGUYEN, THANH, OD**
Provider Gender: Female
License Number: 13126
NPI: 1992813323
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
Phone: (619) 284-3937
Fax: (619) 284-3938
After Hours Phone: (619) 284-3937
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9:00AM-5:00PM
SA 9:00AM-1:00PM
- NGUYEN, THANH, OD**
Provider Gender: Female
License Number: 13126
NPI: 1992813323
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
Phone: (619) 284-3937
Fax: (619) 284-3938
After Hours Phone: (619) 284-3937
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9:00AM-5:00PM
SA 9:00AM-1:00PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Vietnamese

Cultural Competency: Y

SABRE SPRINGS OPTOMETRY

12650 SABRE SPGS PKWY
STE 203
SAN DIEGO, CA 92128

Phone: (858) 748-1265

Fax: (844) 269-9527

After Hours Phone: (858)
748-1265

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-TU
9:00AM-5:00PM
W 10:00AM-6:00PM
TH 9:00AM-5:00PM
F 10:00AM-6:00PM

O HALLORAN, HENRY, MD

Provider Gender: Male

License Number: A73282

NPI: 1235287947

Provider English Spoken: Y

Provider Language(s) Spoken:

German, Spanish

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
7:00AM-5:00PM

PATEL, SARJAN, MD

Provider Gender: Male

License Number: A114976

NPI: 1316199326

Provider English Spoken: Y

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

PATEL, GITANE, MD

Provider Gender: Male

License Number: A108603

NPI: 1710171434

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

PATEL, SARJAN, MD

Provider Gender: Male

License Number: A114976

NPI: 1316199326

Provider English Spoken: Y

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y


D7. Directorio de proveedores de la vista: servicios oculares y de la vista

American Sign Language (ASL): NPI: 1841271434

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

PATEL, GITANE, MD

Provider Gender: Male

License Number: A108603


NPI: 1710171434

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 697-4600
Fax: (619) 697-2410

 After Hours Phone: (619)
697-4600

Accepting New Patients: Yes


Site English Spoken: Y

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

PHAM, TONY, OD

Provider Gender: Male

License Number: 12348


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish, Vietnamese

Cultural Competency: Y

MIRA MESA EYECARE

 6755 MIRA MESA BLVD STE
141

SAN DIEGO, CA 92121
 Phone: (858) 535-8282

Fax: (858) 535-0537

 After Hours Phone: (858)
535-8282

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TU
9:30AM-6:00PM
TH-F 9:30AM-6:00PM

PHUNG, RICHARD N V, OD

Provider Gender: Male

License Number: 9547

NPI: 1689661571


Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese, Chinese

Cultural Competency: Y

SCRIPPS RANCH OPTOMETRI
CTR

 9880 HIBERT ST STE E1
SAN DIEGO, CA 92131

 Phone: (858) 693-9044
Fax: (858) 693-0704

 After Hours Phone: (858)

693-9044

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Vietnamese

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 10:00AM-6:00PM
TU 10:00AM-2:00PM
W-TH 10:00AM-6:00PM
F 9:00AM-2:00PM
SA 9:00AM-2:00PM

POUSTI, SHEIVA, OD

Provider Gender: Female

License Number: 10403

NPI: 1730240052

Provider English Spoken: Y


Cultural Competency: Y

SAN DIEGO EYE CLINIC

OPTOMETRY

 3560 FAIRMOUNT AVE STE
A

SAN DIEGO, CA 92105

 Phone: (619) 431-2020

Fax: (619) 376-2100

 After Hours Phone: (619)
431-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

🕒 Hours: SU-SA
9:00AM-6:00PM

PRABHU, SUJATA, MD

Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
☎ Phone: (619) 697-4600
Fax: (619) 697-2410
🕒 After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

🗨 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

PRABHU, SUJATA, MD

Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

☎ Phone: (858) 565-8822
Fax: (858) 565-2449

🕒 After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

🗨 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

SANDOC, EMILY, OD

Provider Gender: Female
License Number: 13535
NPI: 1992969794
Provider English Spoken: Y
Cultural Competency: Y
OPTOM-EYES VISION CARE
OPTOMETRY

📍 5638 MISSION CENTER RD
STE 103

SAN DIEGO, CA 92108
☎ Phone: (619) 295-2900
Fax: (888) 210-5799

🕒 After Hours Phone: (619)
295-2900

Accepting New Patients: Yes

🗨 Site English Spoken: Y
Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

SHULKIN, MITCHELL, OD

Provider Gender: Male
License Number: 8153
NPI: 1770531865
Provider English Spoken: Y
Cultural Competency: Y
NORTH COUNTY OPTOMETRY

📍 11835 CARMEL MTN RD STE
1313

SAN DIEGO, CA 92128
☎ Phone: (858) 674-1276
Fax: (858) 674-5863

🕒 After Hours Phone: (858)
674-1276

Accepting New Patients: Yes

🗨 Site English Spoken: Y
Site Language(s) Spoken:
Tagalog

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER



















Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M 9:00AM-4:00PM
TU 7:00AM-1:00PM
W-TH 10:00AM-6:00PM
F 10:00AM-3:00PM
SA 9:00AM-2:00PM

SOLIS, KEVIN, OD

Provider Gender: Male
License Number: 10420
NPI: 1538362116
Provider English Spoken: Y

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

- Cultural Competency: Y*
OPTOM-EYES VISION CARE OPTOMETRY
 5638 MISSION CENTER RD STE 103
 SAN DIEGO, CA 92108
 Phone: (619) 295-2900
 Fax: (888) 210-5799
 After Hours Phone: (619) 295-2900
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 9:00AM-5:30PM
 SA 9:00AM-3:00PM
- SOLIS, KEVIN, OD**
Provider Gender: Male
License Number: 10420
NPI: 1538362116
Provider English Spoken: Y
Cultural Competency: Y
OPTOM-EYES VISION CARE OPTOMETRY
 1555 PALM AVE STE A2
 SAN DIEGO, CA 92154
 Phone: (619) 297-2020
 Fax: (888) 210-5799
 After Hours Phone: (619) 297-2020
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 9:30AM-6:00PM
 SA 9:00AM-3:00PM
- TA, TRANG, OD**
Provider Gender: Female
License Number: 12100
NPI: 1518381045
Provider English Spoken: Y
- American Sign Language (ASL): Provider Language(s) Spoken: Vietnamese*
Cultural Competency: Y
JASMINE P NGUYEN OD INC
 4029 43RD ST STE 300
 SAN DIEGO, CA 92105
 Phone: (619) 284-3937
 Fax: (619) 284-3938
 After Hours Phone: (619) 284-3937
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Vietnamese
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 9:00AM-5:00PM
 SA 9:00AM-1:00PM
- TAM, MAY, OD**
Provider Gender: Female
License Number: 11960
NPI: 1548255896
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
FASHION VALLEY EYE CARE OPTOMETR
 7007 FRIARS RD STE 351
 SAN DIEGO, CA 92108
 Phone: (619) 291-2020
 Fax: (888) 210-5799
 After Hours Phone: (619) 291-2020
Accepting New Patients: Yes
 Site English Spoken: Y

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
10:00AM-7:00PM
SA 10:00AM-7:00PM

TAM, MAY, OD

Provider Gender: Female

License Number: 11960

NPI: 1548255896

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

📍 5638 MISSION CENTER RD
STE 103

SAN DIEGO, CA 92108

☎ Phone: (619) 295-2900

Fax: (888) 210-5799

🕒 After Hours Phone: (619)
295-2900

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

TAM, MAY, OD

Provider Gender: Female

License Number: 11960

NPI: 1548255896

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

📍 1555 PALM AVE STE A2
SAN DIEGO, CA 92154

☎ Phone: (619) 297-2020

Fax: (888) 210-5799

🕒 After Hours Phone: (619)
297-2020

Accepting New Patients: Yes

☐ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
9:30AM-6:00PM
SA 9:00AM-3:00PM

TILLMAN, SYLVIA, OD

Provider Gender: Female

License Number: 9726

NPI: 1174730824

Provider English Spoken: Y

Cultural Competency: Y

JASMINE P NGUYEN OD INC

📍 4029 43RD ST STE 300
SAN DIEGO, CA 92105

☎ Phone: (619) 284-3937

Fax: (619) 284-3938

🕒 After Hours Phone: (619)

284-3937

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

☎ Phone: (858) 565-8822

Fax: (858) 565-2449

🕒 After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

☐ Site English Spoken: Y
American Sign Language (ASL):
N



♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

TON-NU, MY LINH, OD


Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
 Phone: (619) 697-4600
Fax: (619) 697-2410
 After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

 Site English Spoken: Y
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

TONNU, ANH, OD


Provider Gender: Female
License Number: 11318
NPI: 1679521280
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: Y
WEST COAST EYE CARE
 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
 Phone: (619) 697-4600
Fax: (619) 697-2410
 After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

 Site English Spoken: Y
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

TONNU, ANH, OD

Provider Gender: Female
License Number: 11318
NPI: 1679521280
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y
WEST COAST EYE CARE
 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
 Phone: (858) 565-8822
Fax: (858) 565-2449


 After Hours Phone: (858)
565-8822

Accepting New Patients: Yes



 Site English Spoken: Y
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM


TRAN, ALEXANDER, OD

Provider Gender: Male
License Number: 14136
NPI: 1902414790
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS
SPECIALISTS
 7910 FROST ST STE 200
SAN DIEGO, CA 92123
 Phone: (858) 309-7702
Fax: (858) 966-8901

 After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

 Site English Spoken: Y
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M-F
7:00AM-5:00PM

TRANG, CHAU, OD

Provider Gender: Female
License Number: 9556
NPI: 1073671087
Provider English Spoken: Y
Provider Language(s) Spoken:
French, Spanish, Vietnamese,
Chinese
Cultural Competency: Y
CHAU H TRANG OD

 6947 LINDA VISTA RD STE
A
SAN DIEGO, CA 92111
 Phone: (858) 495-0592
Fax: (858) 495-0560

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

- After Hours Phone: (858) 495-0592
 SA 9:00AM-3:00PM
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: French, Spanish, Vietnamese
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M 10:00AM-3:00PM
 W 10:00AM-3:00PM
 F 10:00AM-5:00PM
 SA 9:00AM-1:00PM
- TU, CHARLES, OD**
 Provider Gender: Male
 License Number: 34618
 NPI: 1073137691
 Provider English Spoken: Y
 Cultural Competency: Y
 OPTOM-EYES VISION CARE OPTOMETRY
 1555 PALM AVE STE A2
 SAN DIEGO, CA 92154
 Phone: (619) 297-2020
 Fax: (888) 210-5799
 After Hours Phone: (619) 297-2020
 Accepting New Patients: Yes
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 9:30AM-6:00PM
- VAN HOOSE, MARC, OD**
 Provider Gender: Male
 License Number: 12667
 NPI: 1932280054
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: Y
 VAN HOOSE OPTOMETRIC CORPORATION
 7246 CLAIREMONT MESA BLVD
 SAN DIEGO, CA 92111
 Phone: (858) 292-7193
 Fax: (858) 292-8247
 After Hours Phone: (858) 292-7193
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M 8:00AM-5:00PM
 TU-TH 9:00AM-6:00PM
 F 8:00AM-5:00PM
- VIVIRITO, MARY, OD**
 Provider Gender: Female
 License Number: 33798
 NPI: 1477968667
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: Y
- WEST COAST EYE CARE
 4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111
 Phone: (858) 565-8822
 Fax: (858) 565-2449
 After Hours Phone: (858) 565-8822
 Accepting New Patients: Yes
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M 10:00AM-6:00PM
 TU 8:30AM-5:00PM
 W 7:30AM-4:00PM
 TH 9:30AM-5:00PM
 F 8:00AM-4:00PM
- VO, ANDREW MINH, OD**
 Provider Gender: Male
 License Number: 33869
 NPI: 1790291565
 Provider English Spoken: Y
 Provider Language(s) Spoken: Vietnamese
 Cultural Competency: Y
 HILLCREST EYE CENTER-UCSD
 4060 4TH AVE STE 610
 SAN DIEGO, CA 92103
 Phone: (619) 543-6244
 Fax: (619) 295-5034
 After Hours Phone: (619) 543-6244
 Accepting New Patients: Yes
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

PROVIDER
Public transportation (within
1/2 mile from Site): 1T
⌚ Hours: M-F
8:00AM-4:00PM

YU, CAROL, OD

Provider Gender: Female
License Number: 34047
NPI: 1639697451
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish, Chinese
Cultural Competency: Y
HILLCREST EYE
CENTER-UCSD

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

☎ Phone: (619) 543-6244
Fax: (619) 295-5034

📞 After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

🗨 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

⌚ Hours: M-F
8:00AM-4:00PM

ZAIDI, NOORINA, OD

Provider Gender: Female
License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2

SAN DIEGO, CA 92111
☎ Phone: (858) 565-8822
Fax: (858) 565-2449

📞 After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

🗨 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

⌚ Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

ZAIDI, NOORINA, OD

Provider Gender: Female
License Number: 35615
NPI: 1023477262

Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

☎ Phone: (619) 697-4600
Fax: (619) 697-2410

📞 After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

🗨 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

⌚ Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM

W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

ZHAO, TAILUN, MD

Provider Gender: Male
License Number: C186414
NPI: 1952659203
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

☎ Phone: (858) 565-8822
Fax: (858) 565-2449

📞 After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

🗨 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U




⌚ Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

SAN MARCOS

GARFF, KEVIN, MD

Provider Gender: Male
License Number: A160988
NPI: 1609258920
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
RSF OPHTHALMOLOGY


D7. Directorio de proveedores de la vista: servicios oculares y de la vista

 100 N RANCHO SNTA FE RD STE 12
SAN MARCOS, CA 92069
 Phone: (760) 598-0400
Fax: (760) 249-7394
 After Hours Phone: (760) 598-0400


Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Thai

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

GUAN, HOWARD, MD

Provider Gender: Male

License Number: A119766




NPI: 1134427636

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Chinese

Cultural Competency: Y

RSF OPHTHALMOLOGY

 100 N RANCHO SNTA FE RD STE 12
SAN MARCOS, CA 92069
 Phone: (760) 598-0400
Fax: (760) 249-7394
 After Hours Phone: (760) 598-0400


Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Thai

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

PRESTERA, TORY, MD

Provider Gender: Male

License Number: A62321




NPI: 1346224557

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

RSF OPHTHALMOLOGY

 100 N RANCHO SNTA FE RD STE 12
SAN MARCOS, CA 92069
 Phone: (760) 598-0400
Fax: (760) 249-7394
 After Hours Phone: (760) 598-0400


Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Thai

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

SKAY, RICHARD, OD

Provider Gender: Male



License Number: 7649

NPI: 1639251945

Provider English Spoken: Y

Cultural Competency: Y

RICHARD M SKAY OD

 1903 W SAN MARCOS BLVD STE 130
SAN MARCOS, CA 92078
 Phone: (760) 727-2211
Fax: (760) 727-2533


 After Hours Phone: (760) 727-2211

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F
9:00AM-3:00PM

TA, MINI, OD

Provider Gender: Female



License Number: 15170

NPI: 1578955605

Provider English Spoken: Y

Cultural Competency: Y

NEW OPTIX OPTOMETRY


 640 GRAND AVE STE 101
SAN MARCOS, CA 92078
 Phone: (760) 736-0020
Fax: (760) 736-0019

 After Hours Phone: (760) 736-0020

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Vietnamese

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

🕒 *Hours: M 9:00AM-5:00PM
TU 9:00AM-6:00PM
W 9:00AM-5:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM*

THAI, AMANDA, OD

Provider Gender: Female

License Number: 34861

NPI: 1457928558

Provider English Spoken: Y

Cultural Competency: Y

NEW OPTIX OPTOMETRY

📍 640 GRAND AVE STE 101
SAN MARCOS, CA 92078

☎ *Phone: (760) 736-0020*

Fax: (760) 736-0019

🕒 *After Hours Phone: (760)
736-0020*

Accepting New Patients: Yes

Site English Spoken: Y

*Site Languages(s) Spoken:
Spanish, Vietnamese*

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT
PROVIDER*

*Public transportation (within
1/2 mile from Site): 1T*

🕒 *Hours: M 9:00AM-5:00PM
TU 9:00AM-6:00PM
W 9:00AM-5:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM*

TRAN, MICHAEL, OD

Provider Gender: Male

License Number: 14530

NPI: 1649524216

Provider English Spoken: Y

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: Y

NEW OPTIX OPTOMETRY

📍 640 GRAND AVE STE 101
SAN MARCOS, CA 92078

☎ *Phone: (760) 736-0020*

Fax: (760) 736-0019

🕒 *After Hours Phone: (760)
736-0020*

Accepting New Patients: Yes

Site English Spoken: Y

*Site Languages(s) Spoken:
Spanish, Vietnamese*

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT
PROVIDER*

*Public transportation (within
1/2 mile from Site): 1T*

🕒 *Hours: M 9:00AM-5:00PM
TU 9:00AM-6:00PM
W 9:00AM-5:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM*

SPRING VALLEY

FLEMING, JOHN, OD

Provider Gender: Male

License Number: 8461

NPI: 1033192133

Provider English Spoken: Y

Cultural Competency: Y

JOHN C FLEMING OD

📍 9628 CAMPO RD STE C
SPRING VALLEY, CA 91977

☎ *Phone: (619) 463-9318*

Fax: (619) 463-9640

🕒 *After Hours Phone: (619)
463-9318*

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT
PROVIDER*

*Public transportation (within
1/2 mile from Site): 1U*

🕒 *Hours: M 9:00AM-5:00PM
TU 9:00AM-5:30PM
W-TH 9:00AM-5:00PM
F 9:00AM-4:00PM*

HOANG, KENNY, OD

Provider Gender: Male

License Number: 35207

NPI: 1740868603

Provider English Spoken: Y

Cultural Competency: Y

JOHN C FLEMING OD

📍 9628 CAMPO RD STE C
SPRING VALLEY, CA 91977

☎ *Phone: (619) 463-9318*

Fax: (619) 463-9640

🕒 *After Hours Phone: (619)
463-9318*

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT
PROVIDER*

*Public transportation (within
1/2 mile from Site): 1U*

🕒 *Hours: M 9:00AM-5:00PM
TU 9:00AM-5:30PM
W-TH 9:00AM-5:00PM
F 9:00AM-4:00PM*

JOHNSON, CHRISTOPHER, OD

Provider Gender: Male

License Number: 15100

NPI: 1568861425

Provider English Spoken: Y

Cultural Competency: Y

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

JOHN C FLEMING OD

687 SWEETWATER RD
SPRING VALLEY, CA 91977

Phone: (619) 463-9318

Fax: (619) 463-9640

After Hours Phone: (619)
463-9318

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 9:00AM-5:30PM
W-TH 9:00AM-5:00PM
F 9:00AM-4:00PM

KALRA, ANKUR, OD

Provider Gender: Male

License Number: 11898

NPI: 1124195789

Provider English Spoken: Y

Provider Language(s) Spoken:
Hindi

Cultural Competency: Y

EYE CARE OPTOMETRY

ASSOCIATES

687 SWEETWATER RD
SPRING VALLEY, CA 91977

Phone: (619) 466-9444

Fax: (619) 466-9314

After Hours Phone: (619)
466-9444

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

KEDDINGTON, JOAN, OD

Provider Gender: Female

License Number: 6263

NPI: 1992872691

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

EYE CARE OPTOMETRY

ASSOCIATES

687 SWEETWATER RD
SPRING VALLEY, CA 91977

Phone: (619) 466-9444

Fax: (619) 466-9314

After Hours Phone: (619)
466-9444

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

KING, MARY, OD

Provider Gender: Female

License Number: 13711

NPI: 1578792107

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

EYE CARE OPTOMETRY

ASSOCIATES

687 SWEETWATER RD
SPRING VALLEY, CA 91977

Phone: (619) 466-9444

Fax: (619) 466-9314

After Hours Phone: (619)
466-9444

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

NGUYEN, THERESA, OD

Provider Gender: Female

License Number: 35530TLG

NPI: 1609555713

Provider English Spoken: Y

Cultural Competency: Y

EYE CARE OPTOMETRY

ASSOCIATES

687 SWEETWATER RD
SPRING VALLEY, CA 91977

Phone: (619) 466-9444




Fax: (619) 466-9314

After Hours Phone: (619)
466-9444

Accepting New Patients: Yes

Site English Spoken: Y



D7. Directorio de proveedores de la vista: servicios oculares y de la vista

 *Site Languages(s) Spoken:* Spanish
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 *Hours:* M-F
 9:00AM-6:00PM
 SA 9:00AM-5:00PM

SOLIS, KEVIN, OD

Provider Gender: Male
License Number: 10420
NPI: 1538362116
Provider English Spoken: Y
Cultural Competency: Y
 EYE CARE OPTOMETRY ASSOCIATES

 687 SWEETWATER RD
 SPRING VALLEY, CA 91977
 *Phone:* (619) 466-9444
Fax: (619) 466-9314
 *After Hours Phone:* (619) 466-9444
Accepting New Patients: Yes
 *Site English Spoken:* Y
 *Site Languages(s) Spoken:* Spanish


American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 *Hours:* M-F
 9:00AM-6:00PM
 SA 9:00AM-5:00PM



TOUBIA, ELIAS, OD


Provider Gender: Male


License Number: 33758
NPI: 1740701481
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
 EYE CARE OPTOMETRY ASSOCIATES

 687 SWEETWATER RD
 SPRING VALLEY, CA 91977
 *Phone:* (619) 466-9444
Fax: (619) 466-9314

 *After Hours Phone:* (619) 466-9444
Accepting New Patients: Yes

 *Site English Spoken:* Y
 *Site Languages(s) Spoken:* Spanish
American Sign Language (ASL): N

 *Accessibility:* CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U







 *Hours:* M-F
 9:00AM-6:00PM
 SA 9:00AM-5:00PM

VALLEY CENTER

JOYCE, ROBERT, OD



Provider Gender: Male
License Number: 11833
NPI: 1275585127
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
 VALLEY CENTER OPTOMETRY




 29115 VALLEY CENTER RD
 STE E
 VALLEY CENTER, CA 92082


 *Phone:* (760) 751-8771
Fax: (760) 751-8772
 *After Hours Phone:* (760) 751-8771
Accepting New Patients: Yes
 *Site English Spoken:* Y
 *Site Languages(s) Spoken:* Spanish
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 *Hours:* M 9:00AM-6:00PM
 TU-F 9:00AM-5:00PM

LE, TAM, OD

Provider Gender: Female
License Number: 12951
NPI: 1235268707
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: Y
 VALLEY CENTER OPTOMETRY

 29115 VALLEY CENTER RD
 STE E
 VALLEY CENTER, CA 92082
 *Phone:* (760) 751-8771
Fax: (760) 751-8772

 *After Hours Phone:* (760) 751-8771
Accepting New Patients: Yes
 *Site English Spoken:* Y
 *Site Languages(s) Spoken:* Spanish
American Sign Language (ASL): N

 *Accessibility:* CONTACT PROVIDER
Public transportation (within

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

1/2 mile from Site): 1U

🕒 Hours: M 9:00AM-6:00PM
TU-F 9:00AM-5:00PM

VISTA

DEMLINGER, GLENN, OD

Provider Gender: Male

License Number: 8954

NPI: 1508932518

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

SHADOWRIDGE FAMILY
VISION

📍 741 SHADOWRIDGE DR
VISTA, CA 92083

📞 Phone: (760) 727-1844
Fax: (760) 727-3044

🕒 After Hours Phone: (760)
727-1844

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU
9:00AM-6:00PM
W 7:00AM-5:00PM
TH 9:00AM-6:00PM

GEORGE, BRUCE, OD

Provider Gender: Male

License Number: 7696

NPI: 1356414551

Provider English Spoken: Y

Provider Language(s) Spoken:

Korean, Spanish

Cultural Competency: Y

BRUCE D GEORGE OD

📍 931 ANZA AVE STE B
VISTA, CA 92084

📞 Phone: (760) 758-2340
Fax: (760) 867-2222

🕒 After Hours Phone: (760)
758-2340

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M 9:00AM-5:00PM
TU-W 9:00AM-6:00PM
TH-F 9:00AM-5:00PM

GEORGE, KENDALL, OD

Provider Gender: Male

License Number: 34270

NPI: 1619529948

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

BRUCE D GEORGE OD

📍 931 ANZA AVE STE B
VISTA, CA 92084

📞 Phone: (760) 758-2340
Fax: (760) 867-2222

🕒 After Hours Phone: (760)
758-2340

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:

Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M 9:00AM-5:00PM
TU-W 9:00AM-6:00PM
TH-F 9:00AM-5:00PM

TRAN, THAO, OD

Provider Gender: Female

License Number: 12867

NPI: 1962581421

Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

KINDERSPECS-GOOD EYES
OPTOMETRY

📍 110 CIVIC CENTER DR STE
204
VISTA, CA 92084

📞 Phone: (760) 753-3665
Fax: (408) 969-1653

🕒 After Hours Phone: (760)
753-3665

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TH
10:00AM-5:00PM

D8. Otros proveedores de servicios


SAN MARCOS


AMERICARE ADULT DAY HEALTH CARE CENTER†

License Number: 060000832


 340 RANCHEROS DR STE
196


SAN MARCOS, CA 92069


 *Phone: (760) 682-2424*

 *After Hours Phone: (760)
682-2424*

 *Site English Spoken: Y*

 *Hours: 24 Hours / 7
days/week*

 *Accessibility: CONTACT
PROVIDER*

 *Website: [www.americaread
hc.com](http://www.americaread
hc.com)*

Cultural Competency: N

Accepting New Patients: No

D9. Centros de atención de urgencia de Blue Shield Promise

CHULA VISTA

AFC URGENT CARE OF BONITA*

NPI: 1316225147

760 OTAY LAKES RD
CHULA VISTA, CA 91910

(619) 821-2300

(619) 821-2300

Site Languages(s) Spoken:
Spanish

SU 8:00AM-5:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

www.afcurgentcare.com/chula-vista/

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1396058137

760 OTAY LAKES RD
CHULA VISTA, CA 91910

(619) 821-2300

(619) 821-2300

SU 8:00AM-6:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-6:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

SAN DIEGO

AFC URGENT CARE OF SAN DIEGO*

NPI: 1396058137

1740 ROSECRANS ST
SAN DIEGO, CA 92106

(619) 790-7800

(619) 790-7800

SU 8:00AM-6:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-6:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1396058137

8590 RIO SAN DIEGO DR
STE 111
SAN DIEGO, CA 92108

(619) 736-4600

(619) 736-4600

SU 8:00AM-6:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-6:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1396058137

5671 BALBOA AVE
SAN DIEGO, CA 92111

(858) 800-2880

(858) 800-2880

SU 8:00AM-6:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-6:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN

DIEGO*

NPI: 1396058137

8260 MIRA MESA BLVD
STE A

SAN DIEGO, CA 92126

(858) 900-3550

(858) 900-3550

SU 8:00AM-6:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-6:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1558788620

8590 RIO SAN DIEGO DR
STE 111

SAN DIEGO, CA 92108

(619) 736-4600

(619) 736-4600

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1952995466

1740 ROSECRANS ST
SAN DIEGO, CA 92106

(619) 790-7800

(619) 790-7800

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

D9. Centros de atención de urgencia de Blue Shield Promise

Accepting New Patients: No

SANTEE

AFC URGENT CARE OF SAN DIEGO*

NPI: 1396058137

8590 RIO SAN DIEGO DR
STE 100

SANTEE, CA 92071

(619) 456-0033

(619) 456-0033

Site Languages(s) Spoken:
Arabic, Spanish

SU 8:00AM-6:00PM

M-F 8:00AM-8:00PM

SA 8:00AM-6:00PM

Accessibility: CONTACT
PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

CHULA VISTA

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

386 E H ST STE 202

CHULA VISTA, CA 91910

(858) 966-1720

(858) 966-1720

SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

Accessibility: CONTACT
PROVIDER

N/A

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

AFC URGENT CARE OF SAN DIEGO*

NPI: 1952995466

8590 RIO SAN DIEGO DR
STE 111

SAN DIEGO, CA 92108

(619) 736-4600

(619) 736-4600

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT
PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1558788620

1740 ROSECRANS ST
SAN DIEGO, CA 92106

(619) 790-7800

(619) 790-7800

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT
PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1558788620

5671 BALBOA AVE
SAN DIEGO, CA 92111

(858) 800-2880

(858) 800-2880

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT
PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1952995466

5671 BALBOA AVE
SAN DIEGO, CA 92111

(858) 800-2880

(858) 800-2880

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT
PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1952995466

8260 MIRA MESA BLVD
STE A

SAN DIEGO, CA 92126

(858) 900-3550

(858) 900-3550

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT
PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1558788620

8260 MIRA MESA BLVD
STE A

SAN DIEGO, CA 92126

(858) 900-3550

(858) 900-3550

SU-SA 8:00AM-8:00PM


Accessibility: CONTACT
PROVIDER


<https://www.afcurgentcare.com/san-diego/>


D9. Centros de atención de urgencia de Blue Shield Promise

NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910

 (858) 966-1720

 (858) 966-1720

 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 *Accessibility:* CONTACT PROVIDER


 N/A


Accepting New Patients: No


RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*


NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910

 (858) 966-1720

 (858) 966-1720

 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 *Accessibility:* CONTACT PROVIDER


 N/A


Accepting New Patients: No


RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*


NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910

 (858) 966-1720

 (858) 966-1720

 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 *Accessibility:* CONTACT PROVIDER


 N/A


Accepting New Patients: No


RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910

 (858) 966-1720

 (858) 966-1720

 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
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ESCONDIDO

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*







NPI: 1669617197
 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT PROVIDER
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Accepting New Patients: No

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D9. Centros de atención de urgencia de Blue Shield Promise

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 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

 (760) 294-9270

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 M-F 8:00AM-5:00PM

 *Accessibility:* CONTACT
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 N/A

Accepting New Patients: No





LA MESA

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 5565 GROSSMONT
CENTER DR STE 2






D9. Centros de atención de urgencia de Blue Shield Promise

LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No


RADY CHILDRENS SPECIALISTS SAN DIEGO MED FN D TN*





NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
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 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
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 *Accessibility:* CONTACT

PROVIDER
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OCEANSIDE

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*






NPI: 1669617197
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 (760) 547-1020
 (760) 547-1020
 *Accessibility:* CONTACT

 PROVIDER
N/A
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
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
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SAN DIEGO

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*




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150
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SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT
PROVIDER
 N/A

Accepting New Patients: No



RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*




NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*





NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

D9. Centros de atención de urgencia de Blue Shield Promise






**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No






**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No






**RADY CHILDRENS
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FNDTN***

NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS


**SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED**


D9. Centros de atención de urgencia de Blue Shield Promise


FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905

 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905

 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905

 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905

 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905

 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905

 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905

 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED

FNDTN*

NPI: 1669617197

 3020 CHILDRENS WAY SAN DIEGO, CA 92123

 (858) 966-8800

 (858) 966-8800

 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED

FNDTN*

NPI: 1669617197

 3020 CHILDRENS WAY SAN DIEGO, CA 92123

 (858) 966-8800

 (858) 966-8800

 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No


RADY CHILDRENS

SPECIALISTS SAN DIEGO MED




FNDTN*




NPI: 1669617197






 3020 CHILDRENS WAY SAN DIEGO, CA 92123

 (858) 966-8800

D9. Centros de atención de urgencia de Blue Shield Promise






 (858) 966-8800
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No






**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***
NPI: 1669617197
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No





**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***
NPI: 1669617197
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
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FNDTN***
NPI: 1669617197
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
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 *Accessibility:* CONTACT PROVIDER
 N/A

Accepting New Patients: No

**RADY CHILDRENS
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FNDTN***
NPI: 1669617197
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
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 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
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FNDTN***
NPI: 1669617197
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
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 N/A
Accepting New Patients: No

**RADY CHILDRENS
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 3020 CHILDRENS WAY
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 (858) 966-8800
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Accepting New Patients: No

RADY CHILDRENS






**SPECIALISTS SAN DIEGO MED
FNDTN***
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SAN DIEGO, CA 92123
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NPI: 1669617197






D9. Centros de atención de urgencia de Blue Shield Promise

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
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Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
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 *Accessibility:* CONTACT PROVIDER
 N/A

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*


NPI: 1669617197





 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
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 *Accessibility:* CONTACT PROVIDER
 N/A

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
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SAN DIEGO, CA 92105

 (619) 280-2905
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 *Accessibility:* CONTACT PROVIDER
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Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

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 4305 UNIVERSITY AVE STE
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Accepting New Patients: No

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 4305 UNIVERSITY AVE STE
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SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT PROVIDER

D9. Centros de atención de urgencia de Blue Shield Promise





 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT
PROVIDER





 N/A
Accepting New Patients: No

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SPECIALISTS SAN DIEGO MED
FNDTN***

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 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
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PROVIDER





 N/A
Accepting New Patients: No

**RADY CHILDRENS
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 N/A
Accepting New Patients: No

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FNDTN***

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SAN DIEGO, CA 92123
 (858) 966-8800
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 N/A
Accepting New Patients: No

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FNDTN***





NPI: 1669617197
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
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 N/A
Accepting New Patients: No

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FNDTN***





NPI: 1669617197
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
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 *Accessibility:* CONTACT
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 N/A
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FNDTN***

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 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
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Accepting New Patients: No

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 3020 CHILDRENS WAY
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 (858) 966-8800
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PROVIDER

 N/A
Accepting New Patients: No






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FNDTN***

NPI: 1669617197
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123






D9. Centros de atención de urgencia de Blue Shield Promise

 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No





RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDDN*

NPI: 1669617197
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
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 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDDN*






NPI: 1669617197
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDDN*







NPI: 1669617197
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT PROVIDER

 N/A
Accepting New Patients: No




RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDDN*



NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RCH MID CITY URGENT CARE*

NPI: 1710065933
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

SOUTHBAY URGENT CARE INC*

NPI: 1558746750
 1628 PALM AVE
SAN DIEGO, CA 92154
 (619) 591-9999
 (619) 591-9999
 Site Languages(s) Spoken:
Spanish, Vietnamese
 SU 10:00AM-6:00PM
M-F 9:00AM-8:00PM

SA 10:00AM-6:00PM
 *Accessibility:* CONTACT PROVIDER
 <https://www.southbayurgencare.com/>
Accepting New Patients: No

Proveedores de servicios de acupuntura de Blue Shield Promise

Hills, Mary

Female

License #: AC17253

NPI#: 1427596998

2271 Alpine Blvd Ste E

Alpine, CA 91901

(619)517 7478

SU -

M -

TU -

W 9:00-6:00

TH 9:00-6:00

F 9:00-5:00

SA 9:00-3:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Laffen, Julie

Female

License #: AC12657

NPI#: 1629255021

4392 Bonita Rd

Bonita, CA 91902

(619)663 9417

SU 10:00-5:00

M -

TU -

W -

TH -

F -

SA 10:00-5:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Piao, Zhouyong

Male

License #: AC17774

NPI#: 1528562923

5030 Bonita Rd Ste B

Bonita, CA 91902

(619)479 7473

SU -

M 8:00-1:00

TU 8:00-1:00

W 8:00-3:00

TH 8:00-1:00

F 8:00-1:00

SA 8:00-1:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Kim, Min Joong

Male

License #: AC19242

NPI#: 1972273555

4514 Bonita Rd

Bonita, CA 91902

(619)470 4714

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA 9:00-4:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Lopez, Arianna

Female

License #: AC19453

NPI#: 1588385264

4514 Bonita Rd

Bonita, CA 91902

(619)470 4714

SU -

M 8:00-8:00

TU 8:00-8:00

W 8:00-8:00

TH 8:00-8:00

F 8:00-8:00

SA 9:00-2:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Vallarta, Barbara

Female

License #: AC16535

NPI#: 1942689278

4514 Bonita Rd

Bonita, CA 91902

(619)470 4714

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA 10:00-4:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Zhao, Chutima

Female

License #: 18190*NPI#:* 1730853193

4514 Bonita Rd
Bonita, CA 91902
(619)470 4714
SU -
M 8:00-5:00
TU 8:00-5:00
W 8:00-5:00
TH 8:00-5:00
F 8:00-5:00
SA 8:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Han, Sang-Kyou**

Male

License #: AC17562*NPI#:* 1043749401

756 Grand Ave Ste B
Carlsbad, CA 92008
(760)421 1321
SU -
M -
TU 8:30-6:00
W -
TH 8:30-6:00
F -
SA 10:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Kawano, Toshiya**

Male

License #: AC18363*NPI#:* 1972096717

5650 El Camino Real Ste 285
Carlsbad, CA 92008
(760)683 5858
SU -
M -
TU 9:00-3:30
W 9:00-3:30
TH 9:00-3:30
F 9:00-3:30
SA 9:00-11:30

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Cobb, Ayanna**

Female

License #: AC16958*NPI#:* 1922304674

2890 Pio Pico Dr Ste 104
Carlsbad, CA 92008
(760)331 4271
SU -
M 10:00-5:30
TU -
W 10:00-5:30
TH 10:00-5:30
F 1:00-5:30
SA 12:00-3:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Han, Claire**

Female

License #: AC9105*NPI#:* 1801967518

1902 Wright Pl Ste 200
Carlsbad, CA 92008
(760)855 6504
SU -
M 9:00-4:00
TU 9:00-4:00
W 9:00-4:00
TH 9:00-4:00
F 9:00-4:00
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Lyons, Jennifer**

Female

License #: AC13159*NPI#:* 1114252962

1207 Carlsbad Village Dr Ste T
Carlsbad, CA 92008
(760)415 7590
SU -
M 2:00-5:00
TU 10:00-1:00
W -
TH 2:00-5:00
F 10:00-1:00
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No

Scarlett, Yvonne

Female

License #: AC16118*NPI#:* 1083026223

2890 Pio Pico Dr Ste 104

Carlsbad, CA 92008

(760)637 5069

SU -

M -

TU -

W -

TH 11:30-4:30

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Anton, Cecilia**

Female

License #: AC19907*NPI#:* 1831964105

821 Kuhn Dr Ste 101

Chula Vista, CA 91914

(619)432 2477

SU -

M -

TU 9:00-7:00

W -

TH 9:00-7:00

F 12:00-7:00

SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Hwang, Soo Chun**

Male

License #: AC17544*NPI#:* 1588192439

910 Hale Pl Ste 214

Chula Vista, CA 91914

(619)922 2902

SU -

M -

TU 9:00-4:00

W 5:00-9:00

TH 9:00-4:00

F 5:00-9:00

SA 5:00-9:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Tom, Jennifer**

Female

License #: AC16199*NPI#:* 1639576754

1207 Carlsbad Village Dr Ste T

Carlsbad, CA 92008

(760)487 8857

SU -

M 8:00-1:00

TU 2:00-7:00

W -

TH 8:00-1:00

F 2:00-7:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Dinsmore, Richard**

Male

License #: AC2704*NPI#:* 1780754911

1214 3rd Ave

Chula Vista, CA 91911

(619)946 7035

SU -

M 9:00-4:00

TU -

W 9:00-4:00

TH -

F 9:00-4:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Hwang, Ing-Jun**

Female

License #: AC19719*NPI#:* 1942983556

821 Kuhn Dr Ste 101

Chula Vista, CA 91914

(619)432 2477

SU 10:00-5:00

M -

TU 2:00-7:00

W -

TH -

F 10:00-7:00

SA 10:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Kanomata, Atsushi

Male

License #: AC9802*NPI#:* 1285947457

821 Kuhn Dr Ste 101
Chula Vista, CA 91914
(619)432 2477
SU -
M -
TU 2:00-7:00
W -
TH 2:00-7:00
F -
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Mendez, Michael**

Male

License #: AC18795*NPI#:* 1194357327

265 E St Ste A
Chula Vista, CA 91910
(858)294 3865
SU -
M 9:00-5:00
TU 9:00-5:00
W 9:00-5:00
TH 9:00-5:00
F 9:00-5:00
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Tran, Carol**

Female

License #: AC18018*NPI#:* 1598259491

1229 3rd Ave Ste C
Chula Vista, CA 91911
(619)271 2772
SU -
M -
TU 11:00-6:00
W 11:00-6:00
TH 11:00-6:00
F -
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Lee, Il Ju**

Male

License #: AC16829*NPI#:* 1952898298

296 H St Ste 203
Chula Vista, CA 91910
(800)385 1130
SU -
M -
TU -
W -
TH -
F 9:00-6:00
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Son, Jae Jin**

Female

License #: AC8587*NPI#:* 1649619412

296 H St Ste 203
Chula Vista, CA 91910
(760)650 6660
SU -
M -
TU -
W -
TH -
F -
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Wells, Emily**

Female

License #: AC19023*NPI#:* 1861075046

955 Lane Ave Ste 101
Chula Vista, CA 91914
(619)500 4615
SU -
M 8:00-5:00
TU -
W 8:00-5:00
TH -
F 7:00-4:00
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Beck, Andrea

Female

*License #: AC16443**NPI#: 1487032975*

1011 Camino del Mar Ste 212

Del Mar, CA 92014

(619)813 9575

SU -

M -

TU -

W -

TH -

F -

SA 11:00-5:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Bonito, Amber**

Female

*License #: AC14115**NPI#: 1962796581*

564 Broadway

El Cajon, CA 92021

(619)467 0634

SU -

M 9:00-2:00

TU 9:00-7:00

W 9:00-7:00

TH 9:00-7:00

F -

SA 9:00-2:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Culp, Casey**

Female

*License #: AC18905**NPI#: 1528321510*

1149 N 2nd St

El Cajon, CA 92021

(619)440 2440

SU -

M 9:00-7:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-7:00

F 9:00-7:00

SA 9:00-5:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Anton, Cecilia**

Female

*License #: AC19907**NPI#: 1831964105*

1149 N 2nd St

El Cajon, CA 92021

(619)440 2440

SU 8:00-6:00

M 8:00-6:00

TU 8:00-6:00

W 8:00-6:00

TH 8:00-6:00

F 8:00-6:00

SA 8:00-6:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Candelaria, Ida**

Female

*License #: AC5540**NPI#: 1568539179*

983 E Washington Ave

El Cajon, CA 92020

(619)602 3366

SU -

M 9:00-4:00

TU -

W 9:00-4:00

TH -

F 1:00-4:00

SA 9:00-1:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Custodio, Lesley**

Female

*License #: AC13581**NPI#: 1710297817*

314 S Magnolia Ave

El Cajon, CA 92020

(619)438 0228

SU -

M 9:00-2:00

TU -

W -

TH 1:00-6:00

F 9:00-2:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Flores, Yesenia

Female

*License #: AC19135**NPI#: 1972276236*

1149 N 2nd St
 El Cajon, CA 92021
 (619)444 2440
 SU -
 M 8:00-3:00
 TU 7:00-1:00
 W -
 TH -
 F -
 SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Kim, Min Joo**

Male

*License #: AC13813**NPI#: 1689941791*

855 E Madison Ave
 El Cajon, CA 92020
 (833)867 4642
 SU -
 M -
 TU -
 W -
 TH -
 F -
 SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Knapp, Rhiannon**

Female

*License #: AC19667**NPI#: 1063127728*

1149 N 2nd St
 El Cajon, CA 92021
 (619)440 2440
 SU 9:00-5:00
 M 8:00-8:00
 TU 8:00-8:00
 W 8:00-8:00
 TH 8:00-8:00
 F 8:00-8:00
 SA 8:00-6:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Goldman, Roni**

Female

*License #: AC19718**NPI#: 1285328690*

1149 N 2nd St
 El Cajon, CA 92021
 (619)440 2440
 SU -
 M -
 TU -
 W -
 TH -
 F -
 SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Kim, Min Joo**

Male

*License #: AC13813**NPI#: 1689941791*

470 N Mollison Ave
 El Cajon, CA 92021
 (833)867 4642
 SU -
 M -
 TU -
 W -
 TH -
 F -
 SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Larowe, Alexiss**

Female

*License #: AC18576**NPI#: 1255991683*

2295 Fletcher Pkwy Ste 101
 El Cajon, CA 92020
 (760)803 5995
 SU 9:00-5:00
 M -
 TU 9:00-5:00
 W 9:00-5:00
 TH -
 F 9:00-5:00
 SA 9:00-5:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Lee, Yoon

Female

License #: AC18937*NPI#:* 1497360820

1149 N 2nd St
 El Cajon, CA 92021
 (619)440 2440
 SU 9:00-5:00
 M -
 TU -
 W -
 TH 9:00-5:00
 F 9:00-5:00
 SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Poty, Lisa Jeanne**

Female

License #: AC7703*NPI#:* 1235299611

251 E Main St
 El Cajon, CA 92020
 (619)440 4333
 SU -
 M -
 TU 9:30-5:00
 W 9:00-1:30
 TH 9:30-5:00
 F 9:30-4:30
 SA 9:00-1:30

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Arellano, Jacqueline**

Female

License #: AC18532*NPI#:* 1104129485

1200 Garden View Rd Ste 200
 Encinitas, CA 92024
 (800)926 8273
 SU -
 M 9:00-5:00
 TU 9:00-5:00
 W 9:00-5:00
 TH 9:00-5:00
 F 9:00-5:00
 SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: No***Onan, Teresa**

Female

License #: AC15303*NPI#:* 1144598988

1149 N 2nd St
 El Cajon, CA 92021
 (619)440 2440
 SU -
 M 8:00-6:00
 TU -
 W -
 TH 7:00-7:00
 F -
 SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Zinner, Travis**

Male

License #: 19038*NPI#:* 1073180394

1149 N 2nd St
 El Cajon, CA 92021
 (619)440 2440
 SU -
 M 8:00-6:00
 TU 8:00-6:00
 W -
 TH -
 F -
 SA 8:00-6:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Blair, Sherine**

Female

License #: AC13201*NPI#:* 1902130396

543 Encinitas Blvd Ste 107
 Encinitas, CA 92024
 (858)480 6890
 SU -
 M 8:30-5:00
 TU 8:30-5:00
 W 8:30-5:00
 TH 8:30-5:00
 F 8:30-12:00
 SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes*

Burr, Douglas

Male

License #: AC9381*NPI#:* 1821257825

1200 Garden View Rd Ste 200

Encinitas, CA 92024

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Gonzalez, Andres**

Male

License #: AC15708*NPI#:* 1841857729

1130 2nd St

Encinitas, CA 92024

(760)736 6767

SU -

M -

TU 8:00-5:00

W -

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Julian, Fides**

Female

License #: AC18652*NPI#:* 1407401128

1200 Garden View Rd Ste 200

Encinitas, CA 92024

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Goforth, Greta**

Female

License #: AC11921*NPI#:* 1679750095

187 Calle Magdalena Ste 214

Encinitas, CA 92024

(760)815 6265

SU -

M 10:00-6:30

TU 10:00-6:30

W 10:00-6:30

TH 10:00-6:30

F 10:00-6:30

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Ji, Dong**

Male

License #: AC13205*NPI#:* 1912293671

1200 Garden View Rd Ste 200

Encinitas, CA 92024

(800)926 8273

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Murray, Steven**

Male

License #: 18288*NPI#:* 1104456078

1200 Garden View Rd Ste 200

Encinitas, CA 92024

(800)926 8273

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No

Reyes, Estela

Female

License #: AC18494*NPI#:* 1376106377

1200 Garden View Rd Ste 200

Encinitas, CA 92024

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Tang-Ritchie, Leng**

Female

License #: AC14241*NPI#:* 1497044580

1200 Garden View Rd Ste 200

Encinitas, CA 92024

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Akhavan, Farahnaz**

Female

License #: AC9396*NPI#:* 1881795250

1733 S Escondido Blvd

Escondido, CA 92025

(760)233 5886

SU 9:00-12:00

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 10:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Robles, Ma Regina Blanca**

Female

License #: 19279*NPI#:* 1184386419

317 N El Camino Real Ste 306

Encinitas, CA 92024

(858)673 4400

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA 8:00-12:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Tsoucalas, Katerina**

Female

License #: 17974*NPI#:* 1811487226

191 Calle Magdalena Ste 295

Encinitas, CA 92024

(858)461 8826

SU -

M 9:00-6:00

TU 9:00-8:00

W 9:00-8:00

TH 9:00-8:00

F 9:00-6:00

SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Chang, Xuan**

Female

License #: AC6357*NPI#:* 1942226626

100 Holland Gln

Escondido, CA 92026

(619)871 6068

SU -

M -

TU 1:00-6:00

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Kim, Min Joo

Male

License #: AC13813*NPI#:* 1689941791460 N Elm St
Escondido, CA 92025

(760)520 8100

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Kwak, Hyoshin**

Male

License #: AC16939*NPI#:* 1477033272106 S Grape St Ste 10
Escondido, CA 92025

(213)568 5470

SU -

M 10:00-6:00

TU 10:00-6:00

W 10:00-6:00

TH 10:00-6:00

F 10:00-6:00

SA 9:00-2:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**McIntyre, Michele**

Female

License #: AC17772*NPI#:* 11548312468975 Lawrence Welk Dr Spc 323
Escondido, CA 92026

(619)307 2631

SU -

M 8:30-4:30

TU 8:30-6:00

W 8:30-6:00

TH 8:30-5:30

F 8:30-4:30

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Kim, Min Joo**

Male

License #: AC13813*NPI#:* 1689941791425 N Date St
Escondido, CA 92025

(760)520 8300

SU -

M 8:00-5:00

TU -

W 8:00-5:00

TH -

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**McAdams, Donna**

Female

License #: AC8311*NPI#:* 1669421905325 W 3rd Ave Ste 102
Escondido, CA 92025

(760)796 4519

SU -

M -

TU 8:00-5:00

W 8:00-5:00

TH -

F 8:00-5:00

SA 8:00-2:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Pole, Carolyn**

Female

License #: AC4587*NPI#:* 1831143379337 S Kalmia St
Escondido, CA 92025

(760)445 7595

SU -

M -

TU 10:00-6:00

W 10:00-6:00

TH -

F 10:00-6:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Stubblefield, Michael

Male

License #: AC13558*NPI#:* 1194009951

333 S Juniper St Ste111

Escondido, CA 92025

(760)815 3881

SU -

M 9:00-5:30

TU 9:00-5:30

W 9:00-5:30

TH 9:00-5:30

F 9:00-5:30

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Kim, Min Joo**

Male

License #: AC13813*NPI#:* 1689941791

1309 S Mission Rd

Fallbrook, CA 92028

(833)864 4642

SU -

M -

TU 8:00-5:00

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Arellano, Jacqueline**

Female

License #: AC18532*NPI#:* 1104129485

9400 Campus Point Dr

La Jolla, CA 92093

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Tran, Kiet**

Male

License #: AC15464*NPI#:* 1336432426

260 W Crest St Ste B

Escondido, CA 92025

(760)650 2247

SU 9:00-5:00

M 6:00-9:00

TU 8:00-9:00

W 6:00-9:00

TH 6:00-9:00

F 6:00-9:00

SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Stephens, Lori**

Female

License #: AC15042*NPI#:* 1477904027

587 E Elder St Ste B

Fallbrook, CA 92028

(714)330 9244

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Arellano, Jacqueline**

Female

License #: AC18532*NPI#:* 1104129485

9300 Campus Point Dr

La Jolla, CA 92037

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No

Arellano, Jacqueline

Female

License #: AC18532

NPI#: 1104129485

8910 Villa La Jolla Dr Ste 200

La Jolla, CA 92037

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-8:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Bousquin, Diane**

Female

License #: AC10132

NPI#: 1861610891

7634 Girard Ave Ste T

La Jolla, CA 92037

(619)808 1099

SU -

M 9:00-7:00

TU -

W 9:00-6:00

TH -

F 9:00-4:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Burr, Douglas**

Male

License #: AC9381

NPI#: 1821257825

8910 Villa La Jolla Dr Ste 200

La Jolla, CA 92037

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Booth, Beata**

Female

License #: AC7235

NPI#: 1396844825

6529 La Jolla Blvd

La Jolla, CA 92037

(858)454 2025

SU -

M 10:00-6:00

TU -

W -

TH 10:00-7:00

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Burr, Douglas**

Male

License #: AC9381

NPI#: 1821257825

9300 Campus Point Dr

La Jolla, CA 92037

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Burr, Douglas**

Male

License #: AC9381

NPI#: 1821257825

9400 Campus Point Dr

La Jolla, CA 92093

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No

Gallet, Mariel

Female

*License #: AC17357**NPI#: 1801347547*

8950 Villa La Jolla Dr Ste B212

La Jolla, CA 92037

(858)263 6088

SU -

M -

TU 9:00-7:00

W -

TH 9:00-7:00

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Ji, Dong**

Male

*License #: AC13205**NPI#: 1912293671*

9400 Campus Point Dr

La Jolla, CA 92093

(844)747 0474

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Julian, Fides**

Female

*License #: AC18652**NPI#: 1407401128*

8910 Villa La Jolla Dr Ste 200

La Jolla, CA 92037

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Ji, Dong**

Male

*License #: AC13205**NPI#: 1912293671*

8910 Villa La Jolla Dr Ste 200

La Jolla, CA 92037

(844)747 0474

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Ji, Dong**

Male

*License #: AC13205**NPI#: 1912293671*

9300 Campus Point Dr

La Jolla, CA 92037

(800)926 8273

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Julian, Fides**

Female

*License #: AC18652**NPI#: 1407401128*

9300 Campus Point Dr

La Jolla, CA 92037

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No*

Julian, Fides

Female

License #: AC18652*NPI#:* 1407401128

9400 Campus Point Dr

La Jolla, CA 92093

(844)747 0474

SU -

M 5:00-8:00

TU 5:00-8:00

W 5:00-8:00

TH 5:00-8:00

F 5:00-8:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Murray, Steven**

Male

License #: 18288*NPI#:* 1104456078

9400 Campus Point Dr

La Jolla, CA 92093

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Reyes, Estela**

Female

License #: AC18494*NPI#:* 1376106377

9300 Campus Point Dr

La Jolla, CA 92037

(844)747 0474

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Murray, Steven**

Male

License #: 18288*NPI#:* 1104456078

9300 Campus Point Dr

La Jolla, CA 92037

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Murray, Steven**

Male

License #: 18288*NPI#:* 1104456078

8910 Villa La Jolla Dr Ste 200

La Jolla, CA 92037

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Reyes, Estela**

Female

License #: AC18494*NPI#:* 1376106377

8910 Villa La Jolla Dr Ste 200

La Jolla, CA 92037

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No

Reyes, Estela

Female

*License #: AC18494**NPI#: 1376106377*

9400 Campus Point Dr

La Jolla, CA 92093

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Tang-Ritchie, Leng**

Female

*License #: AC14241**NPI#: 1497044580*

8910 Villa La Jolla Dr Ste 200

La Jolla, CA 92037

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***El Khoury, Ghassan**

Male

*License #: AC10036**NPI#: 1265985824*

5360 Jackson Dr Ste 110

La Mesa, CA 91942

(619)465 8800

SU -

M 10:00-5:00

TU 10:00-5:00

W 10:00-5:00

TH 10:00-5:00

F 10:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Tang-Ritchie, Leng**

Female

*License #: AC14241**NPI#: 1497044580*

9400 Campus Point Dr

La Jolla, CA 92093

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Tang-Ritchie, Leng**

Female

*License #: AC14241**NPI#: 1497044580*

9300 Campus Point Dr

La Jolla, CA 92037

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Goldman, Roni**

Female

*License #: AC19718**NPI#: 1285328690*

8875 La Mesa Blvd Ste E

La Mesa, CA 91942

(619)278 9020

SU -

M 9:00-5:00

TU 9:00-7:00

W 9:00-5:00

TH 9:00-7:00

F 9:00-3:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Jackson, Patricia

Female

License #: AC7976*NPI#:* 1760656904

4754 Palm Ave
La Mesa, CA 91942
(619)990 2878
SU -
M -
TU 9:00-5:00
W -
TH 9:00-5:00
F 9:00-5:00
SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Mergens, Jane**

Female

License #: AC10129*NPI#:* 1982658993

9019 Park Plaza Dr Ste D
La Mesa, CA 91942
(619)606 6464
SU -
M -
TU 10:30-5:00
W -
TH 10:30-5:00
F -
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Paulo, Pier**

Female

License #: AC9020*NPI#:* 1063746477

8875 La Mesa Blvd Ste E
La Mesa, CA 91942
(619)278 9020
SU -
M 9:00-5:00
TU 9:00-3:00
W 9:00-5:00
TH 9:00-3:00
F 9:00-3:00
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Lala, Steven**

Male

License #: AC18021*NPI#:* 1548741911

7373 University Ave Ste 211
La Mesa, CA 91942
(619)881 0428
SU -
M 9:00-6:00
TU 9:00-6:00
W 9:00-6:00
TH 9:00-6:00
F 9:00-6:00
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Miller, Christine**

Female

License #: AC9627*NPI#:* 1871663948

4754 Palm Ave
La Mesa, CA 91942
(619)302 1129
SU -
M 9:00-3:00
TU 9:00-3:00
W 9:00-3:00
TH 9:00-1:00
F 9:00-1:00
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Kim, Min Joo**

Male

License #: AC13813*NPI#:* 1689941791

10039 Vine St
Lakeside, CA 92040
(833)867 4642
SU -
M -
TU -
W -
TH -
F -
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Allen, Jennifer

Female

License #: AC17744*NPI#:* 1568889863

2424 Vista Way Ste 125

Oceanside, CA 92054

(442)226 8208

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Choi, Mijoung**

Female

License #: AC17396*NPI#:* 1649721416

3861 Mission Ave Ste B27

Oceanside, CA 92058

(760)970 0244

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Gonzalez, Andres**

Male

License #: AC15708*NPI#:* 1841857729

619 Crouch St Ste 100

Oceanside, CA 92054

(760)736 6767

SU -

M 8:00-5:00

TU -

W 8:00-5:00

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Anderson, Tisa**

Female

License #: AC16093*NPI#:* 1497986624

804 Pier View Way Ste 200

Oceanside, CA 92054

(760)590 9274

SU -

M 8:00-6:00

TU 8:00-6:00

W 8:00-6:00

TH 8:00-6:00

F 8:00-6:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Choo, Kwangmyung**

Male

License #: AC10231*NPI#:* 1407986268

1906 Oceanside Blvd Ste S

Oceanside, CA 92054

(760)754 2007

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA 9:00-12:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Gonzalez, Andres**

Male

License #: AC15708*NPI#:* 1841857729

3998 Vista Way Ste G

Oceanside, CA 92056

(760)736 6767

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Haun, Daniel

Male

License #: AC6774*NPI#:* 1568548618

701 Seagaze Dr Ste B

Oceanside, CA 92054

(760)803 6725

SU -

M 9:00-5:00

TU -

W 8:00-12:00

TH -

F 9:00-5:30

SA 8:30-2:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Stampbach, Alex**

Male

License #: AC17496*NPI#:* 1568998524

2124 S El Camino Real Ste 202

Oceanside, CA 92054

(760)453 0332

SU 9:00-7:00

M 9:00-7:00

TU 9:00-7:00

W 9:00-7:00

TH 9:00-7:00

F 9:00-7:00

SA 9:00-7:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Arnold, Michele**

Female

License #: AC6958*NPI#:* 1326107442

15644 Pomerado Rd Ste 102

Poway, CA 92064

(858)613 0792

SU -

M 8:30-4:30

TU 8:30-4:30

W 8:30-4:30

TH 8:30-4:30

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Lipton, Gregory**

Male

License #: AC8207*NPI#:* 1841367117

701 Seagaze Dr Ste B

Oceanside, CA 92054

(760)721 4323

SU -

M 10:00-5:30

TU 11:00-6:00

W 10:00-6:00

TH 11:00-6:00

F 9:00-2:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Stevenson, Nancy**

Female

License #: AC4332*NPI#:* 1306009956

310 S Coast Hwy

Oceanside, CA 92054

(858)344 0889

SU -

M -

TU 9:00-6:00

W -

TH 9:00-6:00

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Lu, Pin**

Female

License #: AC17371*NPI#:* 1558805283

12243 Poway Rd

Poway, CA 92064

(858)261 8038

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-12:00

F 9:00-5:00

SA 9:00-12:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Robles, Ma Regina Blanca

Female

License #: 19279

NPI#: 1184386419

15725 Pomerado Rd Ste 210

Poway, CA 92064

(858)673 4400

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Wang, Yuan

Female

License #: AC8852

NPI#: 1073736880

15525 Pomerado Rd Ste E4

Poway, CA 92064

(858)829 9485

SU -

M 8:30-12:00

TU -

W 8:30-6:30

TH -

F -

SA 9:00-1:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Abdullah, Shaheed

Male

License #: AC8822

NPI#: 1790013514

5222 Balboa Ave Ste 43

San Diego, CA 92117

(858)467 9893

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-3:00

TH 9:00-6:00

F 9:00-12:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Shinagawa, Jocelyn

Female

License #: AC14190

NPI#: 1780964478

15525 Pomerado Rd Ste E4

Poway, CA 92064

(858)883 3867

SU -

M -

TU 10:00-6:00

W -

TH 10:00-6:00

F 10:00-6:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Whitney, Tracey

Female

License #: AC18066

NPI#: 1831424704

13525 Midland Rd Ste I

Poway, CA 92064

(858)692 5221

SU -

M 10:00-6:00

TU 8:00-4:00

W 8:00-6:00

TH 10:00-4:00

F 9:00-1:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Aikebaier, Aierken

Male

License #: AC19000

NPI#: 1457024853

6106 Village Way

San Diego, CA 92130

(858)588 7858

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Akhavan, Farahnaz

Female

License #: AC9396

NPI#: 1881795250

2883 Meade Ave Ste B

San Diego, CA 92116

(619)298 2342

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Arellano, Jacqueline

Female

License #: AC18532

NPI#: 1104129485

200 W Arbor Dr

San Diego, CA 92103

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Arellano, Jacqueline

Female

License #: AC18532

NPI#: 1104129485

330 Lewis St Ste 400

San Diego, CA 92103

(844)747 0474

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Altman, Ryan

Male

License #: AC10736

NPI#: 1104191394

3239 Adams Ave

San Diego, CA 92116

(619)546 4806

SU -

M 10:00-6:30

TU 10:00-6:30

W 10:00-6:30

TH 10:00-6:30

F 10:00-6:30

SA 11:00-4:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Arellano, Jacqueline

Female

License #: AC18532

NPI#: 1104129485

9333 Genesee Ave Ste 200

San Diego, CA 92121

(844)747 0474

SU -

M 9:00-8:00

TU 9:00-8:00

W 9:00-5:00

TH 9:00-8:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Arellano, Jacqueline

Female

License #: AC18532

NPI#: 1104129485

9909 Mira Mesa Blvd Ste 200

San Diego, CA 92131

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Arellano, Jacqueline

Female

License #: AC18532*NPI#:* 1104129485

4910 Directors Pl Ste 250

San Diego, CA 92121

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Beck, Andrea**

Female

License #: AC16443*NPI#:* 1487032975

5440 Morehouse Dr Ste 1700

San Diego, CA 92121

(858)455 7654

SU -

M 2:00-7:00

TU -

W 2:00-7:00

TH 10:00-2:00

F 2:00-7:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Burr, Douglas**

Male

License #: AC9381*NPI#:* 1821257825

200 W Arbor Dr

San Diego, CA 92103

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Bean, Adrian**

Male

License #: AC5546*NPI#:* 1073852455

9150 Chesapeake Dr Ste 120

San Diego, CA 92123

(619)542 0884

SU -

M 8:30-5:30

TU 8:30-5:30

W 8:30-5:30

TH 8:30-5:30

F 8:30-5:30

SA 8:30-5:30

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Burr, Douglas**

Male

License #: AC9381*NPI#:* 1821257825

330 Lewis St Ste 400

San Diego, CA 92103

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Burr, Douglas**

Male

License #: AC9381*NPI#:* 1821257825

4910 Directors Pl Ste 250

San Diego, CA 92121

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No

Burr, Douglas

Male

License #: AC9381

NPI#: 1821257825

9909 Mira Mesa Blvd Ste 200

San Diego, CA 92131

(844)747 0747

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Caliri, Rebecca**

Female

License #: AC14311

NPI#: 1689051708

1913 Euclid Ave Ste 107

San Diego, CA 92105

(619)719 1777

SU -

M 10:00-5:00

TU -

W 10:00-5:00

TH -

F 10:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Chang, Xuan**

Female

License #: AC6357

NPI#: 1942226626

10455 Sorrento Valley Rd Ste 208

San Diego, CA 92121

(619)871 6068

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Burr, Douglas**

Male

License #: AC9381

NPI#: 1821257825

9333 Genesee Ave Ste 200

San Diego, CA 92121

(844)747 0474

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Chang, Xuan**

Female

License #: AC6357

NPI#: 1942226626

10951 Sorrento Valley Rd Ste I-G

San Diego, CA 92121

(619)871 6068

SU 1:00-6:00

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Chang, Sophia**

Female

License #: AC17722

NPI#: 1427577576

4638 Park Blvd

San Diego, CA 92116

(619)220 0878

SU -

M 9:00-4:00

TU 1:00-4:00

W -

TH 9:00-4:00

F 9:00-4:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Chang, Xuan

Female

*License #: AC6357**NPI#: 1942226626*

16935 W Bernardo Dr Ste 104

San Diego, CA 92127

(619)871 6068

SU -

M -

TU 5:00-7:00

W -

TH -

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Cho, Kyu Ok**

Female

*License #: AC15015**NPI#: 1528302387*

8303 Clairemont Mesa Blvd Ste 104

San Diego, CA 92111

(858)866 6081

SU -

M 9:00-6:00

TU 9:00-6:00

W -

TH 9:00-6:00

F 9:00-6:00

SA 2:00-5:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Choi, Yoonhee**

Female

*License #: AC15915**NPI#: 1811259187*

8303 Clairemont Mesa Blvd Ste 104

San Diego, CA 92111

(858)707 5808

SU -

M -

TU -

W -

TH -

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Cheon, Seong**

Male

*License #: AC7216**NPI#: 1043527492*

7825 Engineer Rd Ste 209

San Diego, CA 92111

(858)576 2511

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA 9:00-4:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Choe, Helena**

Female

*License #: AC11298**NPI#: 1720420029*

1916 30th St

San Diego, CA 92102

(619)808 3198

SU -

M 8:00-8:00

TU -

W 8:00-8:00

TH -

F 8:00-8:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Choi, Yoonhee**

Female

*License #: AC15915**NPI#: 1811259187*

10717 Camino Ruiz Ste 119

San Diego, CA 92126

(858)707 5808

SU -

M -

TU -

W 9:00-2:00

TH -

F 9:00-2:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Coltart, Michelle

Female

License #: AC13330*NPI#:* 1972807774

3239 Adams Ave
 San Diego, CA 92116
 (619)546 4806
 SU -
 M 10:00-7:00
 TU 10:00-7:00
 W 10:00-7:00
 TH 10:00-7:00
 F 10:00-7:00
 SA 11:00-4:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Dang, Sheri**

Female

License #: AC17713*NPI#:* 1225567001

2727 Camino del Rio S Ste 104
 San Diego, CA 92108
 (619)738 5374
 SU -
 M -
 TU -
 W -
 TH -
 F -
 SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***DiVanterra, Darcy**

Female

License #: AC8921*NPI#:* 1073666186

3033 5th Ave Ste 230
 San Diego, CA 92103
 (619)887 0610
 SU -
 M 12:00-5:00
 TU -
 W 12:00-5:00
 TH -
 F 10:00-5:00
 SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Culp, Casey**

Female

License #: AC18905*NPI#:* 1528321510

11665 Avena Pl Ste 205
 San Diego, CA 92128
 (858)733 0832
 SU -
 M 8:00-6:00
 TU 8:00-6:00
 W 8:00-6:00
 TH 8:00-6:00
 F 8:00-6:00
 SA 8:00-6:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***De Rose, Leda**

Female

License #: AC17646*NPI#:* 1871020560

3239 Adams Ave
 San Diego, CA 92116
 (619)546 4806
 SU -
 M 10:00-7:00
 TU 10:00-7:00
 W 10:00-7:00
 TH 10:00-7:00
 F 10:00-7:00
 SA 11:00-4:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Eusebio, Rachel**

Female

License #: AC19932*NPI#:* 1588438089

6051 Business Center Ct Ste A3
 San Diego, CA 92154
 (619)288 3189
 SU -
 M 9:00-6:00
 TU 9:00-6:00
 W 9:00-6:00
 TH 9:00-6:00
 F 9:00-6:00
 SA 10:00-4:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes*

Flores, Yesenia

Female

*License #: AC19135**NPI#: 1972276236*

3675 Ruffin Rd Ste 315

San Diego, CA 92123

(619)897 5558

SU -

M -

TU -

W -

TH -

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Friend, Yunhee**

Female

*License #: AC17436**NPI#: 1013147040*

12264 El Camino Real Ste 108

San Diego, CA 92130

(858)229 1502

SU -

M 9:00-5:00

TU 2:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Godes, Marianna**

Female

*License #: AC12945**NPI#: 1043445844*

319 Laurel St

San Diego, CA 92101

(858)337 9559

SU -

M 9:00-0:30

TU 3:00-7:00

W -

TH 9:00-7:00

F 9:00-0:30

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Foley, Susan**

Female

*License #: AC2551**NPI#: 1821205212*

3650 Clairemont Dr Ste 12

San Diego, CA 92117

(858)270 4242

SU -

M -

TU 11:00-5:00

W -

TH 11:00-5:00

F 11:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Garcia, Ronald**

Male

*License #: AC19848**NPI#: 1225810419*

1011 Camino del Rio S Ste 100

San Diego, CA 92108

(619)915 6007

SU -

M 10:00-7:00

TU 10:00-6:00

W 10:00-5:30

TH 10:00-7:00

F 10:00-6:00

SA 10:00-3:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Goldman, Roni**

Female

*License #: AC19718**NPI#: 1285328690*

11665 Avena Pl Ste 205

San Diego, CA 92128

(858)733 0832

SU -

M -

TU -

W -

TH -

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Guo, Naijia

Female

License #: AC17317*NPI#:* 1831640606

7297 Ronson Rd Ste C

San Diego, CA 92111

(858)568 5628

SU -

M 10:00-3:00

TU 1:00-4:00

W -

TH 10:00-3:00

F 10:00-3:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Hayes, Jewel**

Female

License #: AC13496*NPI#:* 1003115106

2525 Camino del Rio S Ste 245

San Diego, CA 92108

(914)649 9583

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Hong, HeeJoo**

Female

License #: AC12772*NPI#:* 1750666723

1011 Camino del Rio S Ste 100

San Diego, CA 92108

(619)915 6007

SU -

M 10:00-7:00

TU 10:00-6:00

W 10:00-5:30

TH 10:00-7:00

F 10:00-6:00

SA 10:00-3:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Halsey, Holly**

Female

License #: AC6531*NPI#:* 1225167034

9150 Chesapeake Dr Ste 120

San Diego, CA 92123

(619)542 0884

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Helgeson, Maile**

Female

License #: AC14651*NPI#:* 1104179266

3239 Adams Ave

San Diego, CA 92116

(619)546 4806

SU -

M -

TU 10:00-6:30

W -

TH 2:30-6:30

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Hou, Yahui**

Female

License #: AC19881*NPI#:* 1245011915

3080 N Park Way

San Diego, CA 92104

(760)449 8293

SU -

M 9:30-4:30

TU 9:00-5:30

W 9:30-5:30

TH 9:30-1:30

F 9:00-3:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes*

Hwang, Soo Chun

Male

*License #: AC17544**NPI#: 1588192439*

9474 Kearny Villa Rd Ste 113

San Diego, CA 92126

(858)578 2070

SU -

M -

TU -

W 9:00-4:30

TH -

F -

SA 9:00-5:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Hwang, Ing-Jun**

Female

*License #: AC19719**NPI#: 1942983556*

4052 Clairemont Dr

San Diego, CA 92117

(619)339 7079

SU 9:00-5:00

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA 9:00-5:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Ji, Dong**

Male

*License #: AC13205**NPI#: 1912293671*

330 Lewis St Ste 400

San Diego, CA 92103

(844)747 0474

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Hwang, Soo Chun**

Male

*License #: AC17544**NPI#: 1588192439*

9474 Kearny Villa Rd Ste 111

San Diego, CA 92126

(858)987 6267

SU -

M 12:00-5:00

TU 5:30-9:00

W 9:00-5:00

TH 5:30-9:00

F 9:00-5:00

SA 8:00-6:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Hwang, Ha**

Male

*License #: AC9404**NPI#: 1174682256*

1370 Rosecrans St Ste C

San Diego, CA 92106

(619)866 1414

SU -

M 10:00-6:00

TU 10:00-6:00

W 10:00-6:00

TH 10:00-6:00

F 10:00-6:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Ji, Dong**

Male

*License #: AC13205**NPI#: 1912293671*

200 W Arbor Dr

San Diego, CA 92103

(800)926 8273

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No*

Ji, Dong

Male

License #: AC13205

NPI#: 1912293671

9333 Genesee Ave Ste 200

San Diego, CA 92121

(844)747 0474

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Ji, Dong**

Male

License #: AC13205

NPI#: 1912293671

9909 Mira Mesa Blvd Ste 200

San Diego, CA 92131

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Julian, Fides**

Female

License #: AC18652

NPI#: 1407401128

2525 Camino del Rio S Ste 313

San Diego, CA 92108

(619)800 0190

SU -

M -

TU 10:00-6:00

W -

TH -

F 10:00-6:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Ji, Dong**

Male

License #: AC13205

NPI#: 1912293671

4910 Directors Pl Ste 250

San Diego, CA 92121

(800)926 8273

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Julian, Fides**

Female

License #: AC18652

NPI#: 1407401128

9333 Genesee Ave Ste 200

San Diego, CA 92121

(844)747 0474

SU -

M 4:00-8:00

TU 4:00-8:00

W 4:00-8:00

TH 4:00-8:00

F 4:00-8:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Julian, Fides**

Female

License #: AC18652

NPI#: 1407401128

330 Lewis St Ste 400

San Diego, CA 92103

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No

Julian, Fides

Female

License #: AC18652*NPI#:* 1407401128

9909 Mira Mesa Blvd Ste 200

San Diego, CA 92131

(844)747 0474

SU -

M -

TU -

W 12:00-5:00

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Julian, Fides**

Female

License #: AC18652*NPI#:* 1407401128

4910 Directors Pl Ste 250

San Diego, CA 92121

(800)926 8273

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Kanomata, Atsushi**

Male

License #: AC9802*NPI#:* 1285947457

2180 Garnet Ave Ste 1-I

San Diego, CA 92109

(619)432 2477

SU -

M -

TU -

W 10:00-6:00

TH -

F -

SA 12:00-6:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Julian, Fides**

Female

License #: AC18652*NPI#:* 1407401128

200 W Arbor Dr

San Diego, CA 92103

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Julian, Fides**

Female

License #: AC18652*NPI#:* 1407401128

7204 Clairemont Mesa Blvd

San Diego, CA 92111

(619)800 0190

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Kanomata, Atsushi**

Male

License #: AC9802*NPI#:* 1285947457

6051 Business Center Ct Ste A3

San Diego, CA 92154

(619)288 3189

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Kim, Stephen

Male

*License #: AC9657**NPI#: 1508152133*

7750 Dagget St Ste 105

San Diego, CA 92111

(858)717 6120

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA 9:00-12:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Laffen, Julie**

Female

*License #: AC12657**NPI#: 1629255021*

2852 Adams Ave

San Diego, CA 92116

(619)663 9417

SU -

M -

TU 2:00-8:00

W -

TH 2:00-8:00

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Liu, Yifan**

Male

*License #: AC17537**NPI#: 1013437813*

9636 Tierra Grande St Ste 101

San Diego, CA 92126

(858)729 3580

SU -

M 8:30-5:30

TU 8:30-5:30

W -

TH 8:30-5:30

F 8:30-5:30

SA 8:30-2:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Koolen, Danae**

Female

*License #: AC9682**NPI#: 1780754572*

4732 Point Loma Ave Ste D

San Diego, CA 92107

(619)990 9553

SU -

M 10:00-1:00

TU 10:00-4:00

W 10:00-5:00

TH 12:00-5:00

F 10:00-4:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Lee, Yoon**

Female

*License #: AC18937**NPI#: 1497360820*

11665 Avena Pl Ste 205

San Diego, CA 92128

(858)733 0832

SU -

M 8:00-6:00

TU 8:00-6:00

W 8:00-6:00

TH 8:00-6:00

F 8:00-6:00

SA 8:00-6:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Lundin, Katarina**

Female

*License #: AC14873**NPI#: 1861750358*

4732 Point Loma Ave Ste D

San Diego, CA 92107

(619)917 9420

SU -

M -

TU 9:00-7:00

W 9:00-7:00

TH 9:00-7:00

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

McKinnon, Dave

Male

*License #: AC12894**NPI#: 1730314709*

3914 Murphy Canyon Rd Ste A239

San Diego, CA 92123

(858)836 1080

SU -

M 2:00-7:00

TU 2:00-7:00

W 9:00-7:00

TH -

F 9:00-2:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Miyashiro, Wendi**

Female

*License #: AC10383**NPI#: 1508011891*

2481 Congress St

San Diego, CA 92110

(858)740 1838

SU -

M -

TU 9:00-5:00

W -

TH 9:00-5:00

F 9:00-1:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Murray, Steven**

Male

*License #: 18288**NPI#: 1104456078*

330 Lewis St Ste 400

San Diego, CA 92103

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Mendez, Michael**

Male

*License #: AC18795**NPI#: 1194357327*

2515 Camino del Rio S Ste A

San Diego, CA 92108

(619)748 6931

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Murra, Fawsi**

Male

*License #: AC8834**NPI#: 1437693603*

2852 Adams Ave

San Diego, CA 92116

(619)282 8068

SU -

M 9:00-6:30

TU -

W 9:00-6:30

TH -

F 9:00-6:30

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Murray, Steven**

Male

*License #: 18288**NPI#: 1104456078*

200 W Arbor Dr

San Diego, CA 92103

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No*

Murray, Steven

Male

*License #: 18288**NPI#: 1104456078*

4910 Directors Pl Ste 250

San Diego, CA 92121

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Murray, Steven**

Male

*License #: 18288**NPI#: 1104456078*

9909 Mira Mesa Blvd Ste 200

San Diego, CA 92131

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Negron, Yvonne**

Female

*License #: AC4634**NPI#: 1275758435*

5830 Oberlin Dr Ste 104

San Diego, CA 92121

(619)675 2468

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA 9:00-2:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Murray, Steven**

Male

*License #: 18288**NPI#: 1104456078*

9333 Genesee Ave Ste 200

San Diego, CA 92121

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Murray, Steven**

Male

*License #: 18288**NPI#: 1104456078*

5602 El Cajon Blvd

San Diego, CA 92115

(619)601 4103

SU -

M 9:00-7:00

TU 9:00-7:00

W 9:00-7:00

TH 9:00-7:00

F 9:00-5:00

SA 9:00-1:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Noonan, Thomas**

Male

*License #: AC17328**NPI#: 1023551421*

3505 Camino del Rio S Ste 100

San Diego, CA 92108

(619)550 5200

SU -

M -

TU 9:00-5:00

W 1:00-5:00

TH 9:00-5:00

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Oh, Young Shig

Male

License #: AC10624

NPI#: 1871753582

16766 Bernardo Center Dr Ste 111

San Diego, CA 92128

(858)673 1733

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Oh, Young Shig

Male

License #: AC10624

NPI#: 1871753582

12396 World Trade Dr Ste 110

San Diego, CA 92128

(858)705 6024

SU -

M 8:00-6:00

TU 8:00-6:00

W 1:00-6:00

TH 8:00-6:00

F 8:00-6:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Ohashi, Evelyn

Female

License #: AC18487

NPI#: 1295390433

1545 Hotel Cir S Ste 120

San Diego, CA 92108

(619)693 8559

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Oh, Young Shig

Male

License #: AC10624

NPI#: 1871753582

6540 Lusk Blvd Ste C144

San Diego, CA 92121

(858)658 9980

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Oh, Young Shig

Male

License #: AC10624

NPI#: 1871753582

11770 Bernardo Plaza Ct Ste 351

San Diego, CA 92128

(858)705 6024

SU -

M -

TU -

W 8:00-12:00

TH -

F -

SA 8:00-12:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Onan, Teresa

Female

License #: AC15303

NPI#: 1144598988

11665 Avena Pl Ste 205

San Diego, CA 92128

(858)733 0832

SU -

M 8:00-6:00

TU 8:00-6:00

W 8:00-6:00

TH 8:00-6:00

F 8:00-6:00

SA 8:00-6:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Pfeiffer, Kirk

Male

License #: AC8484

NPI#: 1467647313

842 Washington St Ste B

San Diego, CA 92103

(619)339 9980

SU -

M 10:00-5:00

TU -

W 1:30-5:00

TH -

F 11:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Plummer, Brittany**

Female

License #: AC16533

NPI#: 1659758795

16769 Bernardo Center Dr Ste 21

San Diego, CA 92128

(858)675 0007

SU -

M 8:00-6:00

TU 8:00-6:00

W 8:00-6:00

TH 8:00-6:00

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Rachels, Liman**

Female

License #: AC9962

NPI#: 1821162744

9625 Black Mountain Rd Ste 306

San Diego, CA 92126

(858)578 8556

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Pham, James**

Male

License #: AC17605

NPI#: 1265960066

7612 Linda Vista Rd Ste 117

San Diego, CA 92111

(858)569 5956

SU -

M 9:00-1:00

TU 9:00-3:00

W 9:00-5:00

TH 9:00-1:00

F 9:00-5:00

SA 9:00-2:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Quach, Lan**

Female

License #: AC17514

NPI#: 1477082667

2727 Camino del Rio S Ste 104

San Diego, CA 92108

(858)334 9311

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F -

SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Ramos, Maria-Cristina**

Female

License #: AC16498

NPI#: 1114376571

2525 Camino del Rio S Ste 320

San Diego, CA 92108

(619)786 3321

SU -

M -

TU 9:30-5:00

W 9:30-5:00

TH -

F 9:30-3:00

SA 9:30-3:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Reyes, Estela

Female

License #: AC18494

NPI#: 1376106377

200 W Arbor Dr
San Diego, CA 92103
(844)747 0474
SU -
M 9:00-5:00
TU 9:00-5:00
W 9:00-5:00
TH 9:00-5:00
F 9:00-5:00
SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Reyes, Estela

Female

License #: AC18494

NPI#: 1376106377

9909 Mira Mesa Blvd Ste 200
San Diego, CA 92131
(844)747 0474
SU -
M -
TU -
W 12:00-4:30
TH -
F -
SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Reyes, Estela

Female

License #: AC18494

NPI#: 1376106377

4910 Directors Pl Ste 250
San Diego, CA 92121
(800)926 8273
SU -
M 9:00-5:00
TU 9:00-5:00
W 9:00-5:00
TH 9:00-5:00
F 9:00-5:00
SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Reyes, Estela

Female

License #: AC18494

NPI#: 1376106377

330 Lewis St Ste 400
San Diego, CA 92103
(844)747 0474
SU -
M 8:30-3:30
TU 8:00-0:30
W -
TH 8:30-3:30
F -
SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Reyes, Estela

Female

License #: AC18494

NPI#: 1376106377

9333 Genesee Ave Ste 200
San Diego, CA 92121
(800)926 8273
SU -
M 9:00-5:00
TU 9:00-5:00
W 9:00-5:00
TH 9:00-5:00
F 9:00-5:00
SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Robles, Ma Regina Blanca

Female

License #: 19279

NPI#: 1184386419

6719 Alvarado Rd Ste 304
San Diego, CA 92120
(858)673 4400
SU -
M -
TU 9:00-6:00
W -
TH 9:00-6:00
F -
SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Sakya, Namrata

Female

License #: 19330*NPI#:* 1558021519

3080 N Park Way
San Diego, CA 92104
(619)294 6616
SU -
M 9:30-5:00
TU 9:00-4:00
W 9:30-11:30
TH 9:30-1:30
F 9:30-4:00
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Schlesinger, William**

Male

License #: 18989*NPI#:* 1841881091

3080 N Park Way
San Diego, CA 92104
(619)294 6616
SU -
M 9:00-5:00
TU 9:00-5:00
W 9:00-5:00
TH 9:00-5:00
F 9:00-5:00
SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Seitz, Gretchen**

Female

License #: AC8597*NPI#:* 1396876959

3320 2nd Ave
San Diego, CA 92103
(619)302 6846
SU -
M 3:00-7:00
TU 3:00-7:00
W 3:00-7:00
TH 9:30-6:30
F 3:00-7:00
SA 10:00-2:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Schlesinger, William**

Male

License #: 18989*NPI#:* 1841881091

9150 Chesapeake Dr Ste 120
San Diego, CA 92123
(619)542 0884
SU -
M 8:00-6:00
TU 8:00-6:00
W 8:00-6:00
TH 8:00-6:00
F 8:00-6:00
SA 8:00-2:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Seitz, Gretchen**

Female

License #: AC8597*NPI#:* 1396876959

9995 Carmel Mountain Rd Ste B10-B11
San Diego, CA 92129
(844)200 2426
SU -
M -
TU -
W -
TH -
F -
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Smyth, Carolyn**

Female

License #: AC17515*NPI#:* 1730614413

3636 5th Ave Ste 104
San Diego, CA 92103
(619)431 0547
SU -
M 1:00-5:00
TU -
W -
TH 1:00-5:00
F 9:00-1:00
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes*

Sperber, Gregory

Male

*License #: AC9297**NPI#: 1629125745*

5030 Camino de la Siesta Ste 208

San Diego, CA 92108

(619)881 0029

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA 9:00-1:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Szablak, Sharron**

Female

*License #: AC18757**NPI#: 1669019485*

5602 El Cajon Blvd

San Diego, CA 92115

(619)601 4103

SU -

M 9:00-3:00

TU 5:00-8:00

W 1:30-7:00

TH 9:00-3:00

F 9:00-4:00

SA 10:00-2:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Tang-Ritchie, Leng**

Female

*License #: AC14241**NPI#: 1497044580*

200 W Arbor Dr

San Diego, CA 92103

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Suess, Jill**

Female

*License #: AC7054**NPI#: 1417027871*

4732 Point Loma Ave Ste D

San Diego, CA 92107

(858)382 3938

SU -

M -

TU 9:00-7:00

W -

TH 9:00-7:00

F 1:00-7:00

SA 10:00-4:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Tang-Ritchie, Leng**

Female

*License #: AC14241**NPI#: 1497044580*

9333 Genesee Ave Ste 200

San Diego, CA 92121

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Tang-Ritchie, Leng**

Female

*License #: AC14241**NPI#: 1497044580*

4910 Directors Pl Ste 250

San Diego, CA 92121

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No*

Tang-Ritchie, Leng

Female

*License #: AC14241**NPI#: 1497044580*

330 Lewis St Ste 400

San Diego, CA 92103

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Teixeira, M David**

Male

*License #: AC8821**NPI#: 1780606095*

6612 Mission Gorge Rd Ste B

San Diego, CA 92120

(619)283 2335

SU -

M 9:00-6:00

TU -

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Tom, Celia**

Female

*License #: AC1577**NPI#: 1932208089*

1919 Grand Ave Ste 1E

San Diego, CA 92109

(858)270 5454

SU -

M 10:00-6:00

TU -

W -

TH -

F 10:00-6:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Tang-Ritchie, Leng**

Female

*License #: AC14241**NPI#: 1497044580*

9909 Mira Mesa Blvd Ste 200

San Diego, CA 92131

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Thomas, Enid Rose**

Female

*License #: AC8407**NPI#: 1659599223*

3023 Bunker Hill St Ste 201

San Diego, CA 92109

(619)548 6733

SU 10:00-1:00

M 12:00-8:00

TU 11:00-7:00

W 9:00-5:00

TH 12:00-8:00

F 2:00-6:00

SA 9:00-5:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Tran, Quang**

Male

*License #: AC11040**NPI#: 1821162199*

9625 Black Mountain Rd Ste 306

San Diego, CA 92126

(858)761 5317

SU -

M 2:00-6:00

TU 9:00-3:00

W -

TH 9:00-6:00

F 2:00-6:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Tran, Gary

Male

License #: 19351*NPI#:* 1205595469

5265 University Ave
 San Diego, CA 92105
 (619)376 2176

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Wang, Minchen**

Male

License #: AC6456*NPI#:* 1417944893

3023 Bunker Hill St Ste 206
 San Diego, CA 92109
 (858)688 7294

SU -

M 9:00-6:00

TU -

W 9:00-6:00

TH -

F 10:00-6:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Williams, Melinda**

Female

License #: AC13221*NPI#:* 1326361403

4870 Santa Monica Ave Ste 2C
 San Diego, CA 92107
 (619)337 4333

SU 9:00-4:00

M 9:00-6:00

TU -

W 9:00-6:00

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Velez, Kara**

Female

License #: AC18131*NPI#:* 1356834709

16776 Bernardo Center Dr Ste 211
 San Diego, CA 92128
 (619)995 0966

SU -

M 3:00-6:00

TU -

W 9:00-6:00

TH -

F 9:00-2:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Wells, Emily**

Female

License #: AC19023*NPI#:* 1861075046

9150 Chesapeake Dr Ste 120
 San Diego, CA 92123
 (619)542 0884

SU -

M 8:00-6:00

TU 8:00-6:00

W 8:00-6:00

TH 8:00-6:00

F 8:00-6:00

SA 8:30-0:30

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Woodhouse, Louella**

Female

License #: AC7670*NPI#:* 1952332686

3320 3rd Ave Ste B
 San Diego, CA 92103
 (619)293 3094

SU -

M -

TU 9:00-6:00

W -

TH 9:00-6:00

F 9:00-6:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No

Wunsch, Lindsay

Female

License #: AC18621*NPI#:* 1174096283

1545 Hotel Cir S Ste 185

San Diego, CA 92108

(631)897 4772

SU -

M 8:00-7:00

TU 12:00-7:00

W 8:00-1:00

TH 1:00-7:00

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Zimmer, Barry**

Male

License #: AC9358*NPI#:* 1720102601

11650 Iberia Pl Ste 215

San Diego, CA 92128

(858)487 8246

SU -

M -

TU 9:00-5:30

W -

TH 9:00-5:30

F 9:00-5:30

SA 8:30-0:30

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Cole, Jessica**

Female

License #: AC11426*NPI#:* 1467678797

815 Grand Ave Ste 105

San Marcos, CA 92078

(760)891 8083

SU -

M -

TU 10:30-6:00

W 9:00-5:00

TH 10:30-6:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Yokomori, Sachiko**

Female

License #: AC19970*NPI#:* 1407625973

1545 Hotel Cir S Ste 120

San Diego, CA 92108

(619)693 8559

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Zinner, Travis**

Male

License #: 19038*NPI#:* 1073180394

11665 Avena Pl Ste 205

San Diego, CA 92128

(858)733 0832

SU -

M -

TU -

W 8:00-6:00

TH 8:00-6:00

F 8:00-6:00

SA 8:00-6:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Gonzalez, Andres**

Male

License #: AC15708*NPI#:* 1841857729

1595 Grand Ave Ste 100

San Marcos, CA 92078

(760)736 6767

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes*

Son, Jae Jin

Female

License #: AC8587*NPI#:* 1649619412

277 Rancheros Dr Ste 101

San Marcos, CA 92069

(760)650 6660

SU -

M 9:00-6:00

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Handy, Heidi**

Female

License #: AC8648*NPI#:* 1518024785

9307 Carlton Hills Blvd Ste A

Santee, CA 92071

(619)280 7784

SU -

M 10:00-5:00

TU 10:00-5:00

W 10:00-5:00

TH 10:00-5:00

F 10:00-3:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Seo, Wanhee**

Female

License #: AC18035*NPI#:* 1366072126

9225 Carlton Hills Blvd Ste 18

Santee, CA 92071

(858)282 8320

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Dang, Sheri**

Female

License #: AC17713*NPI#:* 1225567001

9225 Carlton Hills Blvd Ste 18

Santee, CA 92071

(619)738 5374

SU -

M 9:20-6:00

TU -

W 9:20-1:30

TH 9:20-6:00

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Marcy, Melissa**

Female

License #: AC17002*NPI#:* 1730535519

10201 Mission Gorge Rd Ste A

Santee, CA 92071

(619)354 9570

SU -

M -

TU 9:00-3:00

W -

TH 12:00-6:00

F 9:00-3:00

SA 10:00-4:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Mayberry, Charles**

Male

License #: AC3641*NPI#:* 1487685012

765 Academy Dr

Solana Beach, CA 92075

(858)755 5215

SU -

M 10:00-6:00

TU 10:00-6:00

W 10:00-6:00

TH 10:00-6:00

F 10:00-6:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Son, Jae Jin

Female

*License #: AC8587**NPI#: 1649619412*

990 Highland Dr Ste 320

Solana Beach, CA 92075

(760)650 6660

SU -

M -

TU 8:00-8:00

W -

TH -

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Wells, Emily**

Female

*License #: AC19023**NPI#: 1861075046*

444 S Cedros Ave Ste 120

Solana Beach, CA 92075

(760)566 7848

SU -

M -

TU -

W -

TH -

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Kim, Min Joo**

Male

*License #: AC13813**NPI#: 1689941791*

115 Main St

Vista, CA 92084

(760)726 9660

SU -

M -

TU -

W -

TH 8:30-6:00

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Stevenson, Nancy**

Female

*License #: AC4332**NPI#: 1306009956*

765 Academy Dr

Solana Beach, CA 92075

(858)344 0889

SU -

M -

TU -

W 9:00-6:00

TH -

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Chen, Yuelan**

Female

*License #: AC9705**NPI#: 1265696785*

1830 Hacienda Dr Ste 3

Vista, CA 92081

(760)806 0064

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA 9:00-1:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Park, Seonghyeon**

Male

*License #: AC18102**NPI#: 1295254324*

410 S Melrose Dr Ste 200

Vista, CA 92081

(760)630 8060

SU -

M 9:00-5:30

TU 9:00-5:30

W -

TH 9:00-5:30

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Song, Carol

Female

License #: AC11388

NPI#: 1518166685

1000 Vale Terrace Dr

Vista, CA 92084

(760)631 5000

SU -

M 8:00-7:00

TU 8:00-7:00

W 8:00-7:00

TH 8:00-7:00

F 8:00-5:00

SA 9:00-4:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

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Room 509F, HHH Building
Washington, D.C. 20201
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Multi-Language Insert
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English We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at 1-800-452-4413. Someone who speaks English can help you. This is a free service.

Spanish Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al 1-800-452-4413. Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

Chinese Mandarin 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务，请致电 1-800-452-4413。我们的中文工作人员很乐意帮助您。这是一项免费服务。

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Tagalog Mayroon kaming libreng serbisyo sa pagsasalang-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggamot. Upang makakuha ng tagasalang-wika, tawagan lamang kami sa 1-800-452-4413. Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

French Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au 1-800-452-4413. Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

Vietnamese Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi 1-800-452-4413 sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.

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Arabic إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول ليس عليك سوى الاتصال بنا على 1-800-452-4413. سيقوم شخص ما يتحدث العربية بمساعدتك. هذه خدمة مجانية على مترجم فوري،

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Italian E disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero 1-800-452-4413. Un nostro incaricato che parla Italianovi fornirà l'assistenza necessaria. È un servizio gratuito.

Portuguese Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contacte-nos através do número 1-800-452-4413. Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

French Creole Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan 1-800-452-4413. Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

Polish Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer 1-800-452-4413. Ta usługa jest bezpłatna.

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Hmong Peb muaj cov kev pab cuam txhais lus pab dawb los teb tej lus nug uas koj muaj hais txog ntawm peb li kev noj qab haus huv los sis lub phiaj xwm tshuaj kho mob. Kom tau txais tus kws pab cuam txhais lus, tsuas yog hu rau peb ntawm 1-800-452-4413. Muaj cov paub lus Hmoob tuaj yeem pab tau koj. Qhov no yog pab dawb.

Ukrainian Ми надаємо безкоштовні послуги перекладача, щоб відповісти на будь-які запитання щодо нашого плану лікування чи надання лікарських засобів. Щоб скористатися послугами перекладача, просто зателефонуйте нам за номером 1-800-452-4413. Вам може допомогти хтось, хто розмовляє Українською. Це безкоштовна послуга.

Navajo D77 ats'77s baa lhly3 47 doodago azee' bee aa lhly3 b7na'7d7[kidgo 47 n1 ata' hodoonih77 h0l=. Ata' halne'4 biniiy4go, koj8' 1-800-452-4413 b44sh bee hod77lnih. Diné k'ehj7 y1[ti'i n7k1 adoolwo]. D77 t'11 j77k'eh bee an1'1wo.

Punjabi ਪੰਜਾਬੀ ਸਾਡੀ ਸਿਹਤ ਜਾਂ ਡਰੱਗ ਪਲਾਨ ਬਾਰੇ ਤੁਹਾਡੇ ਕਿਸੇ ਵੀ ਸਵਾਲ ਦਾ ਜਵਾਬ ਦੇਣ ਲਈ ਸਾਡੇ ਕੋਲ ਮੁਫਤ ਦੁਬਾਸੀਏ ਸੇਵਾਵਾਂ ਉਪਲਬਧ ਹਨ। ਇੱਕ ਦੁਬਾਸੀਆ ਲੈਣ ਲਈ, ਸਾਨੂੰ 1-800-452-4413 'ਤੇ ਕਾਲ ਕਰੋ। ਪੰਜਾਬੀ ਬੋਲਣ ਵਾਲਾ ਕੋਈ ਵੀ ਵਿਅਕਤੀ ਤੁਹਾਡੀ ਮਦਦ ਕਰ ਸਕਦਾ ਹੈ। ਇਹ ਇੱਕ ਮੁਫਤ ਸੇਵਾ ਹੈ।

Khmer យើងមានសេវាអ្នកបកប្រែផ្ទាល់មាត់ដោយឥតគិតថ្លៃដើម្បីឆ្លើយសំណួរនានា ដែលអ្នកអាចមានអំពីសុខភាព ឬគម្រោងឱសថរបស់យើង។ ដើម្បីទទួលបានអ្នកបកប្រែផ្ទាល់មាត់ម្នាក់ សូមទូរស័ព្ទទមកយើងខ្ញុំតាមលេខ 1-800-452-4413។ អ្នកណាម្នាក់ដែលនិយាយភាសាខ្មែរអាចជួយអ្នកបាន។ សេវានេះមិនគិតថ្លៃនោះទេ។

Mien Yie mbuo mbenc duqv maaih tengx wang-henh nzie faan waac mienh liouh dau waac bun muangx dongh nzunc baav meih maaih waac naaic taux yie mbuo gorngv taux yie nyei heng-wangc jauv-louc a'fai ndie-daan. Liouh lorx zipv longc faan waac nor, douc waac lorx taux yie mbuo yiem njiec naaiv 1-800-452-4413. Maaih mienh gorngv benx Mienh waac haih tengx nzie duqv meih. Naaiv se benx wang-henh nzie weih jauv-louc oc.

Lao ພວກເຮົາມີນາຍພາສາໂດຍບໍ່ເສຍຄ່າເພື່ອຕອບຄໍາຖາມຕ່າງໆທີ່ທ່ານອາດຈະມີກ່ຽວກັບສຸຂະພາບ ຫຼື ແຜນການຢາຂອງພວກເຮົາ. ເພື່ອໃຫ້ໄດ້ຮັບນາຍພາສາ, ພຽງແຕ່ໂທຫາພວກເຮົາທີ່ເບີ 1-800-452-4413. ມີຜູ້ຮູ້ ພາສາລາວ ສາມາດຊ່ວຍທ່ານ. ມີແມ່ນບໍລິການໂດຍບໍ່ເສຍຄ່າ.

Armenian Մեզ մոտ հասանելի են անվճար թարգմանչական ծառայություններ՝ մեր առողջապահական կազմակերպության հետ կապված Ձեր ցանկացած հարցին պատասխանելու համար: Թարգմանիչ լինելու համար պարզապես զանգահարեք մեզ 1-800-452-4413 հեռախոսահամարով: Ձեզ կօգնի հարցերն իմացող թարգմանիչը: Ծառայությունն անվճար է:

Farsi ما خدمات مترجم شفاهی رایگان ارائه می‌دهیم تا به هر گونه سوالی که در مورد طرح سلامت یا داروی ما دارید پاسخ دهیم. برای داشتن مترجم شفاهی، کافایت با ما به شماره 1-800-452-4413 تماس بگیرید. کسی که فارسی صحبت می‌کند می‌تواند به شما کمک کند. این یک خدمت رایگان است.

Thai ภาษาไทย เรามีบริการล่ามฟรีเพื่อตอบคำถามของคุณเกี่ยวกับสุขภาพหรือแผนด้านยาของคุณ หากต้องการบริการล่าม โปรดโทรหาเราที่ 1-800-452-4413 มีคนที่สามารถพูดภาษาไทยได้เพื่อช่วยเหลือคุณ บริการนี้เป็นบริการฟรี

Multi-Language Insert
Multi-Language Interpreter Services

English We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at 1-800-776-4466. Someone who speaks English can help you. This is a free service.

Spanish Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al 1-800-776-4466. Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

Chinese Mandarin 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务，请致电 1-800-776-4466。我们的中文工作人员很乐意帮助您。这是一项免费服务。

Chinese Cantonese 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯服務。如需翻譯服務，請致電 1-800-776-4466。我們講中文的人員將樂意為您提供幫助。這是一項免費服務。

Tagalog Mayroon kaming libreng serbisyo sa pagsasaling-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggagamot. Upang makakuha ng tagasaling-wika, tawagan lamang kami sa 1-800-776-4466. Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

French Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au 1-800-776-4466. Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

Vietnamese Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi 1-800-776-4466 sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.

German Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher erreichen Sie unter 1-800-776-4466. Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

Korean 당사는 의료 보험 또는 약품 보험에 관한 질문에 대해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 1-800-776-4466 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

Russian Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону 1-800-776-4466. Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

Arabic إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول ليس عليك سوى الاتصال بنا على 1-800-776-4466. سيقوم شخص ما يتحدث العربية بمساعدتك. هذه خدمة مجانية على مترجم فوري،

Hindi हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं. एक दुभाषिया प्राप्त करने के लिए, बस हमें 1-800-776-4466 पर फोन करें. कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है. यह एक मुफ्त सेवा है.

Italian E disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero 1-800-776-4466. Un nostro incaricato che parla Italianovi fornirà l'assistenza necessaria. È un servizio gratuito.

Portuguese Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contacte-nos através do número 1-800-776-4466. Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

French Creole Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan 1-800-776-4466. Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

Polish Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer 1-800-776-4466. Ta usługa jest bezpłatna.

Japanese 当社の健康 健康保険と薬品 処方薬プランに関するご質問にお答えするために、無料の通訳サービスがあります。通訳をご用命になるには、1-800-776-4466 にお電話ください。日本語を話す人者が支援いたします。これは無料のサービスです。

Hmong Peb muaj cov kev pab cuam txhais lus pab dawb los teb tej lus nug uas koj muaj hais txog ntawm pab li kev noj qab haus huv los sis lub phiaj xwm tshuaj kho mob. Kom tau txais tus kws pab cuam txhais lus, tsuas yog hu rau pab ntawm 1-800-776-4466. Muaj cov paub lus Hmoob tuaj yeem pab tau koj. Qhov no yog pab dawb.

Ukrainian Ми надаємо безкоштовні послуги перекладача, щоб відповісти на будь-які запитання щодо нашого плану лікування чи надання лікарських засобів. Щоб скористатися послугами перекладача, просто зателефонуйте нам за номером 1-800-776-4466. Вам може допомогти хтось, хто розмовляє Українською. Це безкоштовна послуга.

Navajo D77 ats'77s baa lhly3 47 doodago azeé' bee aa lhly3 b7na'7d7[kidgo 47 n1 ata' hodoolnih77 h0l=. Ata' halne'4 biniiy4go, koj8' 1-800-776-4466 b44sh bee hod77lnih. Diné k'ehj7 y1[ti'i n7k1 adoolwo[. D77 t'11 j77k'eh bee an1'1wo.

Punjabi ਪੰਜਾਬੀ ਸਾਡੀ ਸਿਹਤ ਨਾਂ ਡਰੱਗ ਪਲਾਨ ਬਾਰੇ ਤੁਹਾਡੇ ਕਿਸੇ ਵੀ ਸਵਾਲ ਦਾ ਜਵਾਬ ਦੇਣ ਲਈ ਸਾਡੇ ਕੋਲ ਮੁਫਤ ਦੁਬਾਰੀ ਸੇਵਾਵਾਂ ਉਪਲਬਧ ਹਨ। ਇੱਕ ਦੁਬਾਰੀ ਲੈਣ ਲਈ, ਸਾਨੂੰ 1-800-776-4466 'ਤੇ ਕਾਲ ਕਰੋ। ਪੰਜਾਬੀ ਬੋਲਣ ਵਾਲਾ ਕੋਈ ਵੀ ਵਿਅਕਤੀ ਤੁਹਾਡੀ ਮਦਦ ਕਰ ਸਕਦਾ ਹੈ। ਇਹ ਇੱਕ ਮੁਫਤ ਸੇਵਾ ਹੈ।

Khmer យើងមានសេវាអ្នកបកប្រែផ្ទាល់មាត់ដោយឥតគិតថ្លៃដើម្បីឆ្លើយសំណួរនានា ដែលអ្នកអាចមានអំពីសុខភាព ឬគម្រោងឱសថរបស់យើង។ ដើម្បីទទួលបានអ្នកបកប្រែផ្ទាល់មាត់ម្នាក់ សូមទូរស័ព្ទមកយើងខ្ញុំតាមលេខ 1-800-776-4466។ អ្នកណាម្នាក់ដែលនិយាយភាសាខ្មែរអាចជួយអ្នកបាន។ សេវានេះមិនគិតថ្លៃនោះទេ។

Mien Yie mbuo mbenc duqv maaih tengx wang-henh nzie faan waac mienh liouh dau waac bun muangx dongh nzunc baav meih maaih waac naaic taux yie mbuo gorngv taux yie nyei heng-wangc jauv-louc a'fai ndie-daan. Liouh lorx zipv longc faan waac nor, douc waac lorx taux yie mbuo yiem njiec naaiv 1-800-776-4466. Maaih mienh gorngv benx Mienh waac haih tengx nzie duqv meih. Naaiv se benx wang-henh nzie weih jauv-louc oc.

Lao ພວກເຮົາມີນາຍພາສາໂດຍບໍ່ເສຍຄ່າເພື່ອຕອບຄໍາຖາມຕ່າງໆທີ່ທ່ານອາດຈະມີກ່ຽວກັບສຸຂະພາບ ຫຼື ແຜນການຢາຂອງພວກເຮົາ. ເພື່ອໃຫ້ໄດ້ຮັບນາຍພາສາ, ພຽງແຕ່ໂທຫາພວກເຮົາທີ່ບີ 1-800-776-4466. ມີຜູ້ຮູ້ພາສາລາວ ສາມາດຊ່ວຍທ່ານ. ນີ້ແມ່ນບໍລິການໂດຍບໍ່ເສຍຄ່າ.

Armenian Մեզ քոն հասանելի են անվճար թարգմանչական ծառայություններ՝ մեր առողջապահական կազմակերպիչի հետ կապված Ձեր ցանկացած հարցի և պատասխանելու համար: Թարգմանիչ և ներկայից համար պարզապես զանգահարեք մեզ 1-800-776-4466 հեռախոսահամարով: Ձեզ կօգնի հարցերն իմացող թարգմանիչը: Ծառայությունն անվճար է:

Farsi ما خدمات مترجم شفاهی رایگان ارائه می‌دهیم تا به هر گونه سوالی که در مورد طرح سلامت یا داروی ما دارید پاسخ دهیم. برای داشتن مترجم شفاهی، کافیت با ما به شماره 1-800-776-4466 تماس بگیرید. کسی که فارسی صحبت می‌کند می‌تواند به شما کمک کند. این یک خدمت رایگان است.

Thai ภาษาไทย เรามีบริการล่ามฟรีเพื่อตอบคำถามของคุณเกี่ยวกับสุขภาพหรือแผนด้านยาของคุณ หากต้องการบริการล่าม โปรดโทรหาเราที่ 1-800-776-4466 มีคนที่สามารถพูดภาษาไทยได้เพื่อช่วยเหลือคุณ บริการนี้เป็นบริการฟรี



LANGUAGE ASSISTANCE NOTICE

English ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-800-452-4413 (TTY: 711), 8:00 a.m. to 8:00 p.m., seven days a week. The call is free.

中文 Chinese 请注意：如果您说中文，可以免费获得语言协助服务。请拨打 1-800-452-4413 (听障和语障专线：711)，每周七天办公，早上 8:00 至晚上 8:00。此电话为免付费专线。

한국어 Korean 주: 귀하가 한국어를 사용하시는 경우, 무료로 언어 지원 서비스를 이용하실 수 있습니다. 1-800-452-4413 (TTY: 711) 번으로 주 7 일, 오전 8 시부터 오후 8 시까지 전화하실 수 있습니다. 이 전화는 무료입니다.

Русский Russian ОБРАТИТЕ ВНИМАНИЕ! Если Вы говорите по-русски, мы можем предложить Вам бесплатные услуги языковой поддержки. Звоните по телефону 1-800-452-4413 (TTY: 711) с 8:00 до 20:00 без выходных. Звонок бесплатный.

فارسی Farsi

توجه: اگر به زبان فارسی صحبت می کنید، خدمات امداد زبانی بدون اخذ هزینه در اختیار شما می باشد. با شماره 1-800-452-4413- 4413 (TTY: 711)، از ساعت 8:00 صبح تا 8:00 شب در هفت روز هفته تماس بگیرید. این تماس رایگان است.

भाषा Hindi ध्यान: यदि आप भाषा बोलते हैं, तो आपके लिए भाषा सहायता सेवाएं नि:शुल्क उपलब्ध हैं। फ़ोन करना 1-800-452-4413 (TTY: 711), सुबह 8:00 बजे से शाम 8:00 बजे तक, सप्ताह के सातों दिन। फ़ोन करना फ़्री है।

Lus Hmoob Hmong LUS CEEV: Yog koj hais Lus Hmoob, muaj kev pab txhais lus pub dawb rau koj. Hu rau 1-800-452-4413 (TTY: 711), 8:00 teev sawv ntxov txog 8:00 teev tsaus ntuj, xya hnuv hauv ib lub as thiv. Qhov hu xov tooj no yog hu dawb xwb.

Español Spanish ATENCIÓN: Si usted habla español, hay a su disposición servicios de asistencia de idiomas sin costo. Llame al 1-800-452-4413 (TTY: 711), de 8:00 a.m. a 8:00 p.m., los siete días de la semana. La llamada es gratuita.

Tiếng Việt Vietnamese LƯU Ý: Nếu quý vị nói tiếng Việt, chúng tôi sẽ cung cấp miễn phí dịch vụ hỗ trợ ngôn ngữ cho quý vị. Gọi số 1-800-452-4413 (TTY: 711), 8 giờ sáng đến 8 giờ tối, bảy ngày trong tuần. Cuộc gọi này miễn phí.

Tagalog PAUNAWA: Kung nagsasalita kayo ng Tagalog, may mga available na lib्रेng serbisyo ng tulong sa wika para sa inyo. Tumawag sa 1-800-452-4413 (TTY: 711), 8:00 a.m. hanggang 8:00 p.m., pitong araw sa isang linggo. Libre ang tawag.

العربية Arabic

تنبيه: إذا كنت تتحدث اللغة العربية، يتوفر لك خدمات المساعدة اللغوية المجانية. اتصل على الرقم 1-800-452-4413 (TTY: 711)، من الساعة 8:00 صباحًا إلى 8:00 مساءً طوال أيام الأسبوع. علمًا بأن هذه المكالمات مجانية.

ພາສາລາວ Laotian ສິ່ງສຳຄັນ: ຖ້າທ່ານເວົ້າພາສາລາວແມ່ນມີບໍລິການຊ່ວຍເຫຼືອທາງດ້ານພາສາບໍ່ເສຍຄ່າໃຫ້ທ່ານ. ໂທຫາເບີ 1-800-452-4413 (TTY: 711), 8:00 ໂມງເຊົ້າ ຫາ 8:00 ໂມງແລງ, ເຈັດວັນຕໍ່ອາທິດ. ການໂທແມ່ນບໍ່ເສຍຄ່າ.

日本語 Japanese 注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-800-452-4413 (TTY: 711) まで、お電話にてご連絡ください。毎日午前 8 時から午後 8 時まで受け付けています。通話は無料です。

ภาษาไทย Thai

เรียน หากคุณพูดภาษา ภาษาไทย เรามีบริการความช่วยเหลือด้านภาษาให้แก่คุณโดยไม่มีค่าใช้จ่าย โทร 1-800-452-4413 (TTY: 711) 8:00 น. ถึง 20:00 น. ได้ตลอดเจ็ดวันต่อสัปดาห์ โทรฟรี ไม่มีค่าใช้จ่าย

ਪੰਜਾਬੀ Punjabi ਸਾਵਧਾਨ : ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ, ਉਪਲਬਧ ਹਨ | ਕਾਲ ਕਰੋ 1-800-452-4413 (TTY: 711), ਸਵੇਰੇ 8:00 ਵਜੇ ਤੋਂ ਸ਼ਾਮ 8:00 ਵਜੇ ਤੱਕ, ਹਫ਼ਤੇ ਦੇ ਸੱਤ ਦਿਨ ਹਫ਼ਤੇ ਦੇ ਸੱਤ ਦਿਨ. ਕਾਲ ਫ੍ਰੀ ਹੈ |

ខ្មែរ Khmer ចាប់អារម្មណ៍: បើសិនអ្នកនិយាយភាសាខ្មែរ សេវាជំនួយភាសា គឺមានសំរាប់អ្នក ដោយឥតគិតថ្លៃ។ ហៅ 1-800-452-4413 (TTY: 711) ម៉ោង 8:00 ព្រឹក ដល់ 8:00 យប់ ប្រាំពីរថ្ងៃមួយអាទិត្យ។ គឺឥតគិតថ្លៃទេ។

Հայերեն Armenian ՈՒՇԱԴՐՈՒԹՅՈՒՆ՝ Եթե խոսում եք հայերեն, Ձեզ տրամադրվելի են անվճար լեզվաբան օգնություն ծառայություններ: Ձանգահայեր 1-800-452-4413 (TTY՝ 711) համարով, 8:00-ից 20:00, շաբաթը յոթ օր: Հեռախոսազանգն անվճար է:

Українська Ukrainian ЗВЕРНІТЬ УВАГУ! Якщо Ви розмовляєте українською, ми можемо запропонувати Вам безкоштовні послуги мовної підтримки. Телефонуйте 1-800-452-4413 (TTY: 711) з 8:00 до 20:00 без вихідних. Дзвінок безкоштовний.

Mienh Mien TOV JANGX LONGX OC: Beiv taix meih gorngv Mienh waac nor, ninh mbuo gorn zangc duqv mbenc nzoih wang-henh nzie weih faan waac bun meih muangx maiv zuqc feix liuc cuotv zinh nyaanh. Douc waac lorx taux 1-800-452-4413 (TTY: 711), 8:00 diemv ziangh hoc lungnh ndorm mingh taux 8:00 ziangh hoc lungnh muonz, yietc norm liv baaiz se koi nzoih siec hnoi. Naaiv norm douc waac gorn se wang-henh longc maiv zuqc feix liuc cuotv zinh nyaanh.

Notes



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